

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				
 Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 	2. OCF Identification Number PCCCC7207128			
Address 2619 Branch Ave., SE	3. Is this report an Amendment? (Yes ☑ Yes □ No	or No)		
City, State and Zip Code Washington, DC 20020				
4. TYPE OF REPORT: 8 Day Pre Primary Election report				
This REPORT contains activity for: Primary Election				
SUMMARY 5. Covering Period 3/11/2020 through 5/25/2020	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00		
(b) Cash on Hand at Beginning of Reporting Period	\$ 91,056.48			
(c) Total Receipts [from Line (16)]	\$ 53,785.95	\$ 190,895.00		
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 144,842.43			
7. Total Expenditures (from Line 22)	\$ 100,741.02	\$ 146,793.59		
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 44,101.41			
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00		
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00		
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00		

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

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

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

TYPE OR PRINT FULL NAME OF CANDIDATE

NOTARY PUBLIC

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

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

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

Mr. Charles Thies

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

SIGNATURE OF TREASURER

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

NOTARY PUBLIC

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

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

04/01/2021

DATE

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

NOTARY PUBLIC

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020	REPORT COVERING THE PERIOD FROM: 3/11/2020 TO: 5/25/2020				
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD		COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE		
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:					
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$	51,690.00	\$	186,649.05	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)	\$	2,095.95	\$	4,095.95	11(c)
(d) The Candidate (Schedule A-3)	\$	0.00	\$	0.00	11(d)
 (e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4) (f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7) 	\$ \$	0.00	\$ \$	0.00	11(e) 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$	53,785.95	\$	190,745.00	11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$	0.00	\$	0.00	12
13. LOANS					
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$	0.00	\$	0.00	13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$	0.00	\$	0.00	13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$	0.00	\$	0.00	13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$	0.00	\$	0.00	14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$	0.00	\$	150.00	15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$	53,785.95	\$	190,895.00	16
II. EXPENDITURES					
17. OPERATING EXPENDITURES (Schedule B)	\$	97,681.02	\$	143,733.59	17
 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1) 19. LOAN REPAYMENTS: 	\$	0.00	\$	0.00	18
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$	0.00	\$	0.00	19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$	0.00	\$	0.00	19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)] 20. REFUNDS OF CONTRIBUTIONS TO:	\$	0.00	\$	0.00	19(c)
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$	1,500.00	\$	1,500.00	20(a)
(b) Political Party Committees (Schedule B-3)	\$	0.00	\$	0.00	20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$	0.00	\$	0.00	20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)] 21. OTHER EXPENDITURES	\$	1,500.00	\$	1,500.00	
(a) Independent Expenditures (Schedule B-5)	\$	0.00	\$	0.00	21(a)
(b) Offsets to Receipts (Schedule B-6)	\$	1,560.00	\$	1,560.00	21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$	1,560.00	\$	1,560.00	21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$	100,741.02	\$	146,793.59	22
III. CASH SUMMARY					
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$			91,056.48	8
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$			53,785.95	5
25. SUBTOTAL (add Lines 23 and 24)	\$			144,842.43	3
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$			100,741.02	2
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$			44,101.41	1

SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Can	ndidate is reporting)		
Vince Gray 2020			
 Full Name, Mailing Address and Zip Code Mary Ann Smith 	Contribution Type □ Cash □ Money Order ☑ Check	Date (month, day, year)	Amount of Each Receipt This Period
3642 Highwood Dr SE, Washington, DC 20020	Cashier Check Credit Card Other (Specify) In Kind (Specify)	03/11/2020	\$ 150.00
Contributor Type	Occupation Retired		
Individual	Name and Address of Employer		
	N/A		
	Aggregate Year-To-date		\$ 150.00
2. Full Name, Mailing Address and Zip Code Constance Woody	Contribution Type	Date (month, day, year)	Amount of Each Receipt This Period
4338 Gorman Ter SE, Washington, DC 20019	Cashier Check Credit Card Other (Specify)	03/11/2020	\$ 100.00
	In Kind (Specify)		
Contributor Type Individual	Occupation Retired		
marviadar	Name and Address of Employer N/A		
	Aggregate Year-To-date		\$ 100.00
3. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Stephen Seabron	□ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card	day, year)	Receipt This Period
7619 13th St NW, Washington, DC 20012	□ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify)	03/11/2020	\$ 50.00
Contributor Type	Occupation Physician		
Individual	Name and Address of Employer Providence Hospital		
	Aggregate Year-To-date		\$ 50.00
4. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Joanne Prue	Cash Money Order Check	day, year)	Receipt This Period
313 34th St NE, Washington, DC 20019	Cashier Check Credit Card	03/11/2020	\$ 100.00
	□ Other (Specify) □ In Kind (Specify)		
Contributor Type	Occupation Not Employed		
Individual	Name and Address of Employer		
	Not Employed		
	Aggregate Year-To-date		\$ 100.00
5. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Bowman Consulting Group	□ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card	day, year)	Receipt This Period
12355 Sunrise Valley Dr Ste 520, Reston, VA 20191	□ Other (Specify)	03/12/2020	\$ 500.00
	□ In Kind (Specify)		
Contributor Type	Occupation		
Business	Name and Address of Employer		
Business Type			
Corporation			

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SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020			
 6. Full Name, Mailing Address and Zip Code Heart Consultants LLC 8630 Fenton St Ste 720, Silver Spring, MD 20910 Contributor Type Business Business Type Corporation 7. Full Name, Mailing Address and Zip Code 	Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Occupation Name and Address of Employer Aggregate Year-To-date Contribution Type Contribution Type	Date (month, day, year) 03/12/2020	Amount of Each Receipt This Period \$ 150.00 \$ 150.00 Amount of Each
Muhammad Kalid 2041 Martin Luther King Jr Ave SE Ste 103, Washington, DC 20020 Contributor Type Individual	Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Podiatrist Name and Address of Employer Anacostia Foot Center	03/12/2020	Receipt This Period
	Aggregate Year-To-date		\$ 100.00
 Full Name, Mailing Address and Zip Code Palmer Foret 5069 Overlook Rd NW, Washington, DC 20016 Contributor Type Individual 	Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation Attorney Name and Address of Employer Ashcraft & Gerel	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 100.00
	Aggregate Year-To-date		\$ 100.00
 Full Name, Mailing Address and Zip Code Loretta Caldwell 4625 Blagden Ter NW, Washington, DC 20011 Contributor Type Individual 	Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation President Name and Address of Employer L.S. Caldwell & Assoc.	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 500.00
	Aggregate Year-To-date		\$ 500.00
 Full Name, Mailing Address and Zip Code City Interests, LLC 2900 K St NW Ste 401, Washington, DC 20007 Contributor Type Business 	Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ □ Other (Specify) □ In Kind (Specify) □ Occupation □ □	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 500.00
Business Business Type Corporation	Name and Address of Employer		
	Aggregate Year-To-date		\$ 500.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 11. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Kermit Rosenberg Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 3849 Whitman Rd, Annandale, VA 22003 03/13/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Attorney **Contributor Type** Occupation Individual Name and Address of Employer Washington Global Law Group \$ 500.00 Aggregate Year-To-date 12. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Stephanie Farrell** Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 6939 Greentree Rd, Bethesda, MD 20817 \$ 500.00 03/13/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Associate Principal** Individual Name and Address of Employer Torti Gallas + Partners, Inc Aggregate Year-To-date \$ 500.00 13. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Peter Farrell** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 6939 Greentree Rd, Bethesda, MD 20817 03/13/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Owner **Contributor Type** Occupation Individual Name and Address of Employer **CityInterests Development Partners** Aggregate Year-To-date \$ 500.00 14. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Meghan Grace Farrell** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 6939 Greentree Rd, Bethesda, MD 20817 03/13/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Sr. Associate Individual Name and Address of Employer McKenna & Associates \$ 500.00 Aggregate Year-To-date 15. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Michael Hodas** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 816 12th St NE, Washington, DC 20002 03/13/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation VP Individual Name and Address of Employer CityInterests Aggregate Year-To-date \$ 500.00

