



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF CAMPAIGN FINANCE  
WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES  
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,  
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) <b>Vince Gray 2020</b>	2. OCF Identification Number <b>PCCCC7207128</b>
Address <b>2619 Branch Ave., SE</b>	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code <b>Washington, DC 20020</b>	

4. TYPE OF REPORT: **December 10th Report**

This REPORT contains activity for: **Primary Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period <b>8/1/2019</b> through <b>12/10/2019</b>		
6. (a) Cash on Hand (January 31 Year End Report Only)		<b>\$ 0.00</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>\$ 0.00</b>	
(c) Total Receipts [from Line (16)]	<b>\$ 25,265.00</b>	<b>\$ 25,265.00</b>
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	<b>\$ 25,265.00</b>	
7. Total Expenditures (from Line 22)	<b>\$ 1,114.68</b>	<b>\$ 1,114.68</b>
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	<b>\$ 24,150.32</b>	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	<b>\$ 0.00</b>	<b>\$ 0.00</b>

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

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

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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. Charles Thies**

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TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED**

12/12/2019

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SIGNATURE OF TREASURER

DATE

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

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NOTARY PUBLIC

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

(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

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.

(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

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

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NOTARY PUBLIC

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

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

<b>1. Full Name of Committee (Name of Candidate, if Candidate is reporting)</b> Vince Gray 2020	<b>REPORT COVERING THE PERIOD</b> FROM: <b>8/1/2019</b> TO: <b>12/10/2019</b>	
<b>I. RECEIPTS</b>	<b>COLUMN A TOTAL THIS PERIOD</b>	<b>COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE</b>
<b>11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 25,265.00	\$ 25,265.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 25,265.00	\$ 25,265.00 11(g)
<b>12. SALES AND COLLECTIONS (Schedule C)</b>	\$ 0.00	\$ 0.00 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>	\$ 25,265.00	\$ 25,265.00 16
<b>II. EXPENDITURES</b>		
<b>17. OPERATING EXPENDITURES (Schedule B)</b>	\$ 1,114.68	\$ 1,114.68 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)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 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	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
<b>22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]</b>	\$ 1,114.68	\$ 1,114.68 22
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		0.00
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		25,265.00
<b>25. SUBTOTAL (add Lines 23 and 24)</b>		25,265.00
<b>26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)</b>		1,114.68
<b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</b>		24,150.32

## 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)

**Vince Gray 2020**

1. Full Name, Mailing Address and Zip Code <b>Charles Thies</b> <b>1609 Buchanan St NE, Washington, DC 20017</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>11/14/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
2. Full Name, Mailing Address and Zip Code <b>Walter Allen</b> <b>163 35th St NE, Washington, DC 20019</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>11/21/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Employment Specialist</b> Name and Address of Employer <b>Covenant House</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
3. Full Name, Mailing Address and Zip Code <b>Marcie Cohen</b> <b>2126 Connecticut Ave 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>11/21/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>none</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
4. Full Name, Mailing Address and Zip Code <b>Harry Johnson</b> <b>10700 Richmond Ave, Houston, TX 77042</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>11/21/2019</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Law Office of Harry Johnson</b>		
Aggregate Year-To-date			<b>\$ 200.00</b>
5. Full Name, Mailing Address and Zip Code <b>Daniel Henson</b> <b>5517 Groveland Ave, Baltimore, MD 21215</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>11/21/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>President</b> Name and Address of Employer <b>Henson Development Corp</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>

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

Vince Gray 2020

6. Full Name, Mailing Address and Zip Code <b>Robert Coomber</b> 425 21st St NE, Washington, DC 20002	<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>11/22/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer US EPA		
Aggregate Year-To-date			<b>\$ 100.00</b>
7. Full Name, Mailing Address and Zip Code <b>Armata Ross</b> 2132 31st St SE, Washington, DC 20020	<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>11/22/2019</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Internal auditor Name and Address of Employer DC gov't		
Aggregate Year-To-date			<b>\$ 10.00</b>
8. Full Name, Mailing Address and Zip Code <b>John Hill</b> 6365 Collins Ave, Miami Beach, FL 33141	<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>11/22/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> none Name and Address of Employer Not employed		
Aggregate Year-To-date			<b>\$ 500.00</b>
9. Full Name, Mailing Address and Zip Code <b>Felicia Wilson</b> 112 Gift Cir, Ambler, PA 19002	<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>11/22/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Prosthodontist Name and Address of Employer Implant Center of Philadelphia		
Aggregate Year-To-date			<b>\$ 500.00</b>
10. Full Name, Mailing Address and Zip Code <b>Katherine Bradley</b> 2211 30th St NW, Washington, DC 20008	<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>11/22/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Founding Chair Name and Address of Employer CityBridge Education		
Aggregate Year-To-date			<b>\$ 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)

