



**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) Campaign to Decriminalize Nature DC	2. OCF Identification Number INTOOO206626
Address 2448 Massachusetts Ave., NW	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20008	

4. TYPE OF REPORT: **8 Day Pre General Election Report**

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

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 9/10/2020 through 10/25/2020		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 4,364.11	
(c) Total Receipts [from Line (16)]	\$ 53,953.20	\$ 796,942.87
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 58,317.31	
7. Total Expenditures (from Line 22)	\$ 27,638.42	\$ 766,163.98
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 30,678.89	
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	\$ 43,000.00

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

SIGNATURE OF CANDIDATE

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.

(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. Adam Eiding

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

10/26/2020

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.

(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

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.

(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.

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) Campaign to Decriminalize Nature DC	REPORT COVERING THE PERIOD FROM: 9/10/2020 TO: 10/25/2020	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 18,074.97	\$ 698,064.64 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)	\$ 35,878.23	\$ 55,878.23 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)]	\$ 53,953.20	\$ 753,942.87 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	\$ 43,000.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 43,000.00 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]	\$ 53,953.20	\$ 796,942.87 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 27,638.42	\$ 766,163.98 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(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)]	\$ 0.00	\$ 0.00 20(d)
21. OTHER EXPENDITURES		
(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)]	\$ 27,638.42	\$ 766,163.98 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$ 4,364.11
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$ 53,953.20
25. SUBTOTAL (add Lines 23 and 24)		\$ 58,317.31
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		\$ 27,638.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		\$ 30,678.89

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

1. Full Name, Mailing Address and Zip Code Arthur Schroeder 2333 20th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/10/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer No Employed		
Aggregate Year-To-date			\$ 25.00
2. Full Name, Mailing Address and Zip Code Jordan Shirkey 1956 Asheville Dr, Charlottesville, VA 22911	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/10/2020	Amount of Each Receipt This Period \$ 60.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 110.00
3. Full Name, Mailing Address and Zip Code Kyle Malloy 712 H St NE Unit 693, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/10/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 30.00
4. Full Name, Mailing Address and Zip Code Kyle Jaeger 1347 N Alta Vista Blvd Apt 9, Los Angeles, CA 90046	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/10/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Journalist Name and Address of Employer Marijuana Moment 1347 N Alta Vista Blvd Apt 9, Los Angeles, CA 90046		
Aggregate Year-To-date			\$ 25.00
5. Full Name, Mailing Address and Zip Code Andrew Gargano 401 Massachusetts Ave NW Apt 301, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/11/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

