
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.

Ms. Sherryl Newman

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

05/10/2019

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

1. Full Name of Constituent-Service Program Ward 4 Constituent Services Fund	REPORT COVERING THE PERIOD FROM: 4/2/2018 TO: 7/1/2018	
I. RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (EXCLUDING LOANS) FROM:		
(a) Itemized monetary contributions from other than the elected official (Schedule A)	\$ 25,909.00	\$ 26,409.00 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))	\$ 25,909.00	\$ 26,409.00 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS RECEIVED		
(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)
14. OTHER RECEIPTS (DIVIDENDS, INTEREST, etc.)(Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 397.77	\$ 460.70 15
16. TOTAL RECEIPTS (add Lines 11(f), 12, 13(c), 14 and 15)	\$ 26,306.77	\$ 26,869.70 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 388.86	\$ 403.66 17
18. ALL OTHER EXPENDITURES (Schedule B-1)	\$ 13,574.78	\$ 15,452.59 18
19. LOAN REPAYMENTS:		
(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)
20. TOTAL EXPENDITURES (add Lines 17, 18, and 19(c))	\$ 13,963.64	\$ 15,856.25 20
III. CASH SUMMARY		
21. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	4,024.97
22. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	26,306.77
23. SUBTOTAL (add Lines 21 and 22)	\$	30,331.74
24. TOTAL EXPENDITURES THIS PERIOD (from Line 20)	\$	13,963.64
25. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 24 from Line 23)	\$	16,368.10

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 Ward 4 Constituent Services Fund			
1. Full Name, Mailing Address and Zip Code Loretta Neumann 7124 Piney Branch Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
2. Full Name, Mailing Address and Zip Code Gwendolyn Cofield 305 Quackenbos St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2018	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 15.00
3. Full Name, Mailing Address and Zip Code Carlos Stewart 103 Madison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2018	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 5.00
4. Full Name, Mailing Address and Zip Code Alan Korn 6801 32nd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 200.00
5. Full Name, Mailing Address and Zip Code Donna Ellis 710 Peabody St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

<p>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.</p>			
<p>Full Name of Constituent-Service Program Ward 4 Constituent Services Fund</p>			
			<p>Aggregate Year-To-date \$ 50.00</p>
<p>6. Full Name, Mailing Address and Zip Code Jonathan Cohen 5616 7th St NW, Washington, DC 20011</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 04/28/2018</p>	<p>Amount of Each Receipt This Period \$ 100.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer Self-employed</p>		
			<p>Aggregate Year-To-date \$ 100.00</p>
<p>7. Full Name, Mailing Address and Zip Code Loretta Neumann 7124 Piney Branch Rd NW, Washington, DC 20012</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/01/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 85.00</p>
<p>8. Full Name, Mailing Address and Zip Code Marie Peoples 1429 Geranium St NW, Washington, DC 20012</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/01/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>9. Full Name, Mailing Address and Zip Code Joan Thomas 715 Varnum St NW, Washington, DC 20011</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/01/2018</p>	<p>Amount of Each Receipt This Period \$ 70.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 105.00</p>

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
10. Full Name, Mailing Address and Zip Code Joan Thomas 715 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 105.00
11. Full Name, Mailing Address and Zip Code Evon Ervin 1925 Tulip St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/03/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
12. Full Name, Mailing Address and Zip Code Patricia Lockwood 133 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/03/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
13. Full Name, Mailing Address and Zip Code Kate Moore 7032 31st St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/03/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
14. Full Name, Mailing Address and Zip Code Joan Thomas 715 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/03/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		

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<p>Full Name of Constituent-Service Program Ward 4 Constituent Services Fund</p>			
			<p>Aggregate Year-To-date \$ 140.00</p>
<p>15. Full Name, Mailing Address and Zip Code Donna Ellis 710 Peabody St NW, Washington, DC 20011</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/07/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 85.00</p>
<p>16. Full Name, Mailing Address and Zip Code George Simpson 51 Bryant St NW, Washington, DC 20001</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/17/2018</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Principal Name and Address of Employer Spectrum Management 1225 Pennsylvania Ave SE, Washington, DC 20003</p>		
			<p>Aggregate Year-To-date \$ 500.00</p>
<p>17. Full Name, Mailing Address and Zip Code Corey Griffin 1515 Lawrence St NE, Washington, DC 20017</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/17/2018</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer Self</p>		
			<p>Aggregate Year-To-date \$ 500.00</p>
<p>18. Full Name, Mailing Address and Zip Code Kevin Parker 1884 Columbia Rd NW, Washington, DC 20009</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/18/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer Self</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
19. Full Name, Mailing Address and Zip Code Estrellita Fitzhugh 431 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/18/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 40.00
20. Full Name, Mailing Address and Zip Code Bryan Parchment 9808 E Bexhill Dr, Kensington, MD 20895	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/18/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer Self		
Aggregate Year-To-date			\$ 35.00
21. Full Name, Mailing Address and Zip Code Jennifer Hara 1326 Randolph St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/18/2018	Amount of Each Receipt This Period \$ 70.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Institute for Private Public Partnerships 1100 New York Ave NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 70.00
22. Full Name, Mailing Address and Zip Code Janene Jackson 2114 Rand Pl NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/24/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Holland & Knight 800 17th St NW, Washington, DC 20006		
Aggregate Year-To-date			\$ 500.00
23. Full Name, Mailing Address and Zip Code PReston Smith 452 M St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/24/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Rocketship Public schools 2335 Raynolds Pl SE, Washington, DC 20020		

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<p>Full Name of Constituent-Service Program Ward 4 Constituent Services Fund</p>			
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>24. Full Name, Mailing Address and Zip Code Emmanuel Bailey 4002 Cotton Tree Ln, Burtonsville, MD 20866</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/25/2018</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>
<p>Contributor Type Individual</p>	<p>Occupation CEO Name and Address of Employer DC09 55 M St SE, Washington, DC 20003</p>		
			<p>Aggregate Year-To-date \$ 500.00</p>
<p>25. Full Name, Mailing Address and Zip Code David Jannerone 3715 Kansas Ave NW, Washington, DC 20010</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/25/2018</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Policy Name and Address of Employer Taylor Adams Associates 1509 16th St NW Ste 606, Washington, DC 20036</p>		
			<p>Aggregate Year-To-date \$ 500.00</p>
<p>26. Full Name, Mailing Address and Zip Code Russell Lidner 1025 Thomas Jefferson St NW, Washington, DC 20007</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/25/2018</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Employee Name and Address of Employer Forge Company 1050 Thomas Jefferson St NW, Washington, DC 20007</p>		
			<p>Aggregate Year-To-date \$ 500.00</p>
<p>27. Full Name, Mailing Address and Zip Code Roger Limoges 1622 Juniper St NW, Washington, DC 20012</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 05/25/2018</p>	<p>Amount of Each Receipt This Period \$ 100.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Federal Government Name and Address of Employer Federal Government</p>		
			<p>Aggregate Year-To-date \$ 100.00</p>