Vince Gray 2020

11. Full Name, Mailing Address and Zip Code <b>Marchel Smiley</b> <b>1608 Buchanan St NE, Washington, DC 20017</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>11/23/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Retired Name and Address of Employer Retired		
Aggregate Year-To-date			<b>\$ 100.00</b>
12. Full Name, Mailing Address and Zip Code <b>Glenn Marcus</b> <b>2838 27th St 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>11/25/2019</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Filmmaker Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 10.00</b>
13. Full Name, Mailing Address and Zip Code <b>Lorraine Green</b> <b>100 Lincoln Rd, Miami Beach, FL 33139</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>11/25/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Retired Name and Address of Employer Retired		
Aggregate Year-To-date			<b>\$ 500.00</b>
14. Full Name, Mailing Address and Zip Code <b>Robert Pierno</b> <b>800 Rittenhouse St NW, Washington, DC 20011</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>11/27/2019</b>	Amount of Each Receipt This Period <b>\$ 20.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Sales Name and Address of Employer Sol Systems		
Aggregate Year-To-date			<b>\$ 20.00</b>
15. Full Name, Mailing Address and Zip Code <b>Daniel Singer</b> <b>4716 Alton Pl NW, Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>11/27/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer Trombly & Singer, PLLC		
Aggregate Year-To-date			<b>\$ 250.00</b>

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

Vince Gray 2020

16. Full Name, Mailing Address and Zip Code <b>Byron Auguste</b> 2238 Q St NW, Washington, DC 20008	<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>11/29/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Co-founder Name and Address of Employer <b>Opportunity@Work</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
17. Full Name, Mailing Address and Zip Code <b>James Goulet</b> 53 W Genesee St, Baldwinsville, NY 13027	<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>12/01/2019</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Retired Name and Address of Employer <b>Retired</b>		
Aggregate Year-To-date			<b>\$ 200.00</b>
18. Full Name, Mailing Address and Zip Code <b>Panchita Bello</b> 4715 Blagden Ave 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>12/02/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Real Estate Broker Name and Address of Employer <b>Sherlocke Homes</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
19. Full Name, Mailing Address and Zip Code <b>Paulson &amp; Nace PLLC</b> 1025 Thomas Jefferson St NW Ste 810, 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>12/02/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Limited Liability Company	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
20. Full Name, Mailing Address and Zip Code <b>John E Fletcher Jr</b> 113 10th St NE, Washington, DC 20002	<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>12/03/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> N/A Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>



## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

<b>21. Full Name, Mailing Address and Zip Code</b> <b>Doyle Mitchell</b> <b>8102 Hollygate Dr, Glenn Dale, MD 20769</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)	<b>Date (month, day, year)</b> <b>12/03/2019</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Banker</b> Name and Address of Employer <b>Industrial Bank</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
<b>22. Full Name, Mailing Address and Zip Code</b> <b>Carrie Thornhill</b> <b>2059 36th St SE, Washington, DC 20020</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)	<b>Date (month, day, year)</b> <b>12/03/2019</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
<b>23. Full Name, Mailing Address and Zip Code</b> <b>Mary Joan Harlan</b> <b>6150 SE Winged Foot Dr, Stuart, FL 34997</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)	<b>Date (month, day, year)</b> <b>12/03/2019</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
<b>24. Full Name, Mailing Address and Zip Code</b> <b>Phil Portlock</b> <b>3911 13th St NE, Washington, DC 20017</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)	<b>Date (month, day, year)</b> <b>12/03/2019</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
<b>25. Full Name, Mailing Address and Zip Code</b> <b>Donald Gray</b> <b>1108 51st St NE, Washington, DC 20019</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)	<b>Date (month, day, year)</b> <b>12/03/2019</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 25.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