<p>6. Full Name, Mailing Address and Zip Code Christian Brown 3544 Rock Creek Church Rd NW Bsmt, Washington, DC 20010</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 09/12/2020</p>	<p>Amount of Each Receipt This Period \$ 30.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Economist Name and Address of Employer FDA 10903 New Hampshire Ave, Silver Spring, MD 20993</p>		
<p>Aggregate Year-To-date</p>			<p>\$ 30.00</p>
<p>7. Full Name, Mailing Address and Zip Code Joshua DeShong 74 Roosevelt Cir E, Red Bank, NJ 07701</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 09/12/2020</p>	<p>Amount of Each Receipt This Period \$ 25.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer</p>		
<p>Aggregate Year-To-date</p>			<p>\$ 25.00</p>
<p>8. Full Name, Mailing Address and Zip Code Patrick Naughten 744 Iowa St, Ashland, OR 97520</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 09/12/2020</p>	<p>Amount of Each Receipt This Period \$ 25.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer Not employed</p>		
<p>Aggregate Year-To-date</p>			<p>\$ 25.00</p>
<p>9. Full Name, Mailing Address and Zip Code John Cloud 1915 Kalorama Rd NW Apt 603, Washington, DC 20009</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 09/12/2020</p>	<p>Amount of Each Receipt This Period \$ 30.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer</p>		
<p>Aggregate Year-To-date</p>			<p>\$ 30.00</p>
<p>10. Full Name, Mailing Address and Zip Code Paul Harshaw 4000 S Capitol St SE, Washington, DC 20032</p>	<p>Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)</p>	<p>Date (month, day, year) 09/12/2020</p>	<p>Amount of Each Receipt This Period \$ 25.00</p>
<p>Contributor Type Individual</p>	<p>Occupation Name and Address of Employer</p>		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 25.00
11. Full Name, Mailing Address and Zip Code Lee Hopcraft 5158 34th St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/13/2020	Amount of Each Receipt This Period \$ 4.20
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
		Aggregate Year-To-date	\$ 82.80
12. Full Name, Mailing Address and Zip Code Edwin Andino 111 Lee Ave Apt 402, Takoma Park, MD 20912	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/13/2020	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Associate Architect Name and Address of Employer Four Brothers 4009 Georgia Ave NW, Washington, DC 20011		
		Aggregate Year-To-date	\$ 15.00
13. Full Name, Mailing Address and Zip Code John McGowan 2448 Massachusetts Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/13/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Kinner & McGowan PLLC 2448 Massachusetts ave nw, Washington, DC 20008		
		Aggregate Year-To-date	\$ 25.00
14. Full Name, Mailing Address and Zip Code Stark Sutton 2433 Ontario Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/14/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
		Aggregate Year-To-date	\$ 25.00
15. Full Name, Mailing Address and Zip Code Mark Bishop 7140 DAVIDSON Rd, Sanger, TX 76266	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/14/2020	Amount of Each Receipt This Period \$ 80.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 180.00
16. Full Name, Mailing Address and Zip Code Zachary Everett 1830 R St NW Apt 81, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/14/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Marketing Name and Address of Employer Aaas 1200 New York Ave NW, Washington, DC 20005		
		Aggregate Year-To-date	\$ 25.00
17. Full Name, Mailing Address and Zip Code Thaddeus Kull 320 D St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/15/2020	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Account executive Name and Address of Employer GovPredict 1015 15th St NW Ste 600, Washington, DC 20005		
		Aggregate Year-To-date	\$ 35.00
18. Full Name, Mailing Address and Zip Code Luc Harbens 6 Kalorama Cir NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/16/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
		Aggregate Year-To-date	\$ 25.00
19. Full Name, Mailing Address and Zip Code Theo Shoag 418 North St Apt 1, Burlington, VT 05401	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/16/2020	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Line cook Name and Address of Employer The Skinny Pancake 60 Lake St, Burlington, VT 05401		
		Aggregate Year-To-date	\$ 35.00
20. Full Name, Mailing Address and Zip Code itamar cohn 6617 Highway 140, Midpines, CA 95345	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/17/2020	Amount of Each Receipt This Period \$ 99.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 99.00
21. Full Name, Mailing Address and Zip Code Jon Uptide 2130 P St NW Apt 423, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director Name and Address of Employer Fannie Mae 1100 15th St NW, Washington, DC 20005		
		Aggregate Year-To-date	\$ 100.00
22. Full Name, Mailing Address and Zip Code Delaney Klein 2750 14th St NW Apt 408, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Finance Name and Address of Employer Fannie Mae 1100 15th St NW, Washington, DC 20005		
		Aggregate Year-To-date	\$ 100.00
23. Full Name, Mailing Address and Zip Code Marc Schloss 8221 Larry Pl, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Government Affairs Name and Address of Employer Consumer Healthcare Products Association 8221 Larry Pl, Chevy Chase, MD 20815		
		Aggregate Year-To-date	\$ 100.00
24. Full Name, Mailing Address and Zip Code Jessica Straus 131 Quincy Pl NE # 1, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Government Affairs Name and Address of Employer DISH 131 Quincy Pl NE # 1, Washington, DC 20002		
		Aggregate Year-To-date	\$ 50.00
25. Full Name, Mailing Address and Zip Code Adam Yoffie 23 S 23rd St Unit 2Q, Philadelphia, PA 19103	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Bristol Myers Squibb 3401 Princeton Pike, Lawrence Township, NJ 08648		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 25.00
26. Full Name, Mailing Address and Zip Code James Pittman 4317 19th Pl NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer PHI 701 9th St NW, Washington, DC 20001		
		Aggregate Year-To-date	\$ 100.00
27. Full Name, Mailing Address and Zip Code Veronica Duron 635 Elliott St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/23/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Public policy Name and Address of Employer US Senate 635 Elliott St NE, Washington, DC 20002		
		Aggregate Year-To-date	\$ 50.00
28. Full Name, Mailing Address and Zip Code Abbie Sorrendino 1117 8th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/24/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Legislative Director Name and Address of Employer U.S. House 1317 Longworth House Office Building, Washington, DC 20515		
		Aggregate Year-To-date	\$ 50.00
29. Full Name, Mailing Address and Zip Code John Rizzo 4205 8th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/24/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
		Aggregate Year-To-date	\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

