



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

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NOTARY PUBLIC

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

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

**Mr. Daniel H. Wedderburn**

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TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED**

08/10/2018

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SIGNATURE OF TREASURER

DATE

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(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

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(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

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NOTARY PUBLIC

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Mendelson for Chairman 2018	REPORT COVERING THE PERIOD FROM: <b>6/11/2018</b> TO: <b>8/10/2018</b>	
<b>I. RECEIPTS</b>	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
<b>11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 33,928.00	\$ 590,869.65 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 6,231.45	\$ 27,831.45 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 1,443.24 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 40,159.45	\$ 620,144.34 11(g)
<b>12. SALES AND COLLECTIONS (Schedule C)</b>	\$ 40.00	\$ 40.00 12
<b>13. LOANS</b>		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
<b>14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)</b>	\$ 0.00	\$ 0.00 14
<b>15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)</b>	\$ 0.00	\$ 0.00 15
<b>16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]</b>	\$ 40,199.45	\$ 620,184.34 16
<b>II. EXPENDITURES</b>		
<b>17. OPERATING EXPENDITURES (Schedule B)</b>	\$ 198,265.20	\$ 483,967.16 17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)</b>	\$ 0.00	\$ 0.00 18
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 500.00	\$ 1,000.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 500.00	\$ 1,000.00 20(d)
<b>21. OTHER EXPENDITURES</b>		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 16.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 16.00 21(c)
<b>22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]</b>	\$ 198,765.20	\$ 484,983.16 22
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		\$ 291,564.34
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		\$ 40,199.45
<b>25. SUBTOTAL (add Lines 23 and 24)</b>		\$ 331,763.79
<b>26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)</b>		\$ 198,765.20
<b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</b>		\$ 132,998.59

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.			
Full Name of Committee (Name of Candidate, if Candidate is reporting) <b>Mendelson for Chairman 2018</b>			
1. Full Name, Mailing Address and Zip Code <b>Kolaleh Jones</b> 14004 Floyd ST, Upper Marlboro, MD 20772	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/11/2018</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Vice Presidente/CIO Name and Address of Employer <b>Children's Hational Medical Center</b>		
Aggregate Year-To-date			<b>\$ 150.00</b>
2. Full Name, Mailing Address and Zip Code <b>William E. Quirk</b> 2480 16th St NW, Washington, DC 20009	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/11/2018</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Director Name and Address of Employer <b>Children's Hational Medical Center</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
3. Full Name, Mailing Address and Zip Code <b>Toni G. Verstandig</b> 5212 Upton Ter NW, Washington, DC 20016	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/11/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Sr. Analyst Name and Address of Employer <b>Center for Middle East Peace</b>		
Aggregate Year-To-date			<b>\$ 1,000.00</b>
4. Full Name, Mailing Address and Zip Code <b>Mike Williams</b> 7960 Glenbrook Rd, Bethesda, MD 20814	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/11/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 1,000.00</b>
5. Full Name, Mailing Address and Zip Code <b>Celeste Duffie</b> 4573 B St SE, Washington, DC 20019	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 51.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Community Relations Specialist Name and Address of Employer <b>DPE</b> 2000 14th St NW, Washington, DC 20009		
Aggregate Year-To-date			<b>\$ 51.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

6. Full Name, Mailing Address and Zip Code <b>Deodato M. Arruda</b> 4 Lobao Dr, Danvers, MA 01923	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Senior Official Name and Address of Employer <b>Security Assurance Management, Inc.</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
7. Full Name, Mailing Address and Zip Code <b>Katherine Tierney Blando</b> 1808 Hoban Rd NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Nurse Practitioner Name and Address of Employer <b>Washington Hospital Center</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
8. Full Name, Mailing Address and Zip Code <b>Patrick A. Burke</b> 4837 W St NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Executive Director Name and Address of Employer <b>DC Police Foundation</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
9. Full Name, Mailing Address and Zip Code <b>Cheryle W. Wanner-Doggett</b> 1100 G St NW, Washington, DC 20005	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> CEO Name and Address of Employer <b>Doggett Enterprises</b> 1100 G St NW, Washington, DC 20005		
Aggregate Year-To-date			<b>\$ 1,000.00</b>
10. Full Name, Mailing Address and Zip Code <b>Marie Drissel</b> 2135 Bancroft Pl NW, Washington, DC 20008	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Consultant Name and Address of Employer <b>Self-employed</b>		
Aggregate Year-To-date			<b>\$ 1,000.00</b>