26. Full Name, Mailing Address and Zip Code <b>James Short</b> <b>2400 Branch Ave SE, Washington, DC 20020</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>12/03/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> N/A Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
27. Full Name, Mailing Address and Zip Code <b>Saul Levin</b> <b>2351 Champlain 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>12/03/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Physician Name and Address of Employer <b>Amer. Psychiatrist Assoc</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
28. Full Name, Mailing Address and Zip Code <b>Mary Lord</b> <b>2125 Newport Pl NW, Washington, DC 20037</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>12/03/2019</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Editor Name and Address of Employer <b>ASEE</b>		
Aggregate Year-To-date			<b>\$ 10.00</b>
29. Full Name, Mailing Address and Zip Code <b>Cora Williams</b> <b>3515 V 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>12/03/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Entrepreneur Name and Address of Employer <b>Ideal Electrical Supply</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
30. Full Name, Mailing Address and Zip Code <b>Charles Parsons</b> <b>129 C St SE, Washington, DC 20003</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>12/03/2019</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>Parsons &amp; Associates</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>

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

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31. Full Name, Mailing Address and Zip Code <b>Kristine Wanner Beyer</b> <b>1200 29th St 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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Admin</b> Name and Address of Employer <b>HEROES, Inc.</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
32. Full Name, Mailing Address and Zip Code <b>Wendy Thornhill</b> <b>17213 Aspen Leaf Dr, Bowie, MD 20716</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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 40.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Exec. Asst.</b> Name and Address of Employer <b>Village Academy of MD</b>		
Aggregate Year-To-date			<b>\$ 40.00</b>
33. Full Name, Mailing Address and Zip Code <b>Lillian Shepherd</b> <b>3436 Commodore Joshua Barney Dr 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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Judge</b> Name and Address of Employer <b>DC gov't</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
34. Full Name, Mailing Address and Zip Code <b>Shari Anthony</b> <b>5719 Ambersweet Ct, Seminole, FL 33772</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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Physician</b> Name and Address of Employer <b>Bayfront</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
35. Full Name, Mailing Address and Zip Code <b>B.B. Otero</b> <b>1769 Lanier Pl 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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>OSG</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

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36. Full Name, Mailing Address and Zip Code <b>Victor Hoskins</b> <b>2425 L St NW, Washington, DC 20037</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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Executive</b> Name and Address of Employer <b>Fairfax County Econ Dev Authority</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
37. Full Name, Mailing Address and Zip Code <b>Jocelyn Wong Henery</b> <b>4208 Rail St, Capitol Heights, MD 20743</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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Management analyst</b> Name and Address of Employer <b>Gov't</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
38. Full Name, Mailing Address and Zip Code <b>Law Office of Bernard Solnik, LLC</b> <b>3 Bethesda Metro Ctr Ste 700, Bethesda, MD 20814</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 175.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Limited Liability Company	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 175.00</b>
39. Full Name, Mailing Address and Zip Code <b>The Abelson Law Firm</b> <b>1717 K St NW, Washington, DC 20006</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/04/2019</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>
40. Full Name, Mailing Address and Zip Code <b>The Cochran Firm D.C.</b> <b>1100 New York Ave NW Ste 340, Washington, DC 20005</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

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41. Full Name, Mailing Address and Zip Code <b>Chasen Boscolo Injury Lawyers</b> <b>7852 Walker Dr Ste 300, Greenbelt, MD 20770</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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Corporation			
Aggregate Year-To-date			<b>\$ 500.00</b>
42. Full Name, Mailing Address and Zip Code <b>Cohen &amp; Cohen</b> <b>1220 19th St NW Ste 500, Washington, DC 20036</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>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Corporation			
Aggregate Year-To-date			<b>\$ 500.00</b>
43. Full Name, Mailing Address and Zip Code <b>Newman &amp; McIntosh LLC</b> <b>600 New Hampshire Ave NW Ste 610, Washington, DC 20037</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/04/2019</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Limited Liability Company			
Aggregate Year-To-date			<b>\$ 200.00</b>
44. Full Name, Mailing Address and Zip Code <b>Douglas Stevens</b> <b>3158 O St 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>12/04/2019</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 Self		
Aggregate Year-To-date			<b>\$ 500.00</b>
45. Full Name, Mailing Address and Zip Code <b>Jennifer Ragins</b> <b>225 Bates St NW, Washington, DC 20001</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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Sr. Policy Analyst Name and Address of Employer TCS		
Aggregate Year-To-date			<b>\$ 100.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

