

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)	2. OCF Identification Number	
Vince Gray 2020	PCCCC7207128	
Address	3. Is this report an Amendment? (Yes	or No)
2619 Branch Ave., SE	Tyes IN No	
City, State and Zip Code		
Washington, DC 20020		
4. TYPE OF REPORT: December 10th Report		
This REPORT contains activity for: Primary Election		
SUMMARY	COLUMN A	COLUMN B
5. Covering Period 8/1/2019 through 12/10/2019	THIS PERIOD	CUMULATIVE TO-DATE
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 0.00	
(c) Total Receipts [from Line (16)]	\$ 25,265.00	\$ 25,265.00
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 25,265.00	
7. Total Expenditures (from Line 22)	\$ 1,114.68	\$ 1,114.68
 Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)] 	\$ 24,150.32	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

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

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

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

TYPE OR PRINT FULL NAME OF CANDIDATE

NOTARY PUBLIC

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

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

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

Mr. Charles Thies

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

SIGNATURE OF TREASURER

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

NOTARY PUBLIC

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

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

12/12/2019

DATE

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

NOTARY PUBLIC

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020	REPORT C FROM: 8	COVERING THE PERIC		0/2019	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD		COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE		
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:					
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$	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) (f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7) 	\$ \$	0.00	\$ \$	0.00	11(e) 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$	25,265.00	\$	25,265.00	11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$	0.00	\$	0.00	12
13. LOANS					
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$	0.00	\$	0.00	13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$	0.00	\$	0.00	13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$	0.00	\$	0.00	13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$	0.00	\$	0.00	14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$	0.00	\$	0.00	15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$	25,265.00	\$	25,265.00	16
II. EXPENDITURES					
17. OPERATING EXPENDITURES (Schedule B)	\$	1,114.68	\$	1,114.68	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1) 19. LOAN REPAYMENTS:	\$	0.00	\$	0.00	18
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$	0.00	\$	0.00	19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$	0.00	\$	0.00	19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$	0.00	\$	0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:					()
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$	0.00	\$	0.00	20(a)
(b) Political Party Committees (Schedule B-3)	\$	0.00	\$	0.00	20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$	0.00	\$	0.00	20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)] 21. OTHER EXPENDITURES	\$	0.00	\$	0.00	20(d)
(a) Independent Expenditures (Schedule B-5)	\$	0.00	\$	0.00	21(a)
(b) Offsets to Receipts (Schedule B-6)	\$	0.00	\$	0.00	21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$	0.00	\$	0.00	21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$	1,114.68	\$	1,114.68	22
III. CASH SUMMARY					
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$			0.00)
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$			25,265.00)
25. SUBTOTAL (add Lines 23 and 24)	\$			25,265.00)
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$			1,114.68	8
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$			24,150.32	2

SCHEDULE APage 1 of 21ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Full Name of Committee (Name of Candidate, if Car Vince Gray 2020	ndidate is reporting)		
 Full Name, Mailing Address and Zip Code Charles Thies 1609 Buchanan St NE, Washington, DC 20017 Contributor Type Individual 	Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Consultant Name and Address of Employer Self	Date (month, day, year) 11/14/2019	Amount of Each Receipt This Period \$ 100.00
	Aggregate Year-To-date		\$ 100.00
 Full Name, Mailing Address and Zip Code Walter Allen 163 35th St NE, Washington, DC 20019 Contributor Type Individual 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Employment Specialist Name and Address of Employer Covenant House	Date (month, day, year) 11/21/2019	Amount of Each Receipt This Period \$ 100.00
	Aggregate Year-To-date		\$ 100.00
 Full Name, Mailing Address and Zip Code Marcie Cohen 2126 Connecticut Ave NW, Washington, DC 20008 Contributor Type 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation none	Date (month, day, year) 11/21/2019	Amount of Each Receipt This Period \$ 50.00
Individual	Name and Address of Employer Not employed	_	
	Aggregate Year-To-date		\$ 50.00
 Full Name, Mailing Address and Zip Code Harry Johnson 10700 Richmond Ave, Houston, TX 77042 Contributor Type Individual 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Attorney	Date (month, day, year) 11/21/2019	Amount of Each Receipt This Period \$ 200.00
	Name and Address of Employer Law Office of Harry Johnson		
	Aggregate Year-To-date		\$ 200.00
 Full Name, Mailing Address and Zip Code Daniel Henson 5517 Groveland Ave, Baltimore, MD 21215 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 11/21/2019	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation President Name and Address of Employer Henson Development Corp		