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

28. Full Name, Mailing Address and Zip Code Evelyn Lucas 112 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00

29. Full Name, Mailing Address and Zip Code Marilyn Muir 526 Buchanan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Employee Name and Address of Employer American University 4400 Massachusetts Ave NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 40.00

30. Full Name, Mailing Address and Zip Code Judy Ponds 1721 Verbena St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 35.00

31. Full Name, Mailing Address and Zip Code Blanchita Porter 6800 Piney Branch Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
32. Full Name, Mailing Address and Zip Code Casey Stringer 1821 Sudbury Ln NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Broughton Construction Company 4832 Nannie Helen Burroughs Ave NE, Washington, DC 20019		
Aggregate Year-To-date			\$ 500.00
33. Full Name, Mailing Address and Zip Code Joan Thomas 715 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 175.00
34. Full Name, Mailing Address and Zip Code Mark Tuohey 1655 Kalmia Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
35. Full Name, Mailing Address and Zip Code MCN Build 1214 28th St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
36. Full Name, Mailing Address and Zip Code RAMW 1625 K St NW, Washington, DC 20006	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		

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 Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 500.00
37. Full Name, Mailing Address and Zip Code Veterans Service Corp. 55 M St SE Ste 350, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
38. Full Name, Mailing Address and Zip Code Washington Boat Lines, Inc 1050 Thomas Jefferson St NW Ste 100, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
39. Full Name, Mailing Address and Zip Code Premium Title & Escrow 3407 14th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/25/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
40. Full Name, Mailing Address and Zip Code Yolanda C Holmes MD, PC 1140 Connecticut Ave NW, Washington, DC 20036	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 100.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
41. Full Name, Mailing Address and Zip Code Blue Sky Housing LLC 1900 M St NW, Washington, DC 20036	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
42. Full Name, Mailing Address and Zip Code Charles Paret LLC 1215 1st St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
43. Full Name, Mailing Address and Zip Code Tonya Kinlow 4124 2nd St SW, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2018	Amount of Each Receipt This Period \$ 235.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer Children's Hospital 111 Michigan Ave NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 235.00
44. Full Name, Mailing Address and Zip Code Charlene Drew Jarvis 1789 Sycamore St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 500.00
45. Full Name, Mailing Address and Zip Code Philip Thomas 2830 University Ter NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer Self		

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 Ward 4 Constituent Services Fund			
		Aggregate Year-To-date \$ 35.00	
46. Full Name, Mailing Address and Zip Code Robert Childs 1624 Webster St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Pastor Name and Address of Employer Berean Baptist Church 924 Madison St NW, Washington, DC 20011		
		Aggregate Year-To-date \$ 35.00	
47. Full Name, Mailing Address and Zip Code Kevin Jenkins 1236 Underwood St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government		
		Aggregate Year-To-date \$ 35.00	
48. Full Name, Mailing Address and Zip Code Raymond Nix 4411 Sheridan St, University Park, MD 20782	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer Urban Matters Development Partners LLC 1226 Vermont Ave NW, #200, Washington, DC 20005		
		Aggregate Year-To-date \$ 500.00	
49. Full Name, Mailing Address and Zip Code Maria Wilson 1310 Decatur St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
		Aggregate Year-To-date \$ 300.00	

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
50. Full Name, Mailing Address and Zip Code Dantes Partners 701 Lamont St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/04/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
51. Full Name, Mailing Address and Zip Code Ashby Beal 3327 Stephenson PL NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Law Offices of Ashby Beal 1730 Rhode Island Ave NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 35.00
52. Full Name, Mailing Address and Zip Code Janette Firshein 3391 Stephenson PL NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Burness 7910 Woodmont Ave Ste 700, Bethesda, MD 20814		
Aggregate Year-To-date			\$ 40.00
53. Full Name, Mailing Address and Zip Code Mary Gibbons 3314 Stephenson PL NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
54. Full Name, Mailing Address and Zip Code Alan Koch 3338 Stephenson PL NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Employee Name and Address of Employer IBM/Federal Government Technology Sales 600 14th St NW Ste 300, Washington, DC 20005		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
			Aggregate Year-To-date \$ 35.00
55. Full Name, Mailing Address and Zip Code Darren MacLennan 3326 Stephenson PL NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Federal Systems Integration 1800 F St NW Ste 3100, Washington, DC 20405		
			Aggregate Year-To-date \$ 35.00
56. Full Name, Mailing Address and Zip Code James Smith 3339 Stephenson PL NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
			Aggregate Year-To-date \$ 250.00
57. Full Name, Mailing Address and Zip Code Food Service PAC 1625 K St NW, Washington, DC 20006	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/07/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
			Aggregate Year-To-date \$ 500.00
58. Full Name, Mailing Address and Zip Code Ralph Neal 1909 Tulip St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
			Aggregate Year-To-date \$ 40.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Ward 4 Constituent Services Fund

59. Full Name, Mailing Address and Zip Code Helen Compton Harris 6621 3rd St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Richard Wright Public Charter School 770 M St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 50.00
60. Full Name, Mailing Address and Zip Code Joy & Wayne Alexander 1334 Sheridan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Montgomery County Government Name and Address of Employer Montgomery County Government 100 Maryland Ave, Rockville, MD 20850		
Aggregate Year-To-date			\$ 100.00
61. Full Name, Mailing Address and Zip Code Virginia Ali 8345 E Beach Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Ben's Chili Bowl 1213 U St NW, Washington, DC 20009		
Aggregate Year-To-date			\$ 35.00
62. Full Name, Mailing Address and Zip Code Sonya Ali 1818 Shepherd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Ben' Chili Bowl 1213 U St NW, Washington, DC 20009		
Aggregate Year-To-date			\$ 35.00
63. Full Name, Mailing Address and Zip Code Vanessa Allen Murray 1560 Hemlock St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Employee Name and Address of Employer SPECPRO Management 1826 N Loop 1604 W Ste 336B, San Antonio, TX 78248		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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<p>Full Name of Constituent-Service Program Ward 4 Constituent Services Fund</p>			
			<p>Aggregate Year-To-date \$ 100.00</p>
<p>64. Full Name, Mailing Address and Zip Code Wallace Ashby 7464 7th St NW, Washington, DC 20012</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/08/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Self-Employed Name and Address of Employer Self-Employed</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>65. Full Name, Mailing Address and Zip Code Bobby Austin 1800 Birch Dr NW, Washington, DC 20012</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/08/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Self-Employed Name and Address of Employer Self-Employed</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>66. Full Name, Mailing Address and Zip Code Helga Baskett-Tippett 400 Gallatin St NW, Washington, DC 20011</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/08/2018</p>	<p>Amount of Each Receipt This Period \$ 150.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 150.00</p>
<p>67. Full Name, Mailing Address and Zip Code Doris Belton 7530 16th St NW, Washington, DC 20012</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/08/2018</p>	<p>Amount of Each Receipt This Period \$ 135.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 135.00</p>