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

**Mendelson for Chairman 2018**

11. Full Name, Mailing Address and Zip Code <b>Paige Grzelak</b> 3044 R St NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>Western Development</b>		
Aggregate Year-To-date			<b>\$ 1,500.00</b>
12. Full Name, Mailing Address and Zip Code <b>Marilyn A. Harris</b> 5123 Yuma St NW, Washington, DC 20016	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
13. Full Name, Mailing Address and Zip Code <b>Cynthia L. Howar</b> 3940 Highwood Ct NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Realtor</b> Name and Address of Employer <b>Washington Fine Properties</b>		
Aggregate Year-To-date			<b>\$ 200.00</b>
14. Full Name, Mailing Address and Zip Code <b>J. W. Lanum</b> 407 Constitution Ave NE, Washington, DC 20002	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>security Assurance Management Inc.</b>		
Aggregate Year-To-date			<b>\$ 150.00</b>
15. Full Name, Mailing Address and Zip Code <b>Robert C. McDiarmid</b> 3625 Fulton St NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>spiegel &amp; McDiarmid</b>		
Aggregate Year-To-date			<b>\$ 150.00</b>

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

**Mendelson for Chairman 2018**

16. Full Name, Mailing Address and Zip Code <b>Daniel Miller</b> 1704 35th St NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Realtor</b> Name and Address of Employer <b>Washington Fine Properties</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
17. Full Name, Mailing Address and Zip Code <b>Malcolm E. Peabody</b> 2811 Dumbarton St NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
18. Full Name, Mailing Address and Zip Code <b>Douglas Sloan</b> 313 Nicholson St NW, Washington, DC 20011	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self-employed</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
19. Full Name, Mailing Address and Zip Code <b>Mark H. Tuohey III</b> 1655 Kalmia Rd NW, Washington, DC 20012	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Baker Hostetler</b>		
Aggregate Year-To-date			<b>\$ 1,000.00</b>
20. Full Name, Mailing Address and Zip Code <b>Beverley R. Wheeler</b> 3527 10th St NW, Washington, DC 20010	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Director</b> Name and Address of Employer <b>DC Hunger Solutions</b>		
Aggregate Year-To-date			<b>\$ 200.00</b>

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

21. Full Name, Mailing Address and Zip Code <b>Berman and Company</b> 1090 Vermont Ave NW, Washington, DC 20005	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 1,000.00</b>
22. Full Name, Mailing Address and Zip Code <b>DOPS, INC</b> 116 Pates Dr, Fort Washington, MD 20744	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
23. Full Name, Mailing Address and Zip Code <b>David L&gt; Wessel</b> 1908 Foxview Cir NW, Washington, DC 20007	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Executice Vice President</b> Name and Address of Employer <b>Children's Hational Medical Center</b> <b>111 Michigan Ave NW, Washington, DC 20010</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
24. Full Name, Mailing Address and Zip Code <b>Powell Manufacturing Industries Inc</b> 258 35th St NE, Washington, DC 20019	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 100.00</b>
25. Full Name, Mailing Address and Zip Code <b>Security Assurance Management Inc</b> 910 17th St NW, Washington, DC 20006	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 1,500.00</b>

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

26. Full Name, Mailing Address and Zip Code <b>Save Our Tip System Initiative 77</b> 1625 K St NW, Washington, DC 20006	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Other-Restaurants Campaign to Save Tip System	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date		<b>\$ 1,500.00</b>	
27. Full Name, Mailing Address and Zip Code <b>Diann Heine</b> 3924 Legation St NW, Washington, DC 20015	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date		<b>\$ 250.00</b>	
28. Full Name, Mailing Address and Zip Code <b>Elizabeth Johnson Hudson</b> 2600 W 7th ST, Fort Worth, TX 76107	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
29. Full Name, Mailing Address and Zip Code <b>Stanley A. Boucree</b> 801 Key Hwy, Baltimore, MD 21230	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Dentist</b> Name and Address of Employer <b>Self-employed</b>		
Aggregate Year-To-date		<b>\$ 1,500.00</b>	
30. Full Name, Mailing Address and Zip Code <b>Steven C. Boyle</b> 3115 Leland St, Chevy Chase, MD 20815	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Executive Development Officer</b> Name and Address of Employer <b>Edens</b>		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