SCHEDULE A

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

contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 6. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Robert Coomber** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 425 21st St NE, Washington, DC 20002 11/22/2019 \$ 100.00 Other (Specify) □ In Kind (Specify) Occupation **Contributor Type** Attorney Individual Name and Address of Employer US EPA \$ 100.00 Aggregate Year-To-date 7. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Armeta Ross Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 2132 31st St SE, Washington, DC 20020 \$ 10.00 11/22/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Internal auditor** Individual Name and Address of Employer DC gov't Aggregate Year-To-date \$ 10.00 8. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each John Hill Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 6365 Collins Ave, Miami Beach, FL 33141 11/22/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation none Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 500.00 9. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Felicia Wilson Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 112 Gift Cir, Ambler, PA 19002 11/22/2019 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Prosthodontist Individual Name and Address of Employer **Implant Center of Philadelphia** \$ 500.00 Aggregate Year-To-date 10. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Katherine Bradley Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 2211 30th St NW, Washington, DC 20008 11/22/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Founding Chair** Individual Name and Address of Employer **CityBridge Education** Aggregate Year-To-date \$ 500.00

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OCF FORM 16

SCHEDULE A

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

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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 **Contribution Type** Date (month, Amount of Each **Marchel Smiley** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1608 Buchanan St NE, Washington, DC 20017 11/23/2019 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation Retired **Contributor Type** Individual Name and Address of Employer Retired \$ 100.00 Aggregate Year-To-date 12. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Glenn Marcus** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 2838 27th St NW, Washington, DC 20008 \$ 10.00 11/25/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Filmmaker Individual Name and Address of Employer Self Aggregate Year-To-date \$ 10.00 13. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lorraine Green Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 100 Lincoln Rd, Miami Beach, FL 33139 11/25/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Retired **Contributor Type** Occupation Individual Name and Address of Employer Retired Aggregate Year-To-date \$ 500.00 14. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Robert Pierno** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 800 Rittenhouse St NW, Washington, DC 20011 11/27/2019 \$ 20.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Sales Individual Name and Address of Employer Sol Systems \$ 20.00 Aggregate Year-To-date 15. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Daniel Singer** Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 4716 Alton Pl NW, Washington, DC 20016 11/27/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Trombly & Singer, PLLC** Aggregate Year-To-date