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
68. Full Name, Mailing Address and Zip Code William Bennett 2237 Sudbury Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 85.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Harika Consulting LLC 1325 G St NW Ste 500, Washington, DC 20005		
Aggregate Year-To-date			\$ 85.00
69. Full Name, Mailing Address and Zip Code Lisa Bess 7234 15th Pl NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Employee Name and Address of Employer PAE 1320 N Courthouse Rd, Arlington, VA 22201		
Aggregate Year-To-date			\$ 35.00
70. Full Name, Mailing Address and Zip Code Aithea Black 5019 5th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 20.00
71. Full Name, Mailing Address and Zip Code Hazel Broadnax 717 Quackenbos St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 135.00
72. Full Name, Mailing Address and Zip Code Charrise Brossard 7714 13th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer ADP 800 Connecticut Ave NW, Washington, DC 20006		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 35.00**

73. Full Name, Mailing Address and Zip Code Collean Brown 4927 4th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 35.00**

74. Full Name, Mailing Address and Zip Code Marilyn Brown 3050 Chestnut St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 50.00**

75. Full Name, Mailing Address and Zip Code Laverne Brown 7552 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 50.00**

76. Full Name, Mailing Address and Zip Code William Burns 700 Longfellow St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 235.00
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Contributor Type Individual	Occupation Policy Name and Address of Employer Air BnB 888 Brannan St, San Francisco, CA 94103
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Aggregate Year-To-date **\$ 235.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
77. Full Name, Mailing Address and Zip Code Calvin Butler Jr. 3823 20th St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Employee Name and Address of Employer DC FEMS 2000 14th St NW Fl 5, Washington, DC 20009		
Aggregate Year-To-date			\$ 100.00
78. Full Name, Mailing Address and Zip Code Kenneth Clarke 2249 Sudbury Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
79. Full Name, Mailing Address and Zip Code Eleanor Compton 6621 3rd St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
80. Full Name, Mailing Address and Zip Code Helen Compton Harris 6621 3rd St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Richard Wright Public Charter School 770 M St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 85.00
81. Full Name, Mailing Address and Zip Code Darryl Cullins 38466 Lori Ln, Westland, MI 48185	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Employee Name and Address of Employer 3M 1425 K St NW Ste 300, Washington, DC 20005		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 35.00
82. Full Name, Mailing Address and Zip Code Juana Cumberbatch-Beverly 5812 6th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 33.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 33.00
83. Full Name, Mailing Address and Zip Code Michael Davis 4308 Georgia Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Montage South Condominium 4308 Georgia Ave NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 250.00
84. Full Name, Mailing Address and Zip Code Victoria Davis Cust 7516 Radnor Rd, Bethesda, MD 20817	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 235.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 235.00
85. Full Name, Mailing Address and Zip Code Marilyn Dillon 11201 Prelude Ct, Silver Spring, MD 20901	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation US Dept. Energy Name and Address of Employer US Dept Energy 1000 Independence Ave SW, Washington, DC 20585		
Aggregate Year-To-date			\$ 100.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Ward 4 Constituent Services Fund

86. Full Name, Mailing Address and Zip Code Herbert Dixon 1801 Plymouth St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
87. Full Name, Mailing Address and Zip Code Enid Doggett 2924 10th St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input 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) 06/08/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed 3108 12th St NE, Washington, DC 20017		
Aggregate Year-To-date			\$ 25.00
88. Full Name, Mailing Address and Zip Code Christopher Dyer 1450 N St NW, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 40.00
89. Full Name, Mailing Address and Zip Code Patrica "Pat" Elwood 2740 34th St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 50.00
90. Full Name, Mailing Address and Zip Code Deborah Evans 5304 Chillum Pl NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 200.00**

91. Full Name, Mailing Address and Zip Code Hugene Tyrell Fields 5423 Lakeford Ln, Bowie, MD 20720	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
	Contributor Type Individual		

Occupation Accountant Name and Address of Employer Gelman Rosenberg & Friedman CPA 4550 Montgomery Ave Ste 650N, Bethesda, MD 20814
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Aggregate Year-To-date **\$ 35.00**

92. Full Name, Mailing Address and Zip Code Richard Fitzhugh 431 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
	Contributor Type Individual		

Occupation Self-Employed Name and Address of Employer Self-Employed
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Aggregate Year-To-date **\$ 35.00**

93. Full Name, Mailing Address and Zip Code Bettie Florence 509 Oglethorpe St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 40.00
	Contributor Type Individual		

Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 40.00**

94. Full Name, Mailing Address and Zip Code Xiomara Flores 1325 Randolph St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
	Contributor Type Individual		

Occupation Self-Employed Name and Address of Employer Self-Employed
--

Aggregate Year-To-date **\$ 35.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
95. Full Name, Mailing Address and Zip Code Ronald Flowers 7705 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
96. Full Name, Mailing Address and Zip Code Mattie Flowers 7705 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
97. Full Name, Mailing Address and Zip Code Simon Francis 1613 Billman Ln, Silver Spring, MD 20902	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 135.00
98. Full Name, Mailing Address and Zip Code Jasun Frone 4507 Blagden Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Policy Name and Address of Employer Plural Sight 182 N Union Ave, Farmington, UT 84025		
Aggregate Year-To-date			\$ 135.00
99. Full Name, Mailing Address and Zip Code Seth Gabriel 6225 29th St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 70.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 70.00**

100. Full Name, Mailing Address and Zip Code Aeva Gaymon 7315 13th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed 4228 Wisconsin Ave NW, Washington, DC 20016
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Aggregate Year-To-date **\$ 35.00**

101. Full Name, Mailing Address and Zip Code Ella Gilbert 6804 32nd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 150.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 150.00**

102. Full Name, Mailing Address and Zip Code Judi Gold 1901 Ingleside Ter NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 135.00
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Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004
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Aggregate Year-To-date **\$ 135.00**