30. Full Name, Mailing Address and Zip Code Erica Day 1156 18th Ave, Redwood City, CA 94063	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/24/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Operations and Finance Director Name and Address of Employer NCIRE 4150 Clement St, San Francisco, CA 94121		
Aggregate Year-To-date		\$ 100.00	
31. Full Name, Mailing Address and Zip Code Michael Barber 28 K St SE Apt 820, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/24/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Marketing Name and Address of Employer barber&hewitt LLC 17502 Corte Lomas Verdes, Poway, CA 92064		
Aggregate Year-To-date		\$ 100.00	
32. Full Name, Mailing Address and Zip Code Jenner Tresan 12407 Prosser Dam Rd, Truckee, CA 96161	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/26/2020	Amount of Each Receipt This Period \$ 65.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Guidehouse 1200 19th St NW, Washington, DC 20036		
Aggregate Year-To-date		\$ 65.00	
33. Full Name, Mailing Address and Zip Code Christopher Davis 1804 Vermont Ave NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/26/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Government Affairs Principal Name and Address of Employer Cigna 701 Pennsylvania Ave NW Ste 720, Washington, DC 20004		
Aggregate Year-To-date		\$ 100.00	
34. Full Name, Mailing Address and Zip Code Adam Goldberg 12417 Bobbink Ct, Potomac, MD 20854	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/26/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Public Affairs Name and Address of Employer Anthem Inc. 12417 Bobbink Ct, Potomac, MD 20854		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 50.00
35. Full Name, Mailing Address and Zip Code Lauren Szczerbinski 1920 14th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/27/2020	Amount of Each Receipt This Period \$ 65.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
		Aggregate Year-To-date	\$ 65.00
36. Full Name, Mailing Address and Zip Code Michael OHallaron 414 Delafield Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/27/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Finance Name and Address of Employer Fannie mae 414 Delafield Pl NW, Washington, DC 20011		
		Aggregate Year-To-date	\$ 150.00
37. Full Name, Mailing Address and Zip Code Michael OHallaron 414 Delafield Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/27/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Finance Name and Address of Employer Fannie mae 414 Delafield Pl NW, Washington, DC 20011		
		Aggregate Year-To-date	\$ 150.00
38. Full Name, Mailing Address and Zip Code Gerard Petrella 1385 F St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/27/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Government Name and Address of Employer US Senate 1385 F St NE, Washington, DC 20002		
		Aggregate Year-To-date	\$ 100.00
39. Full Name, Mailing Address and Zip Code Alan Amsterdam 1858 Mintwood Pl NW Apt 4, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/27/2020	Amount of Each Receipt This Period \$ 60.00
Contributor Type Individual	Occupation self-employed Name and Address of Employer Capitol Hemp 1770 Columbia Rd NW, Washington, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 60.00
40. Full Name, Mailing Address and Zip Code Maxwell Young 367 sterling pl, Brooklyn, NY 11238	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Communications Name and Address of Employer 100RC 361 sterling pl, Brooklyn, NY 11238		
		Aggregate Year-To-date	\$ 100.00
41. Full Name, Mailing Address and Zip Code Katherine Gorman 291 Saranac Ave, Buffalo, NY 14216	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Communications Name and Address of Employer Delaware North 250 Delaware Ave, Buffalo, NY 14202		
		Aggregate Year-To-date	\$ 20.00
42. Full Name, Mailing Address and Zip Code Holly Shen 2361 Forbes Ave, Santa Clara, CA 95050	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation deputy director Name and Address of Employer san jose museum of art 110 S Market St, San Jose, CA 95113		
		Aggregate Year-To-date	\$ 25.00
43. Full Name, Mailing Address and Zip Code Jason Coleman 4929 Kansas Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation CFO Name and Address of Employer State Department 4929 Kansas Ave NW, Washington, DC 20011		
		Aggregate Year-To-date	\$ 50.00
44. Full Name, Mailing Address and Zip Code Paul Dorsey 4307 Wendover Rd, Baltimore, MD 21218	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Territory Manager Name and Address of Employer Pentax Medical 3 Paragon Dr, Montvale, NJ 07645		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 100.00	
45. Full Name, Mailing Address and Zip Code Lesley Woodbury 5901 Drew Ave S, Edina, MN 55410	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Name and Address of Employer Not Employed			
		Aggregate Year-To-date	\$ 20.00	
46. Full Name, Mailing Address and Zip Code Lars Pettygrove 1921 2nd St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/28/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Trainer Name and Address of Employer Vida fitness 1612 U St NW, Washington, DC 20009			
		Aggregate Year-To-date	\$ 25.00	
47. Full Name, Mailing Address and Zip Code David Terry 8106 Roanoke Ave, Takoma Park, MD 20912	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/29/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Not employed			
		Aggregate Year-To-date	\$ 100.00	
48. Full Name, Mailing Address and Zip Code Keavney Klein 816 44th St, Oakland, CA 94608	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/29/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Kaiser Permanente 831 10th St NE, Washington, DC 20002			
		Aggregate Year-To-date	\$ 25.00	
49. Full Name, Mailing Address and Zip Code Seth Teicher 4331 Reno Rd NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/29/2020	Amount of Each Receipt This Period \$ 36.00	
Contributor Type Individual	Occupation Name and Address of Employer not employed			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 36.00
50. Full Name, Mailing Address and Zip Code David Borden 641 Houston Ave Apt 302, Takoma Park, MD 20912	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/29/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Drug Policy Reform Name and Address of Employer Stop The Drug War 641 Houston Ave Apt 302, Takoma Park, MD 20912		
		Aggregate Year-To-date	\$ 65.00
51. Full Name, Mailing Address and Zip Code Paul Tarighi 1001 W 37th St, Baltimore, MD 21211	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/29/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Caterer Name and Address of Employer Self 1001 W 37th St, Baltimore, MD 21211		
		Aggregate Year-To-date	\$ 100.00
52. Full Name, Mailing Address and Zip Code Casey Dunajick-DeKnight 806 Maryland Ave NE Apt 3, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/30/2020	Amount of Each Receipt This Period \$ 60.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
		Aggregate Year-To-date	\$ 60.00
53. Full Name, Mailing Address and Zip Code Elizabeth Cox 231 Love Point Ave, Stevensville, MD 21666	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/30/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
		Aggregate Year-To-date	\$ 50.00
54. Full Name, Mailing Address and Zip Code Brian Wanlass 2450 Ontario Rd NW Apt 2, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/30/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer Self 2450 Ontario Rd NW Apt 2, Washington, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