46. Full Name, Mailing Address and Zip Code <b>Walter Allen</b> <b>163 35th St NE, Washington, DC 20019</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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Employment Specialist</b> Name and Address of Employer <b>Covenant House</b>		
Aggregate Year-To-date			<b>\$ 150.00</b>
47. Full Name, Mailing Address and Zip Code <b>Jayne Harper</b> <b>1926 Franklin 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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Project Coordinator</b> Name and Address of Employer <b>OCTO</b>		
Aggregate Year-To-date			<b>\$ 25.00</b>
48. Full Name, Mailing Address and Zip Code <b>John Capozzi</b> <b>3612 Austin St SE, Washington, DC 20020</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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Project Manager</b> Name and Address of Employer <b>DC gov't</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
49. Full Name, Mailing Address and Zip Code <b>Chip Ellis</b> <b>5041 Upton St NW, Washington, DC 20016</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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Real Estate</b> Name and Address of Employer <b>Seif</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
50. Full Name, Mailing Address and Zip Code <b>Chaikin, Sherman, Cammarata &amp; Seigel</b> <b>1232 17th St NW, Washington, DC 20036</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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

51. Full Name, Mailing Address and Zip Code <b>Todd Devorsetz</b> 4604 Harrison 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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer Alderman Devorsetz & Hora		
Aggregate Year-To-date			<b>\$ 150.00</b>
52. Full Name, Mailing Address and Zip Code <b>Benjamin Saulter</b> 1730 Rhode Island Ave NW Ste 1015, 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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 200.00</b>
53. Full Name, Mailing Address and Zip Code <b>Kenneth Trombly</b> 1825 K St NW Ste 1150, 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>12/05/2019</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 Trombly & Singer		
Aggregate Year-To-date			<b>\$ 500.00</b>
54. Full Name, Mailing Address and Zip Code <b>Ariel Levinson-Waldman</b> 6338 32nd 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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> President Name and Address of Employer Tzedek DC		
Aggregate Year-To-date			<b>\$ 500.00</b>
55. Full Name, Mailing Address and Zip Code <b>Keith Watters</b> 1667 K St NW Ste 667, 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>12/05/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer Keith Watters & Associates		
Aggregate Year-To-date			<b>\$ 250.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

56. Full Name, Mailing Address and Zip Code <b>Jack Olender</b> <b>2500 Virginia Ave NW # 1203S, Washington, DC 20037</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/05/2019</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>Jack H. Olender &amp; Associates</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
57. Full Name, Mailing Address and Zip Code <b>Cherrie Doggett</b> <b>1200 29th St 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>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> President Name and Address of Employer <b>Doggett's</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
58. Full Name, Mailing Address and Zip Code <b>Mark Buscaino</b> <b>124 Hamilton Ave, Silver Spring, MD 20901</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>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Forester Name and Address of Employer <b>Casey Trees</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
59. Full Name, Mailing Address and Zip Code <b>Clydewyn Anthony</b> <b>708 James Ridge Rd, Bowie, MD 20721</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>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Scientist Name and Address of Employer <b>US Pharmacopeia</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
60. Full Name, Mailing Address and Zip Code <b>Senora Simpson</b> <b>232 Quackenbos St NE, Washington, DC 20011</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>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Professor Name and Address of Employer <b>Howard Univ.</b>		
Aggregate Year-To-date		<b>\$ 25.00</b>	



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

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61. Full Name, Mailing Address and Zip Code <b>Law Offices of Steven H. Kaminski</b> <b>1825 K St NW Ste 1150, Washington, DC 20006</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Corporation			
Aggregate Year-To-date			<b>\$ 250.00</b>
62. Full Name, Mailing Address and Zip Code <b>Zukerberg &amp; Halperin PLLC</b> <b>1790 Lanier Pl 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>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Limited Liability Company			
Aggregate Year-To-date			<b>\$ 250.00</b>
63. Full Name, Mailing Address and Zip Code <b>Lawrence Lapidus</b> <b>1400 Church St NW Apt 504, Washington, DC 20005</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 100.00</b>
64. Full Name, Mailing Address and Zip Code <b>Brandon Newlands</b> <b>5606 Nebraska Ave 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>12/06/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Claims Advocate Name and Address of Employer BFSI		
Aggregate Year-To-date			<b>\$ 100.00</b>
65. Full Name, Mailing Address and Zip Code <b>Marsha Lillie Blanton</b> <b>6167 Sligo Mill Rd NE, Washington, DC 20011</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>12/07/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Policy adviser & teacher Name and Address of Employer DC gov't & GWU		
Aggregate Year-To-date			<b>\$ 50.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