\$ 250.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Grav 2020

Vince Gray 2020			
 16. Full Name, Mailing Address and Zip Code Byron Auguste 2238 Q St NW, Washington, DC 20008 Contributor Type Individual 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Co-founder	Date (month, day, year) 11/29/2019	Amount of Each Receipt This Period \$ 500.00
	Name and Address of Employer Opportunity@Work		
	Aggregate Year-To-date		\$ 500.00
 17. Full Name, Mailing Address and Zip Code James Goulet 53 W Genesee St, Baldwinsville, NY 13027 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 12/01/2019	Amount of Each Receipt This Period \$ 200.00
Contributor Type	Occupation Retired		
Individual	Name and Address of Employer Retired		
	Aggregate Year-To-date		\$ 200.00
 Full Name, Mailing Address and Zip Code Panchita Bello 4715 Blagden Ave NW, Washington, DC 20011 	Contribution Type Cash Money Order Check Cashier Check Credit Card	Date (month, day, year)	Amount of Each Receipt This Period
	□ Other (Specify) □ In Kind (Specify)	12/02/2019	\$ 50.00
Contributor Type Individual	Occupation Real Estate Broker Name and Address of Employer Sherlocke Homes	_	
	Aggregate Year-To-date		\$ 50.00
 Full Name, Mailing Address and Zip Code Paulson & Nace PLLC 1025 Thomas Jefferson St NW Ste 810, Washington, DC 20007 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) Check	Date (month, day, year) 12/02/2019	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business	In Kind (Specify) Occupation		
Business Type Limited Liability Company	Name and Address of Employer		
	Aggregate Year-To-date		\$ 500.00
 20. Full Name, Mailing Address and Zip Code John E Fletcher Jr 113 10th St NE, Washington, DC 20002 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 12/03/2019	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation N/A Name and Address of Employer Not employed		

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contributions, or for commercial purposes.

21. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Doyle Mitchell	□ Cash □ Money Order □ Check	day, year)	Receipt This Period
8102 Hollygate Dr, Glenn Dale, MD 20769	Cashier Check I Credit Card	12/03/2019	\$ 100.00
	□ Other (Specify)	12/03/2017	\$ 100.00
	□ In Kind (Specify)		
Contributor Type Individual	Occupation Banker		
Incivituui	Name and Address of Employer		
	Industrial Bank		
	Aggregate Year-To-date		\$ 100.00
22. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Carrie Thornhill	□ Cash □ Money Order □ Check	day, year)	Receipt This Period
2059 36th St SE, Washington, DC 20020	Cashier Check I Credit Card	12/03/2019	\$ 250.00
	□ Other (Specify)	12/03/2019	\$ 230.00
	In Kind (Specify)		
Contributor Type Individual	Occupation Retired		
individual	Name and Address of Employer		
	Retired		
	Aggregate Year-To-date		\$ 250.00
23. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Mary Joan Harlan	Cash Money Order Check	day, year)	Receipt This Period
6150 SE Winged Foot Dr, Stuart, FL 34997	Cashier Check I Credit Card	12/03/2019	\$ 500.00
	$\Box \text{ Other (Specify)}$		
	In Kind (Specify)		
Contributor Type Individual	Occupation Not employed		
	Name and Address of Employer		
	Not employed		
	Aggregate Year-To-date		\$ 500.00
24. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Phil Portlock	Cash Money Order Check	day, year)	Receipt This Period
3911 13th St NE, Washington, DC 20017	□ Cashier Check ☑ Credit Card □ Other (Specify)	12/03/2019	\$ 100.00
	□ In Kind (Specify)		
Contributor Type	Occupation Not employed		
Individual	Name and Address of Employer		
	Not employed		
	Aggregate Year-To-date		\$ 100.00
25. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Donald Gray	Cash Money Order Check	day, year)	Receipt This Period
1108 51st St NE, Washington, DC 20019	Cashier Check I Credit Card	12/03/2019	\$ 25.00
	Chter (Specify)	12/03/2017	\$ 23.00
	In Kind (Specify)		
Contributor Type	Occupation Not employed		
Individual		1	1
Individual	Name and Address of Employer		
Individual	Name and Address of Employer Not employed		

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contributions, or for commercial purposes.