		Aggregate Year-To-date	<b>\$ 1,500.00</b>	
31. Full Name, Mailing Address and Zip Code <b>J Delores Foster</b> <b>1418 Madison St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer			
		Aggregate Year-To-date	<b>\$ 100.00</b>	
32. Full Name, Mailing Address and Zip Code <b>Howard N. Johnson</b> <b>614 4th Pl SW, Washington, DC 20024</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>			
		Aggregate Year-To-date	<b>\$ 50.00</b>	
33. Full Name, Mailing Address and Zip Code <b>Corbett A. Price</b> <b>3520 Massachusetts Ave NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>CEO</b> Name and Address of Employer <b>Kurron Capital, LLC</b>			
		Aggregate Year-To-date	<b>\$ 1,500.00</b>	
34. Full Name, Mailing Address and Zip Code <b>Chrystie B. Price</b> <b>3520 Massachusetts Ave NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Owner</b> Name and Address of Employer <b>Veritas of Washington, LLC</b>			
		Aggregate Year-To-date	<b>\$ 1,500.00</b>	
35. Full Name, Mailing Address and Zip Code <b>David Clay Simmons</b> <b>1249 Maryland Ave NE, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

		Aggregate Year-To-date		<b>\$ 250.00</b>
36. Full Name, Mailing Address and Zip Code <b>CCA of Tennessee</b> <b>10 Burton Hills Blvd, Nashville, TN 37215</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b>		
<b>Business Type</b> Corporation		Name and Address of Employer		
		Aggregate Year-To-date		<b>\$ 1,500.00</b>
37. Full Name, Mailing Address and Zip Code <b>Willco Construction Company Inc</b> <b>7811 Montrose Rd, Rockville, MD 20854</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b>		
<b>Business Type</b> Corporation		Name and Address of Employer		
		Aggregate Year-To-date		<b>\$ 1,000.00</b>
38. Full Name, Mailing Address and Zip Code <b>Paul Bachman</b> <b>4001 9th St N, Arlington, VA 22203</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Professor</b>		
		Name and Address of Employer <b>University of the District of Columbia</b>		
		Aggregate Year-To-date		<b>\$ 500.00</b>
39. Full Name, Mailing Address and Zip Code <b>Marilyn T. Brown</b> <b>3060 Chestnut St NW, Washington, DC 20015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Education Consultant</b>		
		Name and Address of Employer <b>Self-employed</b>		
		Aggregate Year-To-date		<b>\$ 200.00</b>
40. Full Name, Mailing Address and Zip Code <b>Hollywood Women &amp; Men's Hairstylist</b> <b>1901 Q St NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b>		
<b>Business Type</b> Sole Proprietorship		Name and Address of Employer		

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

		Aggregate Year-To-date	\$ 500.00	
41. Full Name, Mailing Address and Zip Code <b>Pfizer Inc.</b> <b>6730 Lenox Center Ct, Memphis, TN 38115</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>	
<b>Contributor Type</b> Business	<b>Occupation</b>			
<b>Business Type</b> Corporation	Name and Address of Employer			
		Aggregate Year-To-date	\$ 1,500.00	
42. Full Name, Mailing Address and Zip Code <b>Mary Levy</b> <b>3534 T St NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b>			
	Name and Address of Employer <b>retired</b>			
		Aggregate Year-To-date	\$ 100.00	
43. Full Name, Mailing Address and Zip Code <b>CJ Donatelli</b> <b>4416 East West Hwy, Bethesda, MD 20814</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b>			
	Name and Address of Employer			
		Aggregate Year-To-date	\$ 1,500.00	
44. Full Name, Mailing Address and Zip Code <b>Christopher Boesen</b> <b>330 Pennsylvania Ave SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b>			
	Name and Address of Employer <b>Tiber Creek Associates of Capital Hill, Inc</b> <b>330 Pennsylvania Ave SE, Washington, DC 20003</b>			
		Aggregate Year-To-date	\$ 1,000.00	
45. Full Name, Mailing Address and Zip Code <b>MaryAnn Miller</b> <b>3001 Veazey Ter NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 51.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b>			
	Name and Address of Employer <b>retired</b>			