103. Full Name, Mailing Address and Zip Code Margery Goldberg 1429 Iris St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
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Contributor Type Individual	Occupation Owner Name and Address of Employer Zenith Gallery 1111 Pennsylvania Ave NW, Washington, DC 20004
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Aggregate Year-To-date **\$ 50.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
104. Full Name, Mailing Address and Zip Code John Gordon 5802 8th St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Employee Name and Address of Employer UDC 4200 Connecticut Ave NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 50.00
105. Full Name, Mailing Address and Zip Code Byron Grant 338 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Sales Name and Address of Employer Salesforce 2550 Wasser Ter Ste 100, Herndon, VA 20171		
Aggregate Year-To-date			\$ 35.00
106. Full Name, Mailing Address and Zip Code Linda Gray 6430 Blair Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
107. Full Name, Mailing Address and Zip Code Andrei Greenawalt 4111 Fessenden St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Policy Name and Address of Employer Via 2233 Wisconsin Ave NW Ste 210, Washington, DC 20007		
Aggregate Year-To-date			\$ 500.00
108. Full Name, Mailing Address and Zip Code Alvin Gross 1940 Upshur St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real Estate Name and Address of Employer Self-Employed		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 100.00
109. Full Name, Mailing Address and Zip Code Philip Hall 6024 8th St NW Apt A6, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation US Postal Service Name and Address of Employer US Postal Service 470 Lenfant Plz SW Ste 604, Washington, DC 20024		
Aggregate Year-To-date			\$ 135.00
110. Full Name, Mailing Address and Zip Code Trina Harrod 5723 3rd Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
111. Full Name, Mailing Address and Zip Code James Harvey 5502 Nebraska Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 335.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Agilian LLC 5335 Wisconsin Ave NW Ste 400, Washington, DC 20015		
Aggregate Year-To-date			\$ 335.00
112. Full Name, Mailing Address and Zip Code Willie Hasson 416 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
113. Full Name, Mailing Address and Zip Code Carroll Henry 5915 2nd Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 70.00
Contributor Type Individual	Occupation Tennis Instructor Name and Address of Employer S.A.F.E. 5915 2nd Pl NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 70.00
114. Full Name, Mailing Address and Zip Code Anthony Herald 225 Rock Creek Church Rd NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 175.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer A.Wash Associates 4649 Nannie Helen Burroughs Ave NE, Washington, DC 20019		
Aggregate Year-To-date			\$ 175.00
115. Full Name, Mailing Address and Zip Code Charon Hines 307 Oneida St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 100.00
116. Full Name, Mailing Address and Zip Code Stella Hodge 10806 Hollaway Dr, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
117. Full Name, Mailing Address and Zip Code Robert Hodge 10806 Hollaway Dr, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 35.00
118. Full Name, Mailing Address and Zip Code Janette Hoston Harris 4407 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 100.00
119. Full Name, Mailing Address and Zip Code Espanola Hughes 12205 Pleasant Prospect Rd, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
120. Full Name, Mailing Address and Zip Code Mary Ivey 429 N St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
121. Full Name, Mailing Address and Zip Code N Jarvis 1825 Shepherd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Owner Name and Address of Employer The Jarvis Company 1701 K St NW Ste 1201, Washington, DC 20006		
Aggregate Year-To-date			\$ 250.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
122. Full Name, Mailing Address and Zip Code Benjamin Johnson 4009 Georgia Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 175.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Four Brothers LLC 4009 Georgia Ave NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 175.00
123. Full Name, Mailing Address and Zip Code Delores Jolley 5711 13th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Willie Jolley Prod. Inc. 5711 13th St NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 35.00
124. Full Name, Mailing Address and Zip Code Cliffine Jones 1917 Shepherd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 100.00
125. Full Name, Mailing Address and Zip Code Phinis Jones 1847 Woodmont Pl SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 500.00
126. Full Name, Mailing Address and Zip Code Caroline Kenney 924 4th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation VP Name and Address of Employer Urban Atlantic 7735 Old Georgetown Rd Ste 600, Bethesda, MD 20814		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 50.00**

127. Full Name, Mailing Address and Zip Code George Koch 1438 Montague St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
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Contributor Type Individual	Occupation Executive Director Name and Address of Employer Artomatic 1800 S Bell St, Arlington, VA 22202
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Aggregate Year-To-date **\$ 100.00**

128. Full Name, Mailing Address and Zip Code Vera Larry 5327 Kansas Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 35.00**

129. Full Name, Mailing Address and Zip Code Richard Lee 601 L St SE Apt 401, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 50.00**

130. Full Name, Mailing Address and Zip Code William Lightfoot 1609 Kalmia Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 70.00
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Contributor Type Individual	Occupation Partner Name and Address of Employer Koonz 2001 Pennsylvania Ave NW Ste 450, Washington, DC 20006
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Aggregate Year-To-date **\$ 70.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
131. Full Name, Mailing Address and Zip Code Ariana Lightfoot 1609 Kalmia Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 36.00
Contributor Type Individual	Occupation Unemployed Name and Address of Employer Unemployed		
Aggregate Year-To-date			\$ 36.00
132. Full Name, Mailing Address and Zip Code Marsha Lillie-Blanton 6167 Sligo Mill Rd NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
133. Full Name, Mailing Address and Zip Code LaDonna Love 5102 5th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
134. Full Name, Mailing Address and Zip Code Alice Love 403 9th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 35.00
135. Full Name, Mailing Address and Zip Code Nancy Lucas 8331 E Beach Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Montgomery County Government Name and Address of Employer Montgomery County Government 100 Maryland Ave, Rockville, MD 20850		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 35.00**

136. Full Name, Mailing Address and Zip Code Terrance Lynch 1737 Kenyon St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Executive Director Name and Address of Employer Downtown Cluster of Congregations 1313 New York Ave NW, Washington, DC 20005
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Aggregate Year-To-date **\$ 35.00**

137. Full Name, Mailing Address and Zip Code Sharrolyn Mack 510 Riggs Rd NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 35.00**

138. Full Name, Mailing Address and Zip Code Erich Martel 5436 39th St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 100.00**

139. Full Name, Mailing Address and Zip Code Alfreda Mauuso 929 Sheridan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed
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Aggregate Year-To-date **\$ 35.00**

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 Ward 4 Constituent Services Fund			
140. Full Name, Mailing Address and Zip Code Samuel MCCoy 7605 Morningside Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
141. Full Name, Mailing Address and Zip Code Pamela McKee 431 Oneida Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
142. Full Name, Mailing Address and Zip Code C.L. McKoin 1610 Tamarack ST NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
143. Full Name, Mailing Address and Zip Code David Meadows 305 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 25.00
144. Full Name, Mailing Address and Zip Code Belva Milson 5743 9th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 35.00**

145. Full Name, Mailing Address and Zip Code Selerya Moore 215 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 35.00**

146. Full Name, Mailing Address and Zip Code Ivonne Moyonoubissi PO Box 92417, Washington, DC 20090	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Employee Name and Address of Employer GWU Hospital 900 23rd St NW, Washington, DC 20037
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Aggregate Year-To-date **\$ 35.00**

147. Full Name, Mailing Address and Zip Code Ralph Neal 1909 Tulip St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 75.00**