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

Vince Gray 2020 26. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **James Short** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2400 Branch Ave SE, Washington, DC 20020 12/03/2019 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type** N/A Individual Name and Address of Employer Not employed \$ 100.00 Aggregate Year-To-date 27. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Saul Levin Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 2351 Champlain St NW, Washington, DC 12/03/2019 \$ 250.00 □ Other (Specify) 20009 □ In Kind (Specify) **Contributor Type** Occupation Physician Individual Name and Address of Employer Amer. Psychiatrict Assoc Aggregate Year-To-date \$ 250.00 28. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Mary Lord Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2125 Newport Pl NW, Washington, DC 20037 12/03/2019 \$ 10.00 □ Other (Specify) □ In Kind (Specify) Editor **Contributor Type** Occupation Individual Name and Address of Employer ASEE Aggregate Year-To-date \$ 10.00 29. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Cora Williams** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3515 V St NE, Washington, DC 20018 12/03/2019 \$ 250.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Entrepeneur Individual Name and Address of Employer **Ideal Electrical Supply** \$ 250.00 Aggregate Year-To-date 30. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Charles Parsons** Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 129 C St SE, Washington, DC 20003 12/03/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Parsons & Associates Aggregate Year-To-date \$ 500.00

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contributions, or for commercial purposes.

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

31. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Kristine Wanner Beyer	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Period
1200 29th St NW, Washington, DC 20007	Cashier Check Credit Card	12/04/2019	\$ 500.00
	□ Other (Specify)	12/04/2019	\$ 500.00
	In Kind (Specify)		
Contributor Type Individual	Occupation Admin		
marviauai	Name and Address of Employer		
	HEROES, Inc.		
	Aggregate Year-To-date		\$ 500.00
32. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Wendy Thornhill	Cash Money Order Check	day, year)	Receipt This Period
17213 Aspen Leaf Dr, Bowie, MD 20716	\Box Cashier Check \blacksquare Credit Card	12/04/2019	\$ 40.00
	$\Box \text{ Other (Specify)}$		
Contributor Type Individual	Occupation Exec. Asst.		
	Name and Address of Employer Village Academy of MD		
	Village Academy of MD		
	Aggregate Year-To-date		\$ 40.00
33. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Lillian Shepherd	Cash Money Order Check	day, year)	Receipt This Period
3436 Commodore Joshua Barney Dr NE,	Cashier Check I Credit Card	12/04/2019	\$ 100.00
Washington, DC 20018	□ Other (Specify) □ In Kind (Specify)		
Contributor Type	Occupation Judge		
Individual	Name and Address of Employer		
	DC gov't		
	Aggregate Year-To-date		\$ 100.00
34. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Shari Anthony	Cash Money Order Check	day, year)	Receipt This Period
5719 Ambersweet Ct, Seminole, FL 33772	Cashier Check I Credit Card	12/04/2019	\$ 100.00
	□ Other (Specify) □ In Kind (Specify)		
Contributor Type	Occupation Physician		
Individual			
	Name and Address of Employer Bayfront		
			0.100.00
	Aggregate Year-To-date	i	\$ 100.00
35. Full Name, Mailing Address and Zip Code B.B. Otero	Contribution Type	Date (month, day, year)	Amount of Each Receipt This Period
1769 Lanier Pl NW, Washington, DC 20009	$\Box Cashier Check \qquad \Box Credit Card$,	-
1707 Damer 1115 W, Washington, DC 20007	\Box Other (Specify)	12/04/2019	\$ 100.00
	□ In Kind (Specify)		
Contributor Type	Occupation Consultant		
Individual	Name and Address of Employer		
	OSG		

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for Line Number 11a

\$ 500.00

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 36. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Victor Hoskins Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2425 L St NW, Washington, DC 20037 12/04/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Executive **Contributor Type** Individual Name and Address of Employer Fairfax County Econ Dev Authority \$ 500.00 Aggregate Year-To-date 37. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Jocelyn Wong Henery Check Receipt This Period Cash □ Money Order day, year) 4208 Rail St, Capitol Heights, MD 20743 Cashier Check Credit Card \$ 100.00 12/04/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Management analyst Individual Name and Address of Employer Gov't Aggregate Year-To-date \$ 100.00 38. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Law Office of Bernard Solnik, LLC Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3 Bethesda Metro Ctr Ste 700, Bethesda, MD 12/04/2019 \$175.00 □ Other (Specify) 20814 □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Limited Liability Company \$175.00 Aggregate Year-To-date 39. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each The Abelson Law Firm Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1717 K St NW, Washington, DC 20006 12/04/2019 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 100.00 Aggregate Year-To-date 40. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each The CochranFirm D.C. C Money Order Cash Check Receipt This Period day, year) Cashier Check Credit Card 1100 New York Ave NW Ste 340, Washington, 12/04/2019 \$ 500.00 □ Other (Specify) DC 20005 □ In Kind (Specify) Occupation **Contributor Type Business** Name and Address of Employer **Business Type** Corporation