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

Vince Gray 2020			-
 16. Full Name, Mailing Address and Zip Code Derick Mitchell 10202 Wooden Bridge Ln, Clinton, MD 20735 	Contribution Type Cash Money Order Image: Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation VP Name and Address of Employer CityInterests	_	
	Aggregate Year-To-date		\$ 500.00
 17. Full Name, Mailing Address and Zip Code Rick Adams 1700 K St NW Ste 750, Washington, DC 20006 Contributor Type Individual 	Contribution Type Cash Money Order Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation President	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 500.00
	Name and Address of Employer United Bankshares, Inc.		
	Aggregate Year-To-date		\$ 500.00
 Full Name, Mailing Address and Zip Code Marcus Coates 3826 Halley Ter SE, Washington, DC 20032 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify)	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	In Kind (Specify) Occupation Division Manager Name and Address of Employer DC Government		
	Aggregate Year-To-date		\$ 50.00
 Full Name, Mailing Address and Zip Code Lyle Blanchard 5609 32nd St NW, Washington, DC 20015 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/13/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Greenstein DeLorme & Luchs		
	Aggregate Year-To-date		\$ 100.00
 20. Full Name, Mailing Address and Zip Code Anthem, Inc. 3075 Vandercar Way, Cincinnati, OH 45209 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Corporation			

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SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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contributions, or for commercial purposes.

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

21. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
L.S. Caldwell & Associates, Inc.	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Period
5427 14th St NW, Washington, DC 20011	Cashier Check Credit Card	03/16/2020	\$ 500.00
-	□ Other (Specify)	03/10/2020	\$ 500.00
	□ In Kind (Specify)		
Contributor Type	Occupation		
Business	Name and Address of Employer		
Business Type			
Corporation			
	Aggregate Year-To-date		\$ 500.00
22. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Edward Rankin	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Period
7731 Rocton Ct, Chevy Chase, MD 20815	Cashier Check Credit Card	03/16/2020	\$ 100.00
	□ Other (Specify)	03/10/2020	\$ 100.00
	□ In Kind (Specify)		
Contributor Type	Occupation Surgeon		
Individual	Name and Address of Employer		
	Self		
	Aggregate Year-To-date		<u> </u>
23. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Brooke Patten	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Period
1324 Emerson St NW, Washington, DC 20011	□ Cashier Check □ Credit Card		\$ 50.00
	□ Other (Specify)	03/16/2020	\$ 50.00
	□ In Kind (Specify)		
Contributor Type	Occupation VP		
Individual	Name and Address of Employer		
	Medstar Wash. Hospital Ctr		
	Aggregate Year-To-date		\$ 50.00
24. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
Harvey Green	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Period
11434 Iager Blvd, Fulton, MD 20759	Cashier Check Credit Card	03/16/2020	\$ 25.00
	□ Other (Specify)	05/10/2020	\$ 25.00
	□ In Kind (Specify)		
Contributor Type	Occupation VP Philanthropy		
Individual	Name and Address of Employer		
	Medstar Wash. Hospital Ctr.		
	Aggregate Year-To-date		\$ 25.00
25. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,	Amount of Each
John Rockwood	□ Cash □ Money Order ☑ Check	day, year)	Receipt This Period
3409 Northampton St NW, Washington, DC	Cashier Check Credit Card	03/16/2020	\$ 500.00
20015	□ Other (Specify)	00/10/2020	φ 500.00
	□ In Kind (Specify)		
Contributor Type	Occupation Health Exec		
Ter dissi des al		1	1
Individual	Name and Address of Employer		
Individual	Name and Address of Employer Medstar Nat'l Rehab Ctr.		
Individual			\$ 500.00