		Aggregate Year-To-date	\$ 10.00
55. Full Name, Mailing Address and Zip Code Frederick Joyner 82 W University St, Alfred, NY 14802	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/30/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer Wayland-Cohocton Schools 2350 ROUTE 63, WAYLAND, NY 14572		
		Aggregate Year-To-date	\$ 25.00
56. Full Name, Mailing Address and Zip Code Grant Barbosa 2801 Adams Mill Rd NW Apt 101, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/30/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director Government Affairs & Policy Name and Address of Employer Emergent BioSolutions 1455 Pennsylvania Ave NW Ste 1225, Washington, DC 20004		
		Aggregate Year-To-date	\$ 100.00
57. Full Name, Mailing Address and Zip Code Diana Doukas 1304 F St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Facebook 1304 F St NE, Washington, DC 20002		
		Aggregate Year-To-date	\$ 50.00
58. Full Name, Mailing Address and Zip Code Scott Gelbman 225 I St NE Unit 515, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer BCW 1801 K St NW, Washington, DC 20006		
		Aggregate Year-To-date	\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

59. Full Name, Mailing Address and Zip Code Gloria Walker 1921 Kalorama Rd NW Apt 110, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Finance Name and Address of Employer World Food Program USA 1725 I St NW, Washington, DC 20006		
Aggregate Year-To-date			\$ 30.00
60. Full Name, Mailing Address and Zip Code Matthew Antkowiak 1217 Constitution Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation veterinarian Name and Address of Employer AtlasVet 1326 H St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 25.00
61. Full Name, Mailing Address and Zip Code Frederick Uku 35 N St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 25.00
62. Full Name, Mailing Address and Zip Code Melodie DeMulling 4455 C St SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Fundraiser Name and Address of Employer eli 4455 C St SE, Washington, DC 20019		
Aggregate Year-To-date			\$ 25.00
63. Full Name, Mailing Address and Zip Code Kathleen Fus 5719 WOODLAND DR, WESTERN SPRINGS, IL 60558	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Sales Name and Address of Employer Steelcase 5719 Woodland Dr, WESTERN SPRINGS, IL 60558		
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

64. Full Name, Mailing Address and Zip Code Molly Ahearn Allen 1620 Hamlin St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Partner		
Name and Address of Employer American Continental Group 1800 M St NW, Washington, DC 20036			
Aggregate Year-To-date			\$ 250.00
65. Full Name, Mailing Address and Zip Code Jessica quinn 17322 Goldenwest St, Huntington Beach, CA 92647	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation		
Name and Address of Employer Not employed			
Aggregate Year-To-date			\$ 25.00
66. Full Name, Mailing Address and Zip Code Stefan Huh 629 Otis Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Senior Accounting Manager		
Name and Address of Employer Pathways to Housing DC 828 Evarts St NE, Washington, DC 20018			
Aggregate Year-To-date			\$ 75.00
67. Full Name, Mailing Address and Zip Code Patricia Allen 291 E McCormick Ave, State College, PA 16801	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation		
Name and Address of Employer Not employed			
Aggregate Year-To-date			\$ 100.00
68. Full Name, Mailing Address and Zip Code Nicholas Macek 1254 Half St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Digital Director		
Name and Address of Employer End Citizens United and Let America Vote 100 M St SE Ste 350, Washington, DC 20003			
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