148. Full Name, Mailing Address and Zip Code Audrey Nwanze 1308 Emerson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 100.00
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Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed
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Aggregate Year-To-date **\$ 100.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
149. Full Name, Mailing Address and Zip Code Terri Smith Moore 10105 Baltimore Ave Apt 3110, College Park, MD 20740	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 105.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Moore Associates 200 33rd St NE, Washington, DC 20019		
Aggregate Year-To-date			\$ 105.00
150. Full Name, Mailing Address and Zip Code Bernardine Spaulding Evans 1701 Poplar Ln NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/08/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer Howard University 2400 6th St NW, Washington, DC 20059		
Aggregate Year-To-date			\$ 200.00
151. Full Name, Mailing Address and Zip Code Hazel Bland Thomas 4317 20th St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation US State Dept. Name and Address of Employer US State Dept. 2201 C St NW, Washington, DC 20520		
Aggregate Year-To-date			\$ 35.00
152. Full Name, Mailing Address and Zip Code Candace Nelson 1000 Rittenhouse St NW Apt G, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 35.00
153. Full Name, Mailing Address and Zip Code Mary Ann Nordheimer 5400 Bradley Blvd, Bethesda, MD 20814	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 200.00
154. Full Name, Mailing Address and Zip Code Lavdena Orr 5804 8th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Amerihealth 1120 Vermont Ave NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 135.00
155. Full Name, Mailing Address and Zip Code Abigail Osborne 825 Juniper St NW Apt 301, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Employee Name and Address of Employer American College of Cardiology 2400 N St NW, Washington, DC 20037		
Aggregate Year-To-date			\$ 100.00
156. Full Name, Mailing Address and Zip Code Josephine Pamphile 551 Brummel Ct NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
157. Full Name, Mailing Address and Zip Code Thomas Penny 4514 Harwich Ter, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Courtyard Marriott Convention Center 900 F St NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 250.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
158. Full Name, Mailing Address and Zip Code Thomas Pipkin 308 Allison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 235.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 235.00
159. Full Name, Mailing Address and Zip Code Cynthia Prather 7832 12th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 40.00
160. Full Name, Mailing Address and Zip Code Jakeline Reyes-Yanes 4643 Hilltop Ter SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 35.00
161. Full Name, Mailing Address and Zip Code Barbara Rogers 339 Oneida St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Accountant Name and Address of Employer Buchannan & Mitchell 1901 L St NW Ste 750, Washington, DC 20036		
Aggregate Year-To-date			\$ 50.00
162. Full Name, Mailing Address and Zip Code McKinley Rush Jr 5517 13th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 35.00
163. Full Name, Mailing Address and Zip Code Stephen Salis 6856 Eastern Ave NW # 225, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Salis Holdings 1818 14th St NW, Washington, DC 20009		
Aggregate Year-To-date			\$ 500.00
164. Full Name, Mailing Address and Zip Code Earline Sampson 604 Underwood St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
165. Full Name, Mailing Address and Zip Code Rickey Sarter 8224 W Beach Ter NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Employee Name and Address of Employer J & J 1050 Connecticut Ave NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 135.00
166. Full Name, Mailing Address and Zip Code Amy Schear 6672 32nd Pl NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Unemployed Name and Address of Employer Unemployed		
Aggregate Year-To-date			\$ 35.00

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

Ward 4 Constituent Services Fund

167. Full Name, Mailing Address and Zip Code Stacie Scott 7317 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Real Estate Name and Address of Employer RLAH 11 DuPont Cir NW Ste 650, Washington, DC 20036		
Aggregate Year-To-date			\$ 35.00
168. Full Name, Mailing Address and Zip Code Johnnie Scott Rice 4262 Massachusetts Ave SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
169. Full Name, Mailing Address and Zip Code Barabara & Larson Shelton 2903 Denver St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
170. Full Name, Mailing Address and Zip Code Donna Shuler 5801 16th ST NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Answer Title 10 G St NE Ste 460, Washington, DC 20002		
Aggregate Year-To-date			\$ 50.00
171. Full Name, Mailing Address and Zip Code Margaret Singleton 1304 Tuckerman St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer DC Chamber of Commerce 1133 21st St NW Ste M200, Washington, DC 20036		

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 Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 50.00
172. Full Name, Mailing Address and Zip Code Jolene Sloter 9112 Vendome Dr, Bethesda, MD 20817	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 35.00
173. Full Name, Mailing Address and Zip Code Shearon Smith 6002 8th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 35.00
174. Full Name, Mailing Address and Zip Code Shannon Stokes 1403 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Senior Manager Name and Address of Employer KPMG 1801 K St NW # 12000, Washington, DC 20006		
Aggregate Year-To-date			\$ 135.00
175. Full Name, Mailing Address and Zip Code James Sydnor 411 Oneida Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 35.00

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program

Ward 4 Constituent Services Fund

176. Full Name, Mailing Address and Zip Code Sylvia Syphax 609 60th Pl, Fairmount Heights, MD 20743	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 235.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Renaissance Medical Group 525 Eastern Ave, Fairmount Heights, MD 20743		
Aggregate Year-To-date			\$ 235.00
177. Full Name, Mailing Address and Zip Code Karen Szulgit 409 H St NE Apt 2, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 35.00
178. Full Name, Mailing Address and Zip Code Andria Thomas 1531 Massachusetts Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer Leadership Now Project		
Aggregate Year-To-date			\$ 35.00
179. Full Name, Mailing Address and Zip Code Doreen Thompson 1510 Emerson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 100.00
180. Full Name, Mailing Address and Zip Code Gloria Todd 2913 Denver St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Asspcoate Director of Admissions Name and Address of Employer Stratford University 7777 Leesburg Pike, Falls Church, VA 22043		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 35.00**

181. Full Name, Mailing Address and Zip Code Hope Tucker-Stewart 4721 Blagden Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 105.00
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Contributor Type Individual	Occupation Owner Name and Address of Employer Hope Properties 820 H St NE Ste A, Washington, DC 20002
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Aggregate Year-To-date **\$ 105.00**

182. Full Name, Mailing Address and Zip Code Dolly C Turner 6640 Piney Branch Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Retired Name and Address of Employer Retired
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Aggregate Year-To-date **\$ 35.00**

183. Full Name, Mailing Address and Zip Code Danielle Turnipseed 14306 Royal Forest Ln, Silver Spring, MD 20904	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 105.00
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Contributor Type Individual	Occupation Owner Name and Address of Employer Solera Health 111 W Monroe St Ste 300, Phoenix, AZ 85003
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Aggregate Year-To-date **\$ 105.00**

184. Full Name, Mailing Address and Zip Code Janine Tursnni 2009 Wyoming Ave NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
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Contributor Type Individual	Occupation Owner Name and Address of Employer Arts for the Aging Inc. (AFTA) 12320 Parklawn Dr, Rockville, MD 20852
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Aggregate Year-To-date **\$ 50.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
185. Full Name, Mailing Address and Zip Code Annie Wallace 926 Hamilton St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
186. Full Name, Mailing Address and Zip Code Bernadine Watson 6630 13th Pl NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 35.00
187. Full Name, Mailing Address and Zip Code Stephen Whatley 1315 Fern St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 35.00
188. Full Name, Mailing Address and Zip Code David Wigenton 814 Taylor St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 50.00
189. Full Name, Mailing Address and Zip Code Carolyn Williams 1414 Manchester Ln NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