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

 26. Full Name, Mailing Address and Zip Code Susan Nelson 5895 Deborah Jean Dr, Elkridge, MD 21075 	Contribution Type Cash Money Order Check Cashier Check Credit Card Check Other (Specify) In Kind (Specify) Check	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Finance Name and Address of Employer Medstar Health		
	Aggregate Year-To-date		\$ 500.00
 27. Full Name, Mailing Address and Zip Code Susan Eckert 14514 Manor Park Dr, Rockville, MD 20853 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Sr. VP Name and Address of Employer Medstar Health		
	Aggregate Year-To-date		\$ 500.00
 Full Name, Mailing Address and Zip Code Michael Curran 3551 Cattail Creek Dr, Glenwood, MD 21738 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Exec VP Name and Address of Employer Medstar Health		
	Aggregate Year-To-date		\$ 500.00
 29. Full Name, Mailing Address and Zip Code Kenneth Samet 8820 Burdette Rd, Bethesda, MD 20817 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	OccupationHealthcare ExecutiveName and Address of EmployerMedstar Health		
	Aggregate Year-To-date		\$ 500.00
 30. Full Name, Mailing Address and Zip Code Robert Scarola 3700 Massachusetts Ave NW, Washington, DC 20016 Contributor Type Individual 	Contribution Type Cash Money Order Image: Check Cashier Check Credit Card Other (Specify) Image: Check In Kind (Specify) VP	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 25.00
	Name and Address of Employer Medstar Wash. Hospital Ctr.		

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 31. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Kevin Kowalski Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 535 Garrison Forest Rd, Owings Mills, MD 03/16/2020 \$ 500.00 □ Other (Specify) 21117 □ In Kind (Specify) Occupation Healthcare **Contributor Type** Individual Name and Address of Employer **Medstar Health** \$ 500.00 Aggregate Year-To-date 32. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Eric Wagner** Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 711 E Timber Branch Pkwy, Alexandria, VA \$ 500.00 03/16/2020 □ Other (Specify) 22302 □ In Kind (Specify) **Contributor Type** Occupation **Healthcare Executive** Individual Name and Address of Employer **Medstar Health** Aggregate Year-To-date \$ 500.00 33. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Loretta Young Walker Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 4940 Roaring Fork Pass, Suwanee, GA 30024 03/16/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Sr. VP **Contributor Type** Occupation Individual Name and Address of Employer **MedStar Health** Aggregate Year-To-date \$ 500.00 34. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Oliver Johnson** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 14717 Dover Rd, Reisterstown, MD 21136 03/16/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Medstar Health** \$ 500.00 Aggregate Year-To-date 35. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Catherine Monge** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 4220 Great Oak Rd, Rockville, MD 20853 03/16/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Sr. VP Admin Individual Name and Address of Employer MedStar Wash. Hospital Ctr.

Aggregate Year-To-date

\$ 100.00

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

Vince Gray 2020 36. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check **Gregory Argyros** Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 16809 Ethelwood Ter, Olney, MD 20832 03/16/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Chief Medial Officer Contributor Type** Individual Name and Address of Employer **MedStar Health** \$ 500.00 Aggregate Year-To-date 37. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Mary Joy Maxwell Check Receipt This Period Cash □ Money Order day, year) Cashier Check Credit Card 20265 Water Mark Pl, Potomac Falls, VA 20165 \$ 500.00 03/16/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Physician Individual Name and Address of Employer **MedStar Health** Aggregate Year-To-date \$ 500.00 38. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Tonya Washington** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 14818 Darbydale Dr, Bowie, MD 20721 03/16/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Chief Nursing Officer Contributor Type** Occupation Individual Name and Address of Employer MedStar Wash. Hospital Ctr. Aggregate Year-To-date \$ 100.00 39. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Paul Hagens** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3802 Deep Hollow Way, Bowie, MD 20721 03/16/2020 \$ 100.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation VP Individual Name and Address of Employer MedStar Wash. Hospital Ctr. \$ 100.00 Aggregate Year-To-date 40. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Karen Jerome Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 9614 Brunett Ct, Silver Spring, MD 20901 03/16/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Chief Quality Officer** Individual Name and Address of Employer MedStar Wash. Hospital Ctr. Aggregate Year-To-date \$ 100.00