69. Full Name, Mailing Address and Zip Code Victor Dooley 112 Seaton Pl NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/01/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Bartender Name and Address of Employer Red Bear Brewing 209 M St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 30.00
70. Full Name, Mailing Address and Zip Code michael spira 1102 R St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/02/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Lobbyist Name and Address of Employer Venn Strategies 1102 R St NW, Washington, DC 20009		
Aggregate Year-To-date			\$ 50.00
71. Full Name, Mailing Address and Zip Code Chandler Bovitz 1888 Emery St NW, Atlanta, GA 30318	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/03/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 25.00
72. Full Name, Mailing Address and Zip Code Brian Musfelt 1600 16th St NW Apt 303, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/03/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Project Manager Name and Address of Employer Digital Turbine 110 N Glebe Rd # 800, Arlington, VA 22203		
Aggregate Year-To-date			\$ 50.00
73. Full Name, Mailing Address and Zip Code Keith Meagher 17714 Smokewood Dr, Germantown, MD 20874	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/03/2020	Amount of Each Receipt This Period \$ 85.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 85.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

74. Full Name, Mailing Address and Zip Code Josh Davis 1806 Lamont St NW Apt B, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/05/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Kitchen Manager Name and Address of Employer Red Beard 2619 Evarts St NE, Washington, DC 20018		
Aggregate Year-To-date		\$ 25.00	
75. Full Name, Mailing Address and Zip Code David Bronner 208 Rosebay Dr, Encinitas, CA 92024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/05/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Soap maker Name and Address of Employer Dr. Bronner's PO Box 1958, Vista, CA 92085		
Aggregate Year-To-date		\$ 50.00	
76. Full Name, Mailing Address and Zip Code Carmen Jackman 2609 Hershfield Ct, Silver Spring, MD 20904	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/05/2020	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date		\$ 35.00	
77. Full Name, Mailing Address and Zip Code Clay Jutila 7 4th St NE Apt A, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date		\$ 35.00	
78. Full Name, Mailing Address and Zip Code Christopher Bourassa 2701 W 1st Ave, Denver, CO 80219	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date		\$ 35.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

79. Full Name, Mailing Address and Zip Code Caitlin Dimino 20 Wallis Rd, Chestnut Hill, MA 02467	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 90.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self-employed 20 Wallis Rd, Chestnut Hill, MA 02467		
Aggregate Year-To-date		\$ 90.00	
80. Full Name, Mailing Address and Zip Code Tyler Carlson 14 Stratford Garden Ct, Silver Spring, MD 20904	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 120.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 120.00	
81. Full Name, Mailing Address and Zip Code Joshua DeShong 74 Roosevelt Cir E, Red Bank, NJ 07701	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
82. Full Name, Mailing Address and Zip Code Andy Adkins 859 Washington St # 291, Red Bluff, CA 96080	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date		\$ 20.00	
83. Full Name, Mailing Address and Zip Code Adam Seth 2800 Quebec St NW Apt 105, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date		\$ 30.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

84. Full Name, Mailing Address and Zip Code Jonathan Lubecky 306 Seneca River Dr, Summerville, SC 29485	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/07/2020	Amount of Each Receipt This Period \$ 45.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 45.00
85. Full Name, Mailing Address and Zip Code Mitchell Maxey 2308 Cumberland Dr, Tallahassee, FL 32303	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/07/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Senior claims examiner Name and Address of Employer Gainwell Technologies 2308 Cumberland dr, Tallahassee, FL 32303		
Aggregate Year-To-date			\$ 10.00
86. Full Name, Mailing Address and Zip Code Minna Nilanont 409 Compton Ave, Laurel, MD 20707	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/07/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Prince George's Community College 301 Largo Rd, Largo, MD 20774		
Aggregate Year-To-date			\$ 20.00
87. Full Name, Mailing Address and Zip Code Mia Hardwick 208 Rosebay Dr, Encinitas, CA 92024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/07/2020	Amount of Each Receipt This Period \$ 45.00
Contributor Type Individual	Occupation Artist Name and Address of Employer Dr Bronners 1335 Park Center Dr, Vista, CA 92081		
Aggregate Year-To-date			\$ 59.20
88. Full Name, Mailing Address and Zip Code Brian Bayerie 2267 35th St Apt 3A, Astoria, NY 11105	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Actuary Name and Address of Employer Ernst and Young 5 Times Sq, New York, NY 10036		
Aggregate Year-To-date			\$ 150.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