Aggregate Year-To-date

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SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

 Full Name, Mailing Address and Zip Code Chasen Boscolo Injury Lawyers 7852 Wollion Dr. Sta 200, Crearbelt, MD 20770. 	Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card	Date (month, day, year)	Amount of Each Receipt This Period
7852 Walker Dr Ste 300, Greenbelt, MD 20770	Ctean Card Ctean Card Ctean Card D Other (Specify) In Kind (Specify)	12/04/2019	\$ 500.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Corporation			
	Aggregate Year-To-date		\$ 500.00
 Full Name, Mailing Address and Zip Code Cohen & Cohen 	Contribution Type □ Cash □ Money Order ☑ Check	Date (month, day, year)	Amount of Each Receipt This Period
1220 19th St NW Ste 500, Washington, DC 20036	□ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify)	12/04/2019	\$ 500.00
Contributor Type	Occupation		
Business Business Type	Name and Address of Employer		
Corporation	Aggregate Year-To-date		\$ 500.00
43. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Newman & McIntosh LLC	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Perio
600 New Hampshire Ave NW Ste 610, Washington, DC 20037	□ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify)	12/04/2019	\$ 200.00
Contributor Type	Occupation		
Business Business Type	Name and Address of Employer		
Limited Liability Company	Aggregate Year-To-date		\$ 200.00
44. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Douglas Stevens	$\Box Cash \qquad \Box Money Order \qquad \blacksquare Check$	day, year)	Receipt This Period
3158 O St NW, Washington, DC 20007	□ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify)	12/04/2019	\$ 500.00
Contributor Type	Occupation Attorney		
Individual	Name and Address of Employer Self		
	Aggregate Year-To-date		\$ 500.00
45. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Jennifer Ragins 225 Bates St NW, Washington, DC 20001	□ Cash □ Money Order □ Check □ Cashier Check ☑ Credit Card	day, year)	Receipt This Period
225 Dates Strive, Washington, DC 20001	□ Other (Specify) □ In Kind (Specify)	12/05/2019	\$ 100.00
Contributor Type	Occupation Sr. Policy Analyst		
Individual	Name and Address of Employer TCS		

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 46. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Walter Allen Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 163 35th St NE, Washington, DC 20019 12/05/2019 \$ 50.00 □ Other (Specify) □ In Kind (Specify) Occupation **Employment Specialist Contributor Type** Individual Name and Address of Employer **Covenant House** \$ 150.00 Aggregate Year-To-date 47. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check **Jayme Harper** Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1926 Franklin St NE, Washington, DC 20018 12/05/2019 \$ 25.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Project Coordinator** Individual Name and Address of Employer осто Aggregate Year-To-date \$ 25.00 48. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each John Capozzi Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 3612 Austin St SE, Washington, DC 20020 12/05/2019 \$ 50.00 □ Other (Specify) □ In Kind (Specify) **Project Manager Contributor Type** Occupation Individual Name and Address of Employer DC gov't Aggregate Year-To-date \$ 50.00 49. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Chip Ellis Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 5041 Upton St NW, Washington, DC 20016 12/05/2019 \$ 100.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Real Estate** Individual Name and Address of Employer Se;f \$ 100.00 Aggregate Year-To-date 50. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Chaikin, Sherman, Cammarata & Seigel Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 1232 17th St NW, Washington, DC 20036 12/05/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type** Business Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00