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

		Aggregate Year-To-date	\$ 51.00	
46. Full Name, Mailing Address and Zip Code <b>Larry Berman</b> 1545 18th St NW, Washington, DC 20036	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>			
		Aggregate Year-To-date	\$ 25.00	
47. Full Name, Mailing Address and Zip Code <b>Laurie Corkey</b> 1658 Waters Edge Ln, Reston, VA 20190	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 300.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>			
		Aggregate Year-To-date	\$ 300.00	
48. Full Name, Mailing Address and Zip Code <b>Conrad Cafritz</b> 1660 L St NW, Washington, DC 20036	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation Real Estate</b> Name and Address of Employer <b>Self-employed</b>			
		Aggregate Year-To-date	\$ 1,000.00	
49. Full Name, Mailing Address and Zip Code <b>Thomas Sneeringer</b> 3806 Jenifer St NW, Washington, DC 20015	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation Consultant</b> Name and Address of Employer <b>Self-employed</b> 3806 Jenifer St NW, Washington, DC 20015			
		Aggregate Year-To-date	\$ 175.00	
50. Full Name, Mailing Address and Zip Code <b>Jim Tufa</b> 5704 36th Ave, Hyattsville, MD 20782	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation Program Coordinator</b> Name and Address of Employer <b>DC Government</b>			

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

		Aggregate Year-To-date	<b>\$ 25.00</b>
51. Full Name, Mailing Address and Zip Code <b>Anthony Lewis</b> <b>2125 14th St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Vice President</b> Name and Address of Employer <b>Verizon</b> <b>1300 I St NW, Washington, DC 20005</b>		
		Aggregate Year-To-date	<b>\$ 250.00</b>
52. Full Name, Mailing Address and Zip Code <b>Daniel Tangherlini</b> <b>638 D St NE, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,000.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Founder</b> Name and Address of Employer <b>Tangherlini LLC</b> <b>638 D St NE, Washington, DC 20002</b>		
		Aggregate Year-To-date	<b>\$ 1,000.00</b>
53. Full Name, Mailing Address and Zip Code <b>Dr. Allen Chin</b> <b>6150 Windward Dr, Burke, VA 22015</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>		
		Aggregate Year-To-date	<b>\$ 25.00</b>
54. Full Name, Mailing Address and Zip Code <b>John Guggenmos</b> <b>1301 Rhode Island Ave NW, Washington, DC 20005</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Niteclub</b> Name and Address of Employer <b>Self-employed</b> <b>1301 Rhode Island Ave NW, Washington, DC 20005</b>		
		Aggregate Year-To-date	<b>\$ 1,500.00</b>
55. Full Name, Mailing Address and Zip Code <b>Deborah Holmes</b> <b>3905 24th St NE, Washington, DC 20018</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 51.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>Not employed</b>		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

**Mendelson for Chairman 2018**

		Aggregate Year-To-date	<b>\$ 51.00</b>
56. Full Name, Mailing Address and Zip Code <b>Peter Gillon</b> 3020 Chain Bridge Rd NW, Washington, DC 20016	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>Pillsbury Winthrop Shaw Pittman</b> 1200 17th St NW, Washington, DC 20036		
		Aggregate Year-To-date	<b>\$ 500.00</b>
57. Full Name, Mailing Address and Zip Code <b>Joseph Wolfe</b> 1348 E Capitol St NE, Washington, DC 20003	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 375.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Analyst Name and Address of Employer <b>DC City Council</b> 1350 Pennsylvania Ave NW, Washington, DC 20004		
		Aggregate Year-To-date	<b>\$ 375.00</b>
58. Full Name, Mailing Address and Zip Code <b>Marie Peoples</b> 1429 Geranium St NW, Washington, DC 20012	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>retired</b>		
		Aggregate Year-To-date	<b>\$ 175.00</b>
59. Full Name, Mailing Address and Zip Code <b>Thomas Sneeringer</b> 3806 Jenifer St NW, Washington, DC 20015	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Consultant Name and Address of Employer <b>Self-employed</b> 3806 Jenifer St NW, Washington, DC 20015		
		Aggregate Year-To-date	<b>\$ 175.00</b>
<b>TOTAL This Period (Aggregate of all Receipt pages)</b>			<b>\$ 33,928.00</b>