89. Full Name, Mailing Address and Zip Code ileana james 1507 S St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/08/2020	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Government Name and Address of Employer DC Government 441 4th St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 40.00
90. Full Name, Mailing Address and Zip Code Jason Blum 8514 Grubb Rd, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/09/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 25.00
91. Full Name, Mailing Address and Zip Code Sean Harris 600 Roosevelt Blvd Apt 303, Falls Church, VA 22044	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/09/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Senior Contracts Specialist Name and Address of Employer MicroStrategy 1850 Towers Crescent Plz, Vienna, VA 22182		
Aggregate Year-To-date			\$ 30.00
92. Full Name, Mailing Address and Zip Code Jon Markman 1019 10th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/09/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Federal Government 1019 10th St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 25.00
93. Full Name, Mailing Address and Zip Code Josh Davis 1806 Lamont St NW Apt B, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/09/2020	Amount of Each Receipt This Period \$ 27.50
Contributor Type Individual	Occupation Kitchen Manager Name and Address of Employer Red Beard 2619 Evarts St NE, Washington, DC 20018		
Aggregate Year-To-date			\$ 52.50

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

94. Full Name, Mailing Address and Zip Code Kenley Farmer 615 Quintana Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/10/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
95. Full Name, Mailing Address and Zip Code Maria Porta 4512 MacArthur Blvd NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/10/2020	Amount of Each Receipt This Period \$ 80.00
Contributor Type Individual	Occupation Reseacher Name and Address of Employer FMG 1010 N Glebe Rd, Arlington, VA 22201		
Aggregate Year-To-date			\$ 80.00
96. Full Name, Mailing Address and Zip Code Elizabeth McNichol 1337 Jonquil St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/11/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Policy Analyst Name and Address of Employer Center on Budget and Policy Priorities 820 1st St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 25.00
97. Full Name, Mailing Address and Zip Code Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) In Kind	Date (month, day, year) 10/12/2020	Amount of Each Receipt This Period \$ 11,330.59
Contributor Type Business Business Type Sole Proprietorship	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 87,649.07
98. Full Name, Mailing Address and Zip Code Stacey Jimenez 2402 Lenfant Sq SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/12/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Customer service Name and Address of Employer NFCU 820 Follin Ln SE, Vienna, VA 22180		
Aggregate Year-To-date			\$ 30.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

99. Full Name, Mailing Address and Zip Code Seth Rosenberg 3000 Connecticut Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/12/2020	Amount of Each Receipt This Period \$ 70.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 70.00
100. Full Name, Mailing Address and Zip Code Lee Hopcraft 5158 34th St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/13/2020	Amount of Each Receipt This Period \$ 4.20
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 87.00
101. Full Name, Mailing Address and Zip Code Stephen Van Camp 601 G St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/14/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 25.00
102. Full Name, Mailing Address and Zip Code Juliet Warren 2070 Belmont Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/14/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 25.00
103. Full Name, Mailing Address and Zip Code Brian McCarthy 5201 Norway Dr, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/15/2020	Amount of Each Receipt This Period \$ 70.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 70.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

104. Full Name, Mailing Address and Zip Code CARLOS GAMEZ 2821 11TH ST NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/17/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 20.00
105. Full Name, Mailing Address and Zip Code Sophia Searby 3901 Jocelyn St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/17/2020	Amount of Each Receipt This Period \$ 45.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 45.00
106. Full Name, Mailing Address and Zip Code Julia Venanzi 1843 Mintwood Pl NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/18/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Program Lead Name and Address of Employer Us dept of HHS 7500 Security Blvd, Windsor Mill, MD 21244		
Aggregate Year-To-date			\$ 10.00
107. Full Name, Mailing Address and Zip Code Gregory Lyon 2218 Lakeshire Dr, Alexandria, VA 22308	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/18/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 25.00
108. Full Name, Mailing Address and Zip Code Billy Maguire 3700 O St NW, Washington, DC 20057	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/18/2020	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 15.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

109. Full Name, Mailing Address and Zip Code William Thomas 1440 N St NW Apt 207, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/19/2020	Amount of Each Receipt This Period \$ 45.00
Contributor Type Individual	Occupation Director Govt Relations Name and Address of Employer Food & Friends 219 Riggs Rd NE, Washington, DC 20011		
Aggregate Year-To-date			\$ 45.00
110. Full Name, Mailing Address and Zip Code Justin Miele 37 Maryland Ave Unit 218, Rockville, MD 20850	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/19/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Bbp 37 Maryland Ave Unit 218, Rockville, MD 20850		
Aggregate Year-To-date			\$ 30.00
111. Full Name, Mailing Address and Zip Code Seth Teicher 4331 Reno Rd NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/20/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 61.00
112. Full Name, Mailing Address and Zip Code Matt Eliot 1322 Roxanna Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/21/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 100.00
113. Full Name, Mailing Address and Zip Code Stephen Jeter 1129 5th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation photographer Name and Address of Employer self-employed 1129 5th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