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

Vince Gray 2020			
 41. Full Name, Mailing Address and Zip Code Ariam Yitbarek 3019 Federal Hill Dr, Falls Church, VA 22044 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) VP, Nursing	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 100.00
Individual	Name and Address of Employer MedStar Wash. Hospital Ctr.		
	Aggregate Year-To-date		\$ 100.00
 42. Full Name, Mailing Address and Zip Code Jeffrey Dubin 4506 Rosedale Ave, Bethesda, MD 20814 Contributor Type 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) Occupation Physician	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 100.00
Individual	Name and Address of Employer MedStar Health		
	Aggregate Year-To-date	- -	\$ 100.00
 43. Full Name, Mailing Address and Zip Code Scott Barnum 41 Ridge Rd, Rumson, NJ 07760 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify)	Date (month, day, year) 03/16/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Managing Director Name and Address of Employer Ravinia Capital Group		
	Aggregate Year-To-date		\$ 500.00
 44. Full Name, Mailing Address and Zip Code Florence Njang 1435 10th St, Glenarden, MD 20706 Contributor Type Individual 	Contribution Type Cash Money Order Check Cashier Check Credit Card Other (Specify) In Kind (Specify) In Kind (Specify) Occupation Nurse Practitioner Name and Address of Employer	Date (month, day, year) 03/18/2020	Amount of Each Receipt This Period \$ 30.00
	Self		
	Aggregate Year-To-date		\$ 30.00
 45. Full Name, Mailing Address and Zip Code Michael Veve 320 S West St Apt 310, Alexandria, VA 22314 	Contribution Type □ Cash □ Money Order ☑ Check □ Cashier Check □ Credit Card □ □ Other (Specify) □ In Kind (Specify) □ Occupation Attorney □	Date (month, day, year) 03/18/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Lasa, Monroig, and Veve		
	Aggregate Year-To-date		\$ 100.00

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

Vince Gray 2020 46. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Kyle Schaftel** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 860 W Blackhawk St Unit 1605, Chicago, IL 03/19/2020 \$ 500.00 □ Other (Specify) 60642 □ In Kind (Specify) Occupation Asst. VP **Contributor Type** Individual Name and Address of Employer **Ravinia Capital Group** Aggregate Year-To-date \$ 500.00 47. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Antonio Bismonte Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 2450 W Lake Ave Unit A, Glenview, IL 60026 \$ 500.00 03/19/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Sr. VP Individual Name and Address of Employer **Ravinia Capital Group** Aggregate Year-To-date \$ 500.00 48. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **James Solomon** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 190 S La Salle St Ste 1730, Chicago, IL 60603 03/19/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Managing Partner Contributor Type** Occupation Individual Name and Address of Employer **Ravinia Capital Group** Aggregate Year-To-date \$ 500.00 49. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Karen Solomon Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 600 W Belden Ave, Chicago, IL 60614 03/19/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Requested Individual Name and Address of Employer Requested \$ 500.00 Aggregate Year-To-date 50. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Barry Miles** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 3021 S Princeton Ave, Chicago, IL 60616 03/20/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Senior Strategic Account Chef **Contributor Type** Individual Name and Address of Employer Cargill Aggregate Year-To-date \$ 500.00

OCF FORM 16

SCHEDULE A Page 11 of 34 ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 51. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Matthew Shannon** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 3332 M St SE, Washington, DC 20019 03/20/2020 \$ 200.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type** Attorney Individual Name and Address of Employer Self \$ 500.00 Aggregate Year-To-date 52. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Richard Snowdon III** □ Money Order Check Receipt This Period Cash day, year) Cashier Check Credit Card 1515 29th St NW, Washington, DC 20007 \$ 500.00 03/23/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Self Aggregate Year-To-date \$ 500.00 53. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **URI Retail Portfolio, LLC** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2900 K St NW Ste 401, Washington, DC 20007 03/23/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 54. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Shellkare Designs, LLC Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 252 Walden Dr, Glencoe, IL 60022 03/25/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 55. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each D Money Order Larry Daniels Cash Check Receipt This Period day, year) Cashier Check Credit Card 7515 12th St NW, Washington, DC 20012 03/26/2020 \$ 50.00 □ Other (Specify) □ In Kind (Specify) Occupation Owner **Contributor Type** Individual Name and Address of Employer **Daniels Realty LLC**