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

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

**Mendelson for Chairman 2018**

1. Full Name, Mailing Address and Zip Code <b>Baker &amp; Hostetler DC PAC</b> 1050 Connecticut Ave NW, Washington, DC 20036	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 731.45</b>
<b>Contributor Type</b> Other PAC or Committee - PAC			
Aggregate Year-To-date			<b>\$ 731.45</b>
2. Full Name, Mailing Address and Zip Code <b>Caribbean-American Political Action</b> 1000 15th St NW, Washington, DC 20036	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Other PAC or Committee - non-business			
Aggregate Year-To-date			<b>\$ 500.00</b>
3. Full Name, Mailing Address and Zip Code <b>International Association of Firefighters</b> 928 4th St NE, Washington, DC 20018	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Labor Sponsored PAC			
Aggregate Year-To-date			<b>\$ 1,500.00</b>
4. Full Name, Mailing Address and Zip Code <b>SEIU MD/DC State Council</b> 15 School St, Annapolis, MD 21401	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Labor Sponsored PAC			
Aggregate Year-To-date			<b>\$ 1,500.00</b>
5. Full Name, Mailing Address and Zip Code <b>CSX Corporation Good Government Fnd</b> 1331 Pennsylvania Ave NW, Washington, DC 20004	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Corporate Sponsored PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
6. Full Name, Mailing Address and Zip Code <b>Brotherhood of Locomotive Engineers and</b> 7011 E Pleasant Valley Rd, Independence, OH 44131	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Receipt This Period <b>\$ 1,500.00</b>
<b>Contributor Type</b> Labor Sponsored PAC			
Aggregate Year-To-date			<b>\$ 1,500.00</b>

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

**\$ 6,231.45**

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

Mendelson for Chairman 2018

1. Full Name, Mailing Address and Zip Code <b>Square Inc.</b> 1455 Market Street, San Francisco, CA 94103	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>06/11/2018</b>	Amount of Each Expenditure This Period  <b>\$ 61.88</b>
<b>Occupation</b>	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code <b>ActBlue</b> 366 Summer Street, Somerville, MA 02144	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 390.12</b>
<b>Occupation</b>	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code <b>Michael Coscia</b> 304 12th St SE, Washington, DC 20003	Purpose of Expenditure <b>Printing</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 2,643.75</b>
<b>Occupation</b>	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code <b>Winning Mark</b> 1220 Southwest Morrison St, Portland , OR 97205	Purpose of Expenditure <b>Campaign Materials</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 164,103.04</b>
<b>Occupation</b>	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code <b>Philip Mendelson</b> 1239 E St SE, Washington, DC 20003	Purpose of Expenditure <b>Phone Bill</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 4,483.76</b>
<b>Occupation</b> DC Council Chairman	Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
6. Full Name, Mailing Address and Zip Code <b>Robert Green</b> 2903 Georgia Ave NW, Washington, DC 20001	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 7,500.00</b>
<b>Occupation</b>	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code <b>Philip Mendelson</b> 1239 E St SE, Washington, DC 20003	Purpose of Expenditure <b>Petty Cash</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 20.00</b>
<b>Occupation</b> DC Council Chairman	Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		