114. Full Name, Mailing Address and Zip Code Bryan Swallow 79 Potomac Ave SE Apt 621, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Engineer Name and Address of Employer JE Dunn Construction 1001 Locust St, Kansas city, MO 64106		
Aggregate Year-To-date		\$ 50.00	
115. Full Name, Mailing Address and Zip Code Ben Sale 4013 poplar st, Fairfax, VA 22030	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/23/2020	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date		\$ 10.00	
116. Full Name, Mailing Address and Zip Code Lennice Werth 206 Union Mills Rd, Troy, VA 22974	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/23/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date		\$ 75.00	
117. Full Name, Mailing Address and Zip Code Christopher Walker 10353 Hite Cir, Elk Grove, CA 95757	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/23/2020	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date		\$ 5.00	
118. Full Name, Mailing Address and Zip Code Mark Bishop 7140 DAVIDSON Rd, Sanger, TX 76266	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/24/2020	Amount of Each Receipt This Period \$ 80.00
Contributor Type Individual	Occupation Name and Address of Employer not employed		
Aggregate Year-To-date		\$ 260.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Campaign to Decriminalize Nature DC

119. Full Name, Mailing Address and Zip Code Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) In Kind	Date (month, day, year) 10/24/2020	Amount of Each Receipt This Period \$ 1,168.48
Contributor Type Business Business Type Sole Proprietorship	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 88,817.55

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TOTAL This Period (Aggregate of all Receipt pages)	\$ 18,074.97
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ITEMIZED RECEIPTS FROM COMMITTEES OTHER THAN POLITICAL COMMITTEES AUTHORIZED BY THE SAME CANDIDATE

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Full Name of Committee (Name of Candidate, if Candidate is reporting)
Campaign to Decriminalize Nature DC

1. Full Name, Mailing Address and Zip Code New Approach PAC PO Box 1498, Concord, NH 03302	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) In Kind	Date (month, day, year) 10/06/2020	Amount of Each Receipt This Period \$ 35,878.23
Contributor Type Other PAC or Committee - New Approach PAC			
Aggregate Year-To-date			\$ 55,878.23

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TOTAL This Period (Aggregate of all Receipt pages)	\$ 35,878.23
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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Campaign to Decriminalize Nature DC