Aggregate Year-To-date

\$ 50.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 56. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Robert Miller** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3305 35th St NW, Washington, DC 20016 03/26/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Zoning Commissioner Contributor Type** Occupation Individual Name and Address of Employer **DC** Government \$ 100.00 Aggregate Year-To-date 57. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Carlos Gray** Check Receipt This Period Cash Money Order day, year) Cashier Check Credit Card 1717 New Jersey Ave NW, Washington, DC \$ 100.00 03/26/2020 □ Other (Specify) 20001 □ In Kind (Specify) **Contributor Type** Occupation **Real Estate Development** Individual Name and Address of Employer DCHA Aggregate Year-To-date \$ 100.00 58. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Muneer Abbas** Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 4525 17th St NE, Washington, DC 20017 03/27/2020 \$ 10.00 □ Other (Specify) □ In Kind (Specify) Not Employed **Contributor Type** Occupation Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 10.00 59. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Carlos Gray** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1717 New Jersey Ave NW, Washington, DC 03/27/2020 \$ 200.00 Other (Specify) 20001 □ In Kind (Specify) **Contributor Type** Occupation **Real Estate Development** Individual Name and Address of Employer DCHA \$ 300.00 Aggregate Year-To-date 60. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Parkside Residential, LLC Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 2900 K St NW Ste 401, Washington, DC 20007 03/30/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type** Business Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00

OCF FORM 16

SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 61. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Parkside Holding, LLC Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2900 K St NW, Washington, DC 20007 03/30/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 62. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Carolyn Nicholas** Cash D Money Order Check Receipt This Period day, year) Cashier Check Credit Card 6101 16th St NW Apt 514, Washington, DC 03/30/2020 \$ 50.00 □ Other (Specify) 20011 □ In Kind (Specify) **Contributor Type** Occupation Realtor Individual Name and Address of Employer Long & Foster \$ 150.00 Aggregate Year-To-date 63. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Pedro Permuy** Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 731 22nd St S, Arlington, VA 22202 03/31/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Founder **Contributor Type** Individual Name and Address of Employer **Green T Advisors** \$ 500.00 Aggregate Year-To-date 64. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Ravinia Capital Group, LLC** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 190 S La Salle St Ste 1730, Chicago, IL 60603 03/31/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 65. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Erika Bryant Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1334 Montague St NW, Washington, DC 20011 03/31/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation **Executive Director Contributor Type** Individual Name and Address of Employer **Elsie Whitlow Stokes PCS** Aggregate Year-To-date