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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 **Contribution Type** Date (month, Amount of Each **Todd Devorsetz** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 4604 Harrison St, Chevy Chase, MD 20815 12/05/2019 \$150.00 □ Other (Specify) □ In Kind (Specify) Attorney **Contributor Type** Occupation Individual Name and Address of Employer Alderman Devorsetz & Hora Aggregate Year-To-date \$ 150.00 52. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Benjamin Saulter** Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 1730 Rhode Island Ave NW Ste 1015, 12/05/2019 \$ 200.00 □ Other (Specify) Washington, DC 20036 □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Self Aggregate Year-To-date \$ 200.00 53. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Kenneth Trombly Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1825 K St NW Ste 1150, Washington, DC 20006 12/05/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Trombly & Singer** Aggregate Year-To-date \$ 500.00 54. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Ariel Levinson-Waldman Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 6338 32nd St NW, Washington, DC 20015 12/05/2019 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation President Individual Name and Address of Employer **Tzedek DC** \$ 500.00 Aggregate Year-To-date 55. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Keith Watters** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1667 K St NW Ste 667, Washington, DC 20006 12/05/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Keith Watters & Associates Aggregate Year-To-date \$ 250.00

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\$ 25.00

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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 **Contribution Type** Date (month, Amount of Each Jack Olender Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 2500 Virginia Ave NW # 12038, Washington, 12/05/2019 \$ 500.00 DC 20037 □ Other (Specify) □ In Kind (Specify) Attorney **Contributor Type** Occupation Individual Name and Address of Employer Jack H. Olender & Associates \$ 500.00 Aggregate Year-To-date 57. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Cherrie Doggett** Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 1200 29th St NW, Washington, DC 20007 \$ 500.00 12/06/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation President Individual Name and Address of Employer Doggett's Aggregate Year-To-date \$ 500.00 58. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Mark Buscaino** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 124 Hamilton Ave, Silver Spring, MD 20901 12/06/2019 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Forester **Contributor Type** Occupation Individual Name and Address of Employer **Casey Trees** Aggregate Year-To-date \$ 100.00 59. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Clydewyn Anthony** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 708 James Ridge Rd, Bowie, MD 20721 12/06/2019 \$ 100.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Scientist Individual Name and Address of Employer **US Pharmacopeia** \$ 100.00 Aggregate Year-To-date 60. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Senora Simpson Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 232 Quackenbos St NE, Washington, DC 20011 12/06/2019 \$ 25.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Professor Individual Name and Address of Employer Howard Univ.

Aggregate Year-To-date

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 61. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Law Offices of Steven H. Kaminski Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1825 K St NW Ste 1150, Washington, DC 20006 12/06/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation \$ 250.00 Aggregate Year-To-date 62. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Zukerberg & Halperin PLLC Cash D Money Order Receipt This Period day, year) Cashier Check Credit Card 1790 Lanier Pl NW, Washington, DC 20009 12/06/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type Business** Name and Address of Employer **Business Type** Limited Liability Company Aggregate Year-To-date \$ 250.00 63. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lawrence Lapidus Cash C Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1400 Church St NW Apt 504, Washington, DC 12/06/2019 \$ 100.00 □ Other (Specify) 20005 □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Self \$ 100.00 Aggregate Year-To-date 64. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Brandon Newlands** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 5606 Nebraska Ave NW, Washington, DC 20015 12/06/2019 \$ 100.00 Conter (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Claims Advocate** Individual Name and Address of Employer BFSI \$ 100.00 Aggregate Year-To-date 65. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Marsha Lillie Blanton Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 6167 Sligo Mill Rd NE, Washington, DC 20011 12/07/2019 \$ 50.00 □ Other (Specify) □ In Kind (Specify) Policy adviser & teacher **Contributor Type** Occupation Individual Name and Address of Employer DC gov't & GWU Aggregate Year-To-date \$ 50.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 66. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Vera Orlando Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 13154 Kara Ln, Silver Spring, MD 20904 12/07/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Manager **Contributor Type** Individual Name and Address of Employer DC gov't \$ 500.00 Aggregate Year-To-date 67. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each □ Money Order Check Dawn Kum Cash day, year) Receipt This Period Cashier Check Credit Card 8601 Ashwood Dr, Capitol Heights, MD 20743 \$ 500.00 12/08/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Educator Individual Name and Address of Employer Village Academy Aggregate Year-To-date \$ 500.00 68. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Vera Majett Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 6936 9th St NW, Washington, DC 20012 12/08/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation N/A Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 500.00 69. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **David Bradley** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 2211 30th St NW, Washington, DC 20008 12/09/2019 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Chairman Individual Name and Address of Employer **Atlantic Media** \$ 500.00 Aggregate Year-To-date 70. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, John Capozzi Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 3612 Austin St SE, Washington, DC 20020 12/09/2019 \$ 50.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Project Manager** Individual Name and Address of Employer DC gov't Aggregate Year-To-date \$ 100.00