1. Full Name, Mailing Address and Zip Code Marlene Karpati 5331 Pooks Hill Rd, Bethesda, MD 20814	Purpose of Expenditure Consultant	Date (month, day, year) 09/11/2020	Amount of Each Expenditure This Period \$ 308.00
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code Natalia Merzliakova 736 RITCHIE AVE, Silver Spring, MD 20910	Purpose of Expenditure Consultant	Date (month, day, year) 09/11/2020	Amount of Each Expenditure This Period \$ 790.00
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Everyaction 655 15th ST NW Suite 560, Washington, DC 20005	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 09/14/2020	Amount of Each Expenditure This Period \$ 3,180.00
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Uneeda Nichols 2759 DOUGLASS RD SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 09/18/2020	Amount of Each Expenditure This Period \$ 960.00
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Riley Sloan 1924 8th st NW apt 339, Washington, DC 20001	Purpose of Expenditure Consultant	Date (month, day, year) 09/18/2020	Amount of Each Expenditure This Period \$ 290.00
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Charity Perry 1425 1ST ST SW 31, Washington, DC 20024	Purpose of Expenditure Consultant	Date (month, day, year) 09/18/2020	Amount of Each Expenditure This Period \$ 540.00
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Adrian Salsgiver 3431 YUMA ST NW 104, Washington, DC 20008	Purpose of Expenditure Consultant	Date (month, day, year) 09/18/2020	Amount of Each Expenditure This Period \$ 270.00
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Charles Burgess 445 2ND ST SE, Washington, DC 20003	Purpose of Expenditure Consultant	Date (month, day, year) 09/18/2020	Amount of Each Expenditure This Period \$ 250.00
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code Frank Barr 1828 Tobias Dr SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 09/22/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Gabrie Cowan 2812 N JEFFERSON ST, Arlington, VA 22207	Purpose of Expenditure Consultant	Date (month, day, year) 09/24/2020	Amount of Each Expenditure This Period \$ 400.00
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Shazza Berhan 2448 Massachusetts ave nw, Washington, DC 20008	Purpose of Expenditure Consultant	Date (month, day, year) 09/29/2020	Amount of Each Expenditure This Period \$ 1,000.00
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code Uneeda Nichols 2759 DOUGLASS RD SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 09/30/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Uneeda Nichols 2759 DOUGLASS RD SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 09/30/2020	Amount of Each Expenditure This Period \$ 400.00
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Mary Gellen 2448 Massachusetts ave nw, Washington, DC 20008	Purpose of Expenditure Consultant	Date (month, day, year) 09/30/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Justin Paterson 5344 29TH ST NW, Washington, DC 20015	Purpose of Expenditure Consultant	Date (month, day, year) 09/30/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Charles Burgess 445 2ND ST SE, Washington, DC 20003	Purpose of Expenditure Consultant	Date (month, day, year) 10/01/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code Victoria Schmotzer 625 MONROE ST NE 531, Washington, DC 20017	Purpose of Expenditure Consultant	Date (month, day, year) 10/01/2020	Amount of Each Expenditure This Period \$ 1,120.00
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code Adrian Salsgiver 3431 YUMA ST NW 104, Washington, DC 20008	Purpose of Expenditure Consultant	Date (month, day, year) 10/02/2020	Amount of Each Expenditure This Period \$ 350.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code Lowe's home centers 501 Glebe road , Easton, MD 21601	Purpose of Expenditure Supplies	Date (month, day, year) 10/03/2020	Amount of Each Expenditure This Period \$ 100.42
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code Taleik Perkins 2448 Massachusetts ave nw, Washington, DC 20008	Purpose of Expenditure Consultant	Date (month, day, year) 10/06/2020	Amount of Each Expenditure This Period \$ 800.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code Uneeda Nichols 2759 DOUGLASS RD SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 10/06/2020	Amount of Each Expenditure This Period \$ 800.00
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code William Kudok 1226 GIRARD ST NW, Washington, DC 20009	Purpose of Expenditure Consultant	Date (month, day, year) 10/06/2020	Amount of Each Expenditure This Period \$ 3,400.00
Occupation	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code Gabrie Cowan 2812 N JEFFERSON ST, Arlington, VA 22207	Purpose of Expenditure Consultant	Date (month, day, year) 10/06/2020	Amount of Each Expenditure This Period \$ 830.00
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code Riley Sloan 1924 8th st NW apt 339, Washington, DC 20001	Purpose of Expenditure Consultant	Date (month, day, year) 10/06/2020	Amount of Each Expenditure This Period \$ 1,010.00
Occupation	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code Mary Gellen 2448 Massachusetts ave nw, Washington, DC 20008	Purpose of Expenditure Consultant	Date (month, day, year) 10/07/2020	Amount of Each Expenditure This Period \$ 350.00
Occupation	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code Justin Paterson 5344 29TH ST NW, Washington, DC 20015	Purpose of Expenditure Consultant	Date (month, day, year) 10/07/2020	Amount of Each Expenditure This Period \$ 350.00
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code Frank Barr 1828 Tobias Dr SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 500.00
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code Charles Burgess 445 2ND ST SE, Washington, DC 20003	Purpose of Expenditure Consultant	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 600.00
Occupation	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code Natalia Merzliakova 736 RITCHIE AVE, Silver Spring, MD 20910	Purpose of Expenditure Consultant	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 940.00
Occupation	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code Angela Barksdale 1204 Penn St NE 5, Washington, DC 20002	Purpose of Expenditure Consultant	Date (month, day, year) 10/12/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code Gabrie Cowan 2812 N JEFFERSON ST, Arlington, VA 22207	Purpose of Expenditure Consultant	Date (month, day, year) 10/13/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		

32. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
Entercom 2400 Market Street 4th Fl , Philadelphia, PA 19103	Advertising	10/13/2020	\$ 5,000.00
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 27,638.42

**SCHEDULE E-1
LOANS FROM OTHER SOURCES MADE TO THE COMMITTEE**

Full Name of Committee (Name of Candidate, if Candidate is reporting) Campaign to Decriminalize Nature DC				
1. Full Name, Mailing Address and Zip Code of Loan Source Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008	Original Amount of Loan \$ 15,000.00	Payment this period \$ 0.00	Cumulative Payment to Date \$0.00	Balance Outstanding at Close of this Period \$ 15,000.00
Terms: Date Incurred: 03/27/2020 Date Due: 05/06/2020 Interest Rate: 0.00 % (apr) <input type="checkbox"/> Secured				
2. Full Name, Mailing Address and Zip Code of Loan Source Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008	Original Amount of Loan \$ 28,000.00	Payment this period \$ 0.00	Cumulative Payment to Date \$0.00	Balance Outstanding at Close of this Period \$ 28,000.00
Terms: Date Incurred: 07/13/2020 Date Due: 07/13/2020 Interest Rate: 0.00 % (apr) <input type="checkbox"/> Secured				
TOTALS this period (Aggregate the Subtotals from all Loan Schedules)				\$ 43,000.00
Carry Outstanding Loan Balance forward to Line 10 (a) on the Summary Page.				