\$ 100.00

SCHEDULE A

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

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 66. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Marlena Edwards** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1117 Fern St NW, Washington, DC 20012 04/02/2020 \$ 10.00 □ Other (Specify) □ In Kind (Specify) Occupation **Management Analyst Contributor Type** Individual Name and Address of Employer DHCF \$ 10.00 Aggregate Year-To-date 67. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Justin Rydstrom Check Receipt This Period Cash □ Money Order day, year) Cashier Check Credit Card 2106 34th St SE, Washington, DC 20020 \$ 500.00 04/02/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Executive Director** Individual Name and Address of Employer IDEA Aggregate Year-To-date \$ 500.00 68. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Jessica Bodger Rydstrom Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2106 34th St SE, Washington, DC 20020 04/02/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Williams & Connolly Aggregate Year-To-date \$ 500.00 69. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Margery Yeager Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 5332 Sherier Pl NW, Washington, DC 20016 04/07/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Partner Advocacy Individual Name and Address of Employer **Education Forward DC** \$ 500.00 Aggregate Year-To-date 70. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Marleana Edwards** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1117 Fern St NW, Washington, DC 20012 04/10/2020 \$ 10.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Individual Name and Address of Employer **Metropolitan Alliance** Aggregate Year-To-date \$ 20.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 71. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Scott Pearson** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3038 Macomb St NW, Washington, DC 20008 04/10/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Gov't Official **Contributor Type** Individual Name and Address of Employer DC PCSB \$ 500.00 Aggregate Year-To-date 72. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **David Temple** Check Receipt This Period Cash □ Money Order day, year) Cashier Check Credit Card 6611 10th St Unit B2, Alexandria, VA 22307 \$ 100.00 04/10/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Part Time Admin Aide Individual Name and Address of Employer Sup RL Lusk Aggregate Year-To-date \$ 100.00 73. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each DC Holistic Welness LLC Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 4721 Sheriff Rd NE, Washington, DC 20019 04/13/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 74. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Norbert Pickett Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2927 Arizona Ave NW, Washington, DC 20016 04/13/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 500.00 75. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Alaka Williams Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 118 W Jackson Ave Apt 422, Knoxville, TN 04/14/2020 \$ 500.00 □ Other (Specify) 37902 □ In Kind (Specify) **Contributor Type** Occupation HR Individual Name and Address of Employer Discovery \$ 500.00 Aggregate Year-To-date

SCHEDULE A

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 76. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Darrin Glymph** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1823 Quincy St NW, Washington, DC 20011 04/15/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation **Contributor Type** Individual Name and Address of Employer **Orrick Herrington & Sutcliff** \$ 500.00 Aggregate Year-To-date 77. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Patricia Brantley** Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 2909 Chancellors Way NE, Washington, DC \$ 500.00 04/15/2020 □ Other (Specify) 20017 □ In Kind (Specify) **Contributor Type** Occupation School Admin Individual Name and Address of Employer Friendship PCS Aggregate Year-To-date \$ 500.00 78. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lee Chaffin Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3021 Oregon Knolls Dr NW, Washington, DC 04/15/2020 \$ 250.00 □ Other (Specify) 20015 □ In Kind (Specify) Consultant **Contributor Type** Occupation Individual Name and Address of Employer Self Aggregate Year-To-date \$ 250.00 79. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Stephen Evans Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 6609 Pyle Rd, Bethesda, MD 20817 04/16/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Physician Individual Name and Address of Employer **Medstar Health** \$ 500.00 Aggregate Year-To-date 80. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Emily Briton** Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 18503 Meadowland Ter, Olney, MD 20832 04/16/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation VP Individual Name and Address of Employer MedStar Wash. Hospital Ctr Aggregate Year-To-date \$ 100.00

SCHEDULE A

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

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

Vince Gray 2020 81. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Julie Rones** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3648 Southern Ave SE, Washington, DC 20020 04/16/2020 \$ 25.00 □ Other (Specify) □ In Kind (Specify) Occupation Attorney **Contributor Type** Individual Name and Address of Employer Law Office of Julie E Rones, PLLC \$ 75.00 Aggregate Year-To-date 82. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sarah Davidson Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 9010 Pickwick Village Ter, Silver Spring, MD \$ 100.00 04/20/2020 □ Other (Specify) 20901 □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 100.00 83. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each William McCarthy Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 54 Sandy Valley Rd, Marstons Mills, MA 02648 04/22/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Non-Profit Leader **Contributor Type** Occupation Individual Name and Address of Employer **Apple Tree Institute** Aggregate Year-To-date \$ 500.00 84. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Tomeika Bowden** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 343 Burns St SE, Washington, DC 20019 04/22/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Communications Individual Name and Address of Employer DC PCSB \$ 500.00 Aggregate Year-To-date 85. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Roger Gendron** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1711 S St NW, Washington, DC 20009 04/23/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation President Individual Name and Address of Employer **Silver Street Development Corporation** Aggregate Year-To-date \$ 500.00