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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 **Contribution Type** Date (month, Amount of Each **Sharon Pratt** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 4419 15th St NW, Washington, DC 20011 12/09/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) Occupation Consultant **Contributor Type** Individual Name and Address of Employer **Pratt Consulting** Aggregate Year-To-date \$ 250.00 72. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Tim Chapman** Check Receipt This Period Cash Money Order day, year) Cashier Check Credit Card 440 Maple Ave E, Vienna, VA 22180 \$ 500.00 12/09/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Investor Individual Name and Address of Employer **Capital City Asset Mgmnt** Aggregate Year-To-date \$ 500.00 73. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Heather McCabe** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3610 Albemarle St NW, Washington, DC 20008 12/09/2019 \$ 25.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation N/A Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 25.00 74. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Justin Palmer Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 28 53rd St SE, Washington, DC 20019 12/09/2019 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Public Policy** Individual Name and Address of Employer **DC** Hospital Association \$ 500.00 Aggregate Year-To-date 75. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Scottie Irving Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1204 Fairmont St NW, Washington, DC 20009 12/09/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Construction Individual Name and Address of Employer Blue Skye Aggregate Year-To-date

\$ 500.00

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

Vince Gray 2020 76. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Arrington Dixon** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2401 Shannon Pl SE, Washington, DC 20020 12/09/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Businessman **Contributor Type** Individual Name and Address of Employer ADA Inc. \$ 500.00 Aggregate Year-To-date 77. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Brian Ortiz** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 3602 16th St NW Unit 2, Washington, DC 20010 \$ 50.00 12/09/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Real Estate Development** Individual Name and Address of Employer Self Aggregate Year-To-date \$ 50.00 78. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each William Alsup Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 3019 44th St NW, Washington, DC 20016 12/09/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation n/a Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 500.00 79. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Brett Greene** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1330 Geranium St NW, Washington, DC 20012 12/09/2019 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation President/CEO Individual Name and Address of Employer **American Management Corp** \$ 500.00 Aggregate Year-To-date 80. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Matthew Frumin Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 4709 Albemarle St NW, Washington, DC 20016 12/09/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Frumin Law Aggregate Year-To-date \$ 250.00