8. Full Name, Mailing Address and Zip Code <b>Eric Rogers</b> 3720 Southern Ave SE, Washington, DC 20020	Purpose of Expenditure <b>Salary/Stipend</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 2,500.00</b>
<b>Occupation</b> Campaign Manager	Name and Address of Employer <b>Mendelson for Chairman 2018</b> 1239 E St SE, Washington, DC 20003		
9. Full Name, Mailing Address and Zip Code <b>Dennis Jaffe</b> 2400 16th St NW, Washington, DC 20009	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>06/18/2018</b>	Amount of Each Expenditure This Period  <b>\$ 3,000.00</b>
<b>Occupation</b>	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code <b>Brixton</b> 901 U St NW, Washington, DC 20001	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>06/19/2018</b>	Amount of Each Expenditure This Period  <b>\$ 5,375.60</b>
<b>Occupation</b>	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code <b>Gelberg Signs</b> 6511 Chillum Pl NW, Washington, DC 20012	Purpose of Expenditure <b>Campaign Materials</b>	Date (month, day, year) <b>06/20/2018</b>	Amount of Each Expenditure This Period  <b>\$ 2,565.31</b>
<b>Occupation</b>	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code <b>Philip Mendelson</b> 1239 E St SE, Washington, DC 20003	Purpose of Expenditure <b>Petty Cash</b>	Date (month, day, year) <b>06/21/2018</b>	Amount of Each Expenditure This Period  <b>\$ 280.00</b>
<b>Occupation</b> DC Council Chairman	Name and Address of Employer <b>DC Government</b> 1350 Pennsylvania Ave NW, Washington, DC 20004		
13. Full Name, Mailing Address and Zip Code <b>Josh Gibson</b> 1791 Lanier Pl NW, Washington, DC 20009	Purpose of Expenditure <b>Rental</b>	Date (month, day, year) <b>07/23/2018</b>	Amount of Each Expenditure This Period  <b>\$ 88.00</b>
<b>Occupation</b>	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code <b>Eric Rogers</b> 3720 Southern Ave SE, Washington, DC 20020	Purpose of Expenditure <b>Printing</b>	Date (month, day, year) <b>07/23/2018</b>	Amount of Each Expenditure This Period  <b>\$ 343.69</b>
<b>Occupation</b> Campaign Manager	Name and Address of Employer <b>Mendelson for Chairman 2018</b> 1239 E St SE, Washington, DC 20003		
15. Full Name, Mailing Address and Zip Code <b>Ana R. Harvey</b> 1239 E St SE, Washington, DC 20003	Purpose of Expenditure <b>Campaign Materials</b>	Date (month, day, year) <b>07/23/2018</b>	Amount of Each Expenditure This Period  <b>\$ 1,442.32</b>
<b>Occupation</b>	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code <b>Dennis Jaffe</b> 2400 16th St NW, Washington, DC 20009	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>07/23/2018</b>	Amount of Each Expenditure This Period  <b>\$ 500.00</b>
<b>Occupation</b>	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code <b>Philip Mendelson</b> 1239 E St SE, Washington, DC 20003	Purpose of Expenditure <b>Campaign Materials</b>	Date (month, day, year) <b>07/24/2018</b>	Amount of Each Expenditure This Period  <b>\$ 2,236.05</b>
<b>Occupation</b> <b>DC Council Chairman</b>	Name and Address of Employer <b>DC Government</b> 1350 Pennsylvania Ave NW, Washington, DC 20004		
18. Full Name, Mailing Address and Zip Code <b>ActBlue</b> 366 Summer Street, Somerville, MA 02144	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>08/06/2018</b>	Amount of Each Expenditure This Period  <b>\$ 247.98</b>
<b>Occupation</b>	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code <b>Dennis Jaffe</b> 2400 16th St NW, Washington, DC 20009	Purpose of Expenditure <b>Consultant</b>	Date (month, day, year) <b>08/08/2018</b>	Amount of Each Expenditure This Period  <b>\$ 483.70</b>
<b>Occupation</b>	Name and Address of Employer		
<b>TOTAL This Period (Aggregate of all expenditure pages)</b>			<b>\$ 198,265.20</b>

REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

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

Mendelson for Chairman 2018

1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each Expenditure This Period
<b>Alan Scott Bolden</b> 5320 28th St NW, Washington, DC 20015		(month, day, year)  <b>07/23/2018</b>	<b>\$ 500.00</b>
<b>Contributor Type</b> Individual			

TOTAL This Period (Aggregate of all expenditure pages)

**\$ 500.00**

**SCHEDULE C  
ITEMIZED RECEIPTS - SALES AND COLLECTIONS**

Full Name of Committee (Name of Candidate, if Candidate is reporting)  
**Mendelson for Chairman 2018**

<b>TOTAL SUM OF PROCEEDS DURING THE REPORTING PERIOD FROM:</b>	<u>06/11/2018</u>	<b>TO</b>	<u>08/10/2018</u>	
1. Sale of Tickets (list by event below)* .....				\$ <u>0.00</u>
2. Mass Collections (list by event below) .....				\$ <u>0.00</u>
3. Sale of Items .....				\$ <u>0.00</u>
4. Total cash/check contributions of \$49.00 or less from individuals .....				\$ <u>40.00</u>
<b>TOTAL</b> (carry forward to Line 12 of Detailed Summary Page) .....				\$ <u>40.00</u>

**LIST OF SALES AND COLLECTIONS BY EVENT**

Date of Event (Month, Day, Year)	Type of Event	Amount From Sale of Tickets This Period	Amount From Mass Collections This Period
<b>TOTAL THIS PERIOD</b> (Aggregate the subtotal of all Sales and Collections Pages)		<b>\$ 0.00</b>	<b>\$ 0.00</b>

\* After completion of the above list by event, use the appropriate sub-schedule of Schedule A to list the date, full name and mailing address (occupation and principal place of business, if any) of each person who has purchased one or more tickets for events such as dinners, luncheons, rallies, and similar fund-raising events during this reporting period, and whose ticket purchases are in excess of \$49, or whose total ticket purchases to date for the calendar year (aggregate) are in excess of \$49. Attach the appropriate sub-schedule Schedule A to this Schedule, and identify it as Part 2 of Schedule C.