<p>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.</p>			
<p>Full Name of Constituent-Service Program Ward 4 Constituent Services Fund</p>			
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>190. Full Name, Mailing Address and Zip Code Tycely Williams 8527 Milford Ct, Springfield, VA 22152</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/11/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Fundraiser Name and Address of Employer YWCA USA 1020 19th St NW Ste 750, Washington, DC 20036</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>191. Full Name, Mailing Address and Zip Code Malik Williams 2215 Perry St NE, Washington, DC 20018</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/11/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Self-Employed Name and Address of Employer Self-Employed</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>192. Full Name, Mailing Address and Zip Code Stanley Williams 1806 Lawrence St NE, Washington, DC 20018</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/11/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Retired Name and Address of Employer Retired</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>
<p>193. Full Name, Mailing Address and Zip Code Pamela Williamson 1728 Taylor St NW, Washington, DC 20011</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 06/11/2018</p>	<p>Amount of Each Receipt This Period \$ 35.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Employee Name and Address of Employer GDIT 7611 Little River Tpke Ste 300E, Annandale, VA 22003</p>		
			<p>Aggregate Year-To-date \$ 35.00</p>

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
194. Full Name, Mailing Address and Zip Code Owen Wilson 7215 Blair Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Owner Name and Address of Employer OAW Trucking 7215 Blair Rd NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 100.00
195. Full Name, Mailing Address and Zip Code Barry Wright 1428 Madison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Reliant Realty Advisors 733 11th St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 135.00
196. Full Name, Mailing Address and Zip Code Michael Yates 1215 Madison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 100.00
197. Full Name, Mailing Address and Zip Code AMAR Group LLC 6230 3rd St NW Ste 4, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
198. Full Name, Mailing Address and Zip Code Independent Holdings Corp 3215 Martin Luther King Jr Ave SE, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program
Ward 4 Constituent Services Fund

Aggregate Year-To-date **\$ 500.00**

199. Full Name, Mailing Address and Zip Code Laurence O. Gibbons, Jr. DDS PC 4303 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 200.00
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Contributor Type Business	Occupation
Business Type Corporation	Name and Address of Employer

Aggregate Year-To-date **\$ 200.00**

200. Full Name, Mailing Address and Zip Code Pepperoni Chic 5111 Georgia Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Business	Occupation
Business Type Corporation	Name and Address of Employer

Aggregate Year-To-date **\$ 35.00**

201. Full Name, Mailing Address and Zip Code The BBH Group 817 Madison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Business	Occupation
Business Type Corporation	Name and Address of Employer

Aggregate Year-To-date **\$ 35.00**

202. Full Name, Mailing Address and Zip Code Michael Heimowitz 7415 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 35.00
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Contributor Type Individual	Occupation Director
	Name and Address of Employer Burston Marsteller 1110 Vermont Ave NW, Washington, DC 20005

Aggregate Year-To-date **\$ 35.00**

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
203. Full Name, Mailing Address and Zip Code Robert Malson 3834 Glen Eagles Dr, Silver Spring, MD 20906	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 135.00
204. Full Name, Mailing Address and Zip Code Jerome Paige 1691 Tamarack St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date			\$ 35.00
205. Full Name, Mailing Address and Zip Code Deborah Royster 3834 Glen Eagles Dr, Silver Spring, MD 20906	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Seabury 6031 Kansas Ave NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 135.00
206. Full Name, Mailing Address and Zip Code Janis Williams 309 Taylor St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
207. Full Name, Mailing Address and Zip Code Integrated Development Services 6136 32nd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		

ITEMIZED MONETARY CONTRIBUTIONS FROM OTHER THAN THE ELECTED OFFICIAL

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Full Name of Constituent-Service Program Ward 4 Constituent Services Fund			
Aggregate Year-To-date			\$ 250.00
208. Full Name, Mailing Address and Zip Code Manatt Phelps & Phillips 11355 W Olympic Blvd, Los Angeles, CA 90064	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/14/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
209. Full Name, Mailing Address and Zip Code Lori Lee 7816 16th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/18/2018	Amount of Each Receipt This Period \$ 135.00
Contributor Type Individual	Occupation Employee Name and Address of Employer PJM Interconnection 1200 G St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 135.00
210. Full Name, Mailing Address and Zip Code Thelma Mrazek 6200 Oregon Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/20/2018	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
211. Full Name, Mailing Address and Zip Code Lorraine Cooper 420 Nicholson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/25/2018	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 150.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 25,909.00

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

Ward 4 Constituent Services Fund

1. Full Name, Mailing Address and Zip Code Amazon 4200 Guilford Dr, College Park, MD 20740	Receipt Type Refund	Date (month, day, year) 04/13/2018	Amount of Each Offset This Period \$ 5.01
Aggregate Year-To-date			\$ 15.00
2. Full Name, Mailing Address and Zip Code Amazon 4200 Guilford Dr, College Park, MD 20740	Receipt Type Refund	Date (month, day, year) 04/13/2018	Amount of Each Offset This Period \$ 9.99
Aggregate Year-To-date			\$ 15.00
3. Full Name, Mailing Address and Zip Code Mailchimp 675 Ponce De Leon Ave NE, Atlanta, GA 30308	Receipt Type Refund	Date (month, day, year) 05/08/2018	Amount of Each Offset This Period \$ 130.00
Aggregate Year-To-date			\$ 130.00
4. Full Name, Mailing Address and Zip Code Whole Foods 833 Wayne Ave, Silver Spring, MD 20910	Receipt Type Refund	Date (month, day, year) 06/04/2018	Amount of Each Offset This Period \$ 31.80
Aggregate Year-To-date			\$ 31.80
5. Full Name, Mailing Address and Zip Code Industrial Bank 4812 Georgia Ave NW, Washington, DC 20011	Receipt Type Other - Bank adjustment	Date (month, day, year) 06/11/2018	Amount of Each Offset This Period \$ 170.00
Aggregate Year-To-date			\$ 206.95
6. Full Name, Mailing Address and Zip Code Amazon 4200 Guilford Dr, College Park, MD 20740	Receipt Type Refund	Date (month, day, year) 06/21/2018	Amount of Each Offset This Period \$ 50.97
Aggregate Year-To-date			\$ 65.97
TOTAL This Period (Aggregate of all Receipt pages)			\$ 397.77

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Full Name of Constituent-Service Program

Ward 4 Constituent Services Fund

1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/07/2018	\$ 3.20
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/08/2018	\$ 1.32
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/08/2018	\$ 1.46
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/08/2018	\$ 1.32
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/08/2018	\$ 2.33
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/17/2018	\$ 14.80
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/17/2018	\$ 14.80
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/21/2018	\$ 14.80
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/23/2018	\$ 1.32
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/29/2018	\$ 7.12
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/30/2018	\$ 3.20
PayPal 2211 North First Street, San Jose, CA 95131	Bank Fees	05/31/2018	\$ 14.80