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66. Full Name, Mailing Address and Zip Code <b>Vera Orlando</b> <b>13154 Kara Ln, Silver Spring, MD 20904</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>12/07/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Manager</b> Name and Address of Employer <b>DC gov't</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
67. Full Name, Mailing Address and Zip Code <b>Dawn Kum</b> <b>8601 Ashwood Dr, Capitol Heights, MD 20743</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>12/08/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Educator</b> Name and Address of Employer <b>Village Academy</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
68. Full Name, Mailing Address and Zip Code <b>Vera Majett</b> <b>6936 9th St NW, Washington, DC 20012</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>12/08/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>N/A</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
69. Full Name, Mailing Address and Zip Code <b>David Bradley</b> <b>2211 30th St 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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Chairman</b> Name and Address of Employer <b>Atlantic Media</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
70. Full Name, Mailing Address and Zip Code <b>John Capozzi</b> <b>3612 Austin St SE, Washington, DC 20020</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Project Manager</b> Name and Address of Employer <b>DC gov't</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

71. Full Name, Mailing Address and Zip Code <b>Sharon Pratt</b> <b>4419 15th St NW, Washington, DC 20011</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>12/09/2019</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>Pratt Consulting</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
72. Full Name, Mailing Address and Zip Code <b>Tim Chapman</b> <b>440 Maple Ave E, Vienna, VA 22180</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Investor</b> Name and Address of Employer <b>Capital City Asset Mgmnt</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
73. Full Name, Mailing Address and Zip Code <b>Heather McCabe</b> <b>3610 Albemarle St 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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>N/A</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 25.00</b>
74. Full Name, Mailing Address and Zip Code <b>Justin Palmer</b> <b>28 53rd St SE, Washington, DC 20019</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Public Policy</b> Name and Address of Employer <b>DC Hospital Association</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
75. Full Name, Mailing Address and Zip Code <b>Scottie Irving</b> <b>1204 Fairmont 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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Construction</b> Name and Address of Employer <b>Blue Skye</b>		
Aggregate Year-To-date			<b>\$ 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)

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76. Full Name, Mailing Address and Zip Code <b>Arrington Dixon</b> <b>2401 Shannon Pl SE, Washington, DC 20020</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Businessman</b> Name and Address of Employer <b>ADA Inc.</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
77. Full Name, Mailing Address and Zip Code <b>Brian Ortiz</b> <b>3602 16th St NW Unit 2, Washington, DC 20010</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Real Estate Development</b> Name and Address of Employer <b>Self</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
78. Full Name, Mailing Address and Zip Code <b>William Alsup</b> <b>3019 44th St NW, Washington, DC 20016</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>n/a</b> Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
79. Full Name, Mailing Address and Zip Code <b>Brett Greene</b> <b>1330 Geranium St NW, Washington, DC 20012</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>President/CEO</b> Name and Address of Employer <b>American Management Corp</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
80. Full Name, Mailing Address and Zip Code <b>Matthew Frumin</b> <b>4709 Albemarle St NW, Washington, DC 20016</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Frumin Law</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>

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

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81. Full Name, Mailing Address and Zip Code <b>Mae Best</b> <b>1702 Peach Blossom Ct, Mitchellville, MD</b> <b>20721</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Admin Name and Address of Employer ERFSC		
Aggregate Year-To-date			<b>\$ 50.00</b>
82. Full Name, Mailing Address and Zip Code <b>Lenwood Johnson</b> <b>3105 Wacark Pl SE Apt 301, Washington, DC</b> <b>20032</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Lubrary Technician Name and Address of Employer LAC Group		
Aggregate Year-To-date			<b>\$ 50.00</b>
83. Full Name, Mailing Address and Zip Code <b>Cynthia Brock-Smith</b> <b>2939 Fort Baker Dr SE, Washington, DC 20020</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> n/a Name and Address of Employer Not employed		
Aggregate Year-To-date			<b>\$ 500.00</b>
84. Full Name, Mailing Address and Zip Code <b>Doxie McCoy</b> <b>3142 Berry Rd 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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Sr. Communications Manager Name and Address of Employer DC Gov't		
Aggregate Year-To-date			<b>\$ 50.00</b>
85. Full Name, Mailing Address and Zip Code <b>Sheryl Chapman</b> <b>500 Fleetwood St, Silver Spring, MD 20910</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>12/09/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Chief Executive Name and Address of Employer Nat'l Ctr for Children & Families		
Aggregate Year-To-date			<b>\$ 250.00</b>