\$ 250.00

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 81. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Mae Best Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1702 Peach Blossom Ct, Mitchellville, MD 12/09/2019 \$ 50.00 □ Other (Specify) 20721 □ In Kind (Specify) Occupation Admin **Contributor Type** Individual Name and Address of Employer ERFSC \$ 50.00 Aggregate Year-To-date 82. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lenwood Johnson □ Money Order Check Receipt This Period Cash day, year) Cashier Check Credit Card 3105 Waclark Pl SE Apt 301, Washington, DC \$ 50.00 12/09/2019 □ Other (Specify) 20032 □ In Kind (Specify) **Contributor Type** Occupation Lubrary Technician Individual Name and Address of Employer LAC Group Aggregate Year-To-date \$ 50.00 83. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Cynthia Brock-Smith Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2939 Fort Baker Dr SE, Washington, DC 20020 12/09/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation n/a Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 500.00 84. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Doxie McCoy** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3142 Berry Rd NE, Washington, DC 20018 12/09/2019 \$ 50.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Sr. Communications Manager Individual Name and Address of Employer DC Gov't \$ 50.00 Aggregate Year-To-date 85. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Sheryl Chapman Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 500 Fleetwood St, Silver Spring, MD 20910 12/09/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) Occupation **Chief Executive Contributor Type** Individual Name and Address of Employer Nat'l Ctr for Children & Families

Aggregate Year-To-date

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

Vince Gray 2020 86. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Patricia Anthony** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 708 James Ridge Rd, Bowie, MD 20721 12/10/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation CEO **Contributor Type** Individual Name and Address of Employer **Creative Design** \$ 500.00 Aggregate Year-To-date 87. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Howard Gassaway Sr. Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 2806 32nd St SE, Washington, DC 20020 12/10/2019 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Retired Individual Name and Address of Employer Retired Aggregate Year-To-date \$ 250.00 88. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lewisor Norman Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 12817 Norwood Ln, Fort Washington, MD 20744 12/10/2019 \$ 50.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation n/a Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 50.00 89. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Eric Goulet** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 5752 Sherier Pl NW, Washington, DC 20016 12/10/2019 \$ 250.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Committee Director** Individual Name and Address of Employer **DC Council** \$ 250.00 Aggregate Year-To-date 90. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Jenell Ross Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 85 Loop Rd, Centerville, OH 45459 12/10/2019 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Auto Dealer Contributor Type** Individual Name and Address of Employer **Bob Ross Auto Group** Aggregate Year-To-date \$ 500.00

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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 **Contribution Type** Date (month, Amount of Each **Carolyn Nicholas** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 6101 16th St NW Apt 514, Washington, DC 12/10/2019 \$ 50.00 □ Other (Specify) 20011 □ In Kind (Specify) Occupation Realtor **Contributor Type** Individual Name and Address of Employer Long & Foster \$ 50.00 Aggregate Year-To-date 92. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Levonnia Mobley Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 3725 17th St NE, Washington, DC 20018 \$ 100.00 12/10/2019 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation n/a Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 100.00 93. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Herbert Thomas Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1323 Irving St NW, Washington, DC 20010 12/10/2019 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Exec Asst **Contributor Type** Occupation Individual Name and Address of Employer **Dept of Forensic Sciences** Aggregate Year-To-date \$ 100.00 94. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **David Julyan** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1200 29th St NW, Washington, DC 20007 12/10/2019 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Julyan & Julyan \$ 500.00 Aggregate Year-To-date 95. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Virgil McDonald Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 2548 36th St SE, Washington, DC 20020 12/10/2019 \$ 50.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation n/a Individual Name and Address of Employer Not employed Aggregate Year-To-date

\$ 50.00

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

SCHEDULE B ITEMIZED OPERATING EXPENDITURES

FULL Name of Committee (Name of Candidate	e, if Candidate is reporting)		
Vince Gray 2020			
1. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144-0031 Occupation	Purpose of Expenditure Bank Fees Name and Address of Employer	Date (month, day, year) 11/24/2019	Amount of Each Expenditure This Period \$ 85.33
2. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144-0031	Purpose of Expenditure Bank Fees	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	12/01/2019	\$ 48.59
3. Full Name, Mailing Address and Zip Code BarrComm 16175 Golf Club Rd, Weston, FL 33326	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 12/05/2019	Amount of Each Expenditure This Period \$ 800.00
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144-0031	Purpose of Expenditure Bank Fees	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	12/08/2019	\$ 180.76