13. Full Name, Mailing Address and Zip Code PayPal 2211 North First Street, San Jose, CA 95131	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 1.32
14. Full Name, Mailing Address and Zip Code Industrial Bank 4812 Georgia Ave NW, Washington, DC 20011	Purpose of Expenditure Supplies	Date (month, day, year) 06/12/2018	Amount of Each Expenditure This Period \$ 69.89
15. Full Name, Mailing Address and Zip Code PayPal 2211 North First Street, San Jose, CA 95131	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/29/2018	Amount of Each Expenditure This Period \$ 237.18
TOTAL This Period (aggregate the subtotal of all expenditure pages)			\$ 388.86

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Full Name of Constituent-Service Program

Ward 4 Constituent Services Fund

1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
Yu Ying PCS 220 Taylor St NE, Washington, DC 20017	Donation	04/03/2018	\$ 50.00
2. Full Name, Mailing Address and Zip Code Crestline PO Box 712144, Cincinnati, OH 45271	Supplies	04/04/2018	\$ 498.47
3. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Supplies	04/06/2018	\$ 5.01
4. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Supplies	04/09/2018	\$ 9.99
5. Full Name, Mailing Address and Zip Code Dunkin Donuts 850 Quincy St NW, Washington, DC 20011	Food	04/11/2018	\$ 36.32
6. Full Name, Mailing Address and Zip Code Walmart Supercenter 5929 Georgia Ave NW, Washington, DC 20012	Supplies	04/11/2018	\$ 5.48
7. Full Name, Mailing Address and Zip Code Dolly Turner 1350 Pennsylvania Avenue NW suite 105, Washington, DC 20004	Supplies	04/20/2018	\$ 51.19
8. Full Name, Mailing Address and Zip Code Safeway 6500 Piney Branch Rd, Washington, DC 20012	Supplies	04/21/2018	\$ 19.59
9. Full Name, Mailing Address and Zip Code Safeway 6500 Piney Branch Rd, Washington, DC 20012	Supplies	04/21/2018	\$ 5.81
10. Full Name, Mailing Address and Zip Code Manitia Lane 5104 KensingtonCt, Upper Marlboro, MD 20772	Services	04/21/2018	\$ 250.00
11. Full Name, Mailing Address and Zip Code Walmart Supercenter 5929 Georgia Ave NW, Washington, DC 20012	Supplies	04/23/2018	\$ 53.34
12. Full Name, Mailing Address and Zip Code Renee Bowser 5322 2nd St NW, Washington, DC 20011	Reimbursement	04/23/2018	\$ 50.00

13. Full Name, Mailing Address and Zip Code Helping Hands 3020 Gainesville Street SE, Washington, DC 20020	Purpose of Expenditure Donation	Date (month, day, year) 04/30/2018	Amount of Each Expenditure This Period \$ 100.00
14. Full Name, Mailing Address and Zip Code Marquee Management 3201 Wisconsin Ave NW, Washington, DC 20016	Purpose of Expenditure Rental Assistance	Date (month, day, year) 05/01/2018	Amount of Each Expenditure This Period \$ 100.00
15. Full Name, Mailing Address and Zip Code Mailchimp 675 Ponce De Leon Ave NE, Atlanta, GA 30308	Purpose of Expenditure Service	Date (month, day, year) 05/04/2018	Amount of Each Expenditure This Period \$ 130.00
16. Full Name, Mailing Address and Zip Code Constant Contact 1601 Trapelo Rd Suite 329, Waltham, ME 02451	Purpose of Expenditure Services	Date (month, day, year) 05/07/2018	Amount of Each Expenditure This Period \$ 185.25
17. Full Name, Mailing Address and Zip Code PayPal 2211 North First Street, San Jose, CA 95131	Purpose of Expenditure Supplies	Date (month, day, year) 05/09/2018	Amount of Each Expenditure This Period \$ 30.38
18. Full Name, Mailing Address and Zip Code Powell Padres 1350 Upshur St NW, Washington, DC 20011	Purpose of Expenditure Donation	Date (month, day, year) 05/17/2018	Amount of Each Expenditure This Period \$ 250.00
19. Full Name, Mailing Address and Zip Code AAA Party Rental 3361 75th Avenue suite A, Landover, MD 20785	Purpose of Expenditure Supplies	Date (month, day, year) 05/18/2018	Amount of Each Expenditure This Period \$ 100.00
20. Full Name, Mailing Address and Zip Code American Visa 1801 Columbia Rd NW, Washington, DC 20009	Purpose of Expenditure Assistance	Date (month, day, year) 05/21/2018	Amount of Each Expenditure This Period \$ 195.00
21. Full Name, Mailing Address and Zip Code DC Senior America Cameo Club 2000 Upshur St NW, Washington, DC 20018	Purpose of Expenditure Donation	Date (month, day, year) 05/23/2018	Amount of Each Expenditure This Period \$ 225.00
22. Full Name, Mailing Address and Zip Code USPS 1200 Pennsylvania Ave NW, Washington, DC 20004	Purpose of Expenditure Supplies	Date (month, day, year) 05/25/2018	Amount of Each Expenditure This Period \$ 250.00
23. Full Name, Mailing Address and Zip Code Ohev Shalom 1600 Jonquil St NW, Washington, DC 20012	Purpose of Expenditure Donation	Date (month, day, year) 05/25/2018	Amount of Each Expenditure This Period \$ 127.55
24. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 05/29/2018	Amount of Each Expenditure This Period \$ 129.43
25. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 05/29/2018	Amount of Each Expenditure This Period \$ 64.95

26. Full Name, Mailing Address and Zip Code We're Having a Party 2300 Perkins Place, Silver Spring, MD 20910	Purpose of Expenditure Supplies	Date (month, day, year) 05/30/2018	Amount of Each Expenditure This Period \$ 2,059.20
27. Full Name, Mailing Address and Zip Code AAA Party Rental 3361 75th Avenue suite A, Landover, MD 20785	Purpose of Expenditure Supplies	Date (month, day, year) 05/30/2018	Amount of Each Expenditure This Period \$ 697.60
28. Full Name, Mailing Address and Zip Code Ligia Pineda 10405 Tullymore Dr, Adelphi, MD 20783	Purpose of Expenditure Service	Date (month, day, year) 05/30/2018	Amount of Each Expenditure This Period \$ 100.00
29. Full Name, Mailing Address and Zip Code Annie's Ace Hardware 1240 Upshur St NW, Washington, DC 20011	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 3.69
30. Full Name, Mailing Address and Zip Code Whole Foods 833 Wayne Ave, Silver Spring, MD 20910	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 31.80
31. Full Name, Mailing Address and Zip Code Whole Foods 833 Wayne Ave, Silver Spring, MD 20910	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 31.80
32. Full Name, Mailing Address and Zip Code Costco 2241 Market St NE, Washington, DC 20018	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 285.75
33. Full Name, Mailing Address and Zip Code Costco 2241 Market St NE, Washington, DC 20018	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 47.95
34. Full Name, Mailing Address and Zip Code Party City 11006 Veirs Mill Rd, Wheaton, MD 20902	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 15.84
35. Full Name, Mailing Address and Zip Code Party City 11006 Veirs Mill Rd, Wheaton, MD 20902	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 25.59
36. Full Name, Mailing Address and Zip Code 7 Eleven 7401 Georgia Ave NW, Washington, DC 20012	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 26.90
37. Full Name, Mailing Address and Zip Code Sala Thai 2300 Washington Place NE, Washington, DC 20018	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 2,000.00
38. Full Name, Mailing Address and Zip Code Faye Caldwell 1350 Pennsylvania Ave NW, Washington, DC 20004	Purpose of Expenditure Supplies	Date (month, day, year) 05/31/2018	Amount of Each Expenditure This Period \$ 26.50