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

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86. Full Name, Mailing Address and Zip Code <b>Patricia Anthony</b> <b>708 James Ridge Rd, Bowie, MD 20721</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> CEO Name and Address of Employer <b>Creative Design</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
87. Full Name, Mailing Address and Zip Code <b>Howard Gassaway Sr.</b> <b>2806 32nd St SE, Washington, DC 20020</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Retired Name and Address of Employer <b>Retired</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
88. Full Name, Mailing Address and Zip Code <b>Lewisor Norman</b> <b>12817 Norwood Ln, Fort Washington, MD 20744</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> n/a Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
89. Full Name, Mailing Address and Zip Code <b>Eric Goulet</b> <b>5752 Sherier Pl NW, Washington, DC 20016</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Committee Director Name and Address of Employer <b>DC Council</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
90. Full Name, Mailing Address and Zip Code <b>Jenell Ross</b> <b>85 Loop Rd, Centerville, OH 45459</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Auto Dealer Name and Address of Employer <b>Bob Ross Auto Group</b>		
Aggregate Year-To-date			<b>\$ 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)

Vince Gray 2020

91. Full Name, Mailing Address and Zip Code <b>Carolyn Nicholas</b> <b>6101 16th St NW Apt 514, Washington, DC 20011</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Realtor Name and Address of Employer <b>Long &amp; Foster</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
92. Full Name, Mailing Address and Zip Code <b>Levonnia Mobley</b> <b>3725 17th 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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> n/a Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
93. Full Name, Mailing Address and Zip Code <b>Herbert Thomas</b> <b>1323 Irving St NW, Washington, DC 20010</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Exec Asst Name and Address of Employer <b>Dept of Forensic Sciences</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
94. Full Name, Mailing Address and Zip Code <b>David Julyan</b> <b>1200 29th 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>12/10/2019</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>Julyan &amp; Julyan</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
95. Full Name, Mailing Address and Zip Code <b>Virgil McDonald</b> <b>2548 36th St SE, Washington, DC 20020</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> n/a Name and Address of Employer <b>Not employed</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>

## ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020

96. Full Name, Mailing Address and Zip Code <b>Joan M. Wilbon &amp; Associates</b> <b>1120 Connecticut Ave NW Ste 1020,</b> <b>Washington, DC 20036</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b>		
<b>Business Type</b> Corporation	Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 250.00</b>
97. Full Name, Mailing Address and Zip Code <b>Regan Zambri Long PLLC</b> <b>1919 M St NW Ste 350, Washington, DC 20036</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b>		
<b>Business Type</b> Limited Liability Company	Name and Address of Employer		
Aggregate Year-To-date			<b>\$ 500.00</b>
98. Full Name, Mailing Address and Zip Code <b>Matthew Shannon</b> <b>3332 M St SE, Washington, DC 20019</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>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 300.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney		
	Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 300.00</b>
99. Full Name, Mailing Address and Zip Code <b>Patrick Regan</b> <b>6 Quincy St, Chevy Chase, MD 20815</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>12/10/2019</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 Regan Zambri Long		
Aggregate Year-To-date			<b>\$ 500.00</b>
100. Full Name, Mailing Address and Zip Code <b>Edward Varrone</b> <b>910 17th St NW Ste 800, Washington, DC 20006</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>12/10/2019</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney		
	Name and Address of Employer Self		
Aggregate Year-To-date			<b>\$ 100.00</b>



TOTAL This Period (Aggregate of all Receipt pages)	\$ 25,265.00
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**FULL Name of Committee (Name of Candidate, if Candidate is reporting)**

Vince Gray 2020

1. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>PO Box 441146, Somerville, MA</b> <b>02144-0031</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>11/24/2019</b>	Amount of Each Expenditure This Period <b>\$ 85.33</b>
<b>Occupation</b>	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>PO Box 441146, Somerville, MA</b> <b>02144-0031</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>12/01/2019</b>	Amount of Each Expenditure This Period <b>\$ 48.59</b>
<b>Occupation</b>	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code <b>BarrComm</b> <b>16175 Golf Club Rd, Weston, FL 33326</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>12/05/2019</b>	Amount of Each Expenditure This Period <b>\$ 800.00</b>
<b>Occupation</b>	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>PO Box 441146, Somerville, MA</b> <b>02144-0031</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>12/08/2019</b>	Amount of Each Expenditure This Period <b>\$ 180.76</b>
<b>Occupation</b>	Name and Address of Employer		
<b>TOTAL This Period (Aggregate of all expenditure pages)</b>			<b>\$ 1,114.68</b>