39. Full Name, Mailing Address and Zip Code Joshua Fleitman 1350 Pennsylvania Ave NW Suite 105, Washington, DC 20004	Purpose of Expenditure Supplies	Date (month, day, year) 06/01/2018	Amount of Each Expenditure This Period \$ 10.61
40. Full Name, Mailing Address and Zip Code Constant Contact 1601 Trapelo Rd Suite 329, Waltham, ME 02451	Purpose of Expenditure Services	Date (month, day, year) 06/04/2018	Amount of Each Expenditure This Period \$ 185.25
41. Full Name, Mailing Address and Zip Code Switch Board 1725 Eye Street NW Suite 900, Washington, DC 20006	Purpose of Expenditure Services	Date (month, day, year) 06/11/2018	Amount of Each Expenditure This Period \$ 596.70
42. Full Name, Mailing Address and Zip Code Lee's Florist 1026 U St NW, Washington, DC 20001	Purpose of Expenditure Service	Date (month, day, year) 06/14/2018	Amount of Each Expenditure This Period \$ 70.79
43. Full Name, Mailing Address and Zip Code Lee's Florist 1026 U St NW, Washington, DC 20001	Purpose of Expenditure Service	Date (month, day, year) 06/14/2018	Amount of Each Expenditure This Period \$ 73.97
44. Full Name, Mailing Address and Zip Code Lee's Florist 1026 U St NW, Washington, DC 20001	Purpose of Expenditure Services	Date (month, day, year) 06/14/2018	Amount of Each Expenditure This Period \$ 73.97
45. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 06/14/2018	Amount of Each Expenditure This Period \$ 294.21
46. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 06/15/2018	Amount of Each Expenditure This Period \$ 115.26
47. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 06/15/2018	Amount of Each Expenditure This Period \$ 240.66
48. Full Name, Mailing Address and Zip Code Aloysius Tamasang 2500 3rd St NE, Washington, DC 20002	Purpose of Expenditure Services	Date (month, day, year) 06/15/2018	Amount of Each Expenditure This Period \$ 200.00
49. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 06/19/2018	Amount of Each Expenditure This Period \$ 128.95
50. Full Name, Mailing Address and Zip Code Walmart Supercenter 5929 Georgia Ave NW, Washington, DC 20012	Purpose of Expenditure Supplies	Date (month, day, year) 06/23/2018	Amount of Each Expenditure This Period \$ 70.63
51. Full Name, Mailing Address and Zip Code Walmart Supercenter 5929 Georgia Ave NW, Washington, DC 20012	Purpose of Expenditure Supplies	Date (month, day, year) 06/23/2018	Amount of Each Expenditure This Period \$ 90.36

52. Full Name, Mailing Address and Zip Code Costco 2241 Market St NE, Washington, DC 20018	Purpose of Expenditure Supplies	Date (month, day, year) 06/23/2018	Amount of Each Expenditure This Period \$ 87.92
53. Full Name, Mailing Address and Zip Code Sheila Austin Jones 5601 Connecticut Ave NW, Washington, DC 20015	Purpose of Expenditure Services	Date (month, day, year) 06/23/2018	Amount of Each Expenditure This Period \$ 150.00
54. Full Name, Mailing Address and Zip Code Ponies Unlimited LLC 7421 Parkwood St, Hyattsville, MD 20784	Purpose of Expenditure Services	Date (month, day, year) 06/25/2018	Amount of Each Expenditure This Period \$ 400.00
55. Full Name, Mailing Address and Zip Code Ponies Unlimited LLC 7421 Parkwood St, Hyattsville, MD 20784	Purpose of Expenditure Services	Date (month, day, year) 06/25/2018	Amount of Each Expenditure This Period \$ 200.00
56. Full Name, Mailing Address and Zip Code Costco 2241 Market St NE, Washington, DC 20018	Purpose of Expenditure Supplies	Date (month, day, year) 06/25/2018	Amount of Each Expenditure This Period \$ 818.13
57. Full Name, Mailing Address and Zip Code Walter Coreas 7401 New Hampshire Ave , Takoma, DC 20912	Purpose of Expenditure Services	Date (month, day, year) 06/25/2018	Amount of Each Expenditure This Period \$ 250.00
58. Full Name, Mailing Address and Zip Code Fave Caldwell 1350 Pennsylvania Ave NW, Washington, DC 20004	Purpose of Expenditure Services	Date (month, day, year) 06/27/2018	Amount of Each Expenditure This Period \$ 192.18
59. Full Name, Mailing Address and Zip Code USPS 1200 Pennsylvania Ave NW, Washington, DC 20004	Purpose of Expenditure Supplies	Date (month, day, year) 06/27/2018	Amount of Each Expenditure This Period \$ 100.00
60. Full Name, Mailing Address and Zip Code Davis Center 6218 Third St NW, Washington, DC 20011	Purpose of Expenditure Donation	Date (month, day, year) 06/28/2018	Amount of Each Expenditure This Period \$ 400.00
61. Full Name, Mailing Address and Zip Code Online Stores, LLC 1000 Westinghouse Dr, New Stanton, PA 15672	Purpose of Expenditure Supplies	Date (month, day, year) 06/29/2018	Amount of Each Expenditure This Period \$ 291.87
62. Full Name, Mailing Address and Zip Code Culture Coffee Too 300 Riggs Rd NE, Washington, DC 20011	Purpose of Expenditure Services	Date (month, day, year) 06/29/2018	Amount of Each Expenditure This Period \$ 220.00
63. Full Name, Mailing Address and Zip Code Amazon.com 4200 Guilford Dr, College Park, MD 20740	Purpose of Expenditure Supplies	Date (month, day, year) 06/29/2018	Amount of Each Expenditure This Period \$ 37.94
TOTAL This Period (aggregate the subtotal of all expenditure pages)			\$ 13,574.78