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

Vince Gray 2020 86. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Susan Gendron Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1711 S St NW, Washington, DC 20009 04/23/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Photographer **Contributor Type** Individual Name and Address of Employer Self \$ 500.00 Aggregate Year-To-date 87. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Celia Martin** □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 5326 Falmouth Rd, Bethesda, MD 20816 \$ 500.00 04/23/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 500.00 88. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Frank Smith Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 4300 Argyle Ter NW, Washington, DC 20011 04/24/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Museum Exec Contributor Type** Occupation Individual Name and Address of Employer AACW Museum Aggregate Year-To-date \$ 250.00 89. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sara Glenn Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 4944 Quebec St NW, Washington, DC 20016 04/25/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed \$ 500.00 Aggregate Year-To-date 90. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Nathan Queen Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1300 Leegate Rd NW, Washington, DC 20012 04/25/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation Not employed **Contributor Type** Individual Name and Address of Employer N/A Aggregate Year-To-date \$ 150.00

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

Vince Gray 2020 91. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Carrie Thornhill** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2059 36th St SE, Washington, DC 20020 04/25/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation Retired **Contributor Type** Individual Name and Address of Employer Retired Aggregate Year-To-date \$ 450.00 92. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Milton Bernard** □ Money Order Check Receipt This Period Cash day, year) Cashier Check Credit Card 7826 Eastern Ave NE, Washington, DC 20013 \$ 500.00 04/25/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Individual Name and Address of Employer **Busy Bee Environmental Svc** Aggregate Year-To-date \$ 500.00 93. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Janice Davis** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1420 Primrose Rd NW, Washington, DC 20012 04/26/2020 \$ 50.00 □ Other (Specify) □ In Kind (Specify) **Business Owner Contributor Type** Occupation Individual Name and Address of Employer **Davis Planning** Aggregate Year-To-date \$ 50.00 94. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Soo Koo Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 915 E St NW Apt 314, Washington, DC 20004 04/26/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed \$ 500.00 Aggregate Year-To-date 95. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Phil Portlock Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 3911 13th St NE, Washington, DC 20017 04/26/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not employed Individual Name and Address of Employer Not employed Aggregate Year-To-date \$ 200.00

Amount of Each

Receipt This Period

\$ 250.00

Amount of Each

Receipt This Period

\$ 50.00

Amount of Each

\$ 250.00

\$ 200.00

\$ 500.00

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contributions, or for commercial purposes. Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 96. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, **Neil Stanley** C Money Order Check Cash day, year) Credit Card Cashier Check 2 Massachusetts Ave NE, Washington, DC 04/27/2020 □ Other (Specify) 20013 □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Stanley & Henriquez PLLC Aggregate Year-To-date 97. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, **Carolyn Nicholas** Cash Check Money Order day, year) Cashier Check Credit Card 6101 16th St NW Apt 514, Washington, DC 04/27/2020 □ Other (Specify) 20011 □ In Kind (Specify) **Contributor Type** Occupation Realtor Individual Name and Address of Employer Long & Foster Aggregate Year-To-date 98. Full Name, Mailing Address and Zip Code Date (month, **Contribution Type**

Joyanna Smth 2300 Washington Pl NE Apt 424, Washington, DC 20018 Contributor Type	□ Cash □ Money Order □ Check □ Cashier Check ☑ Credit Card □ Other (Specify) □ In Kind (Specify) Occupation DC Regional Director	day, year) 04/28/2020	day, year) Receipt	Receipt This Period \$ 100.00
Individual	Name and Address of Employer Rocketship Public Schools Aggregate Year-To-date		\$ 100.00	
 99. Full Name, Mailing Address and Zip Code Jessica Giles 29 58th St SE, Washington, DC 20019 	Contribution Type Cash Money Order Check Cashier Check Credit Card Check Other (Specify) In Kind (Specify) Check	Date (month, day, year) 04/29/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Deputy State Director Name and Address of Employer ERNA			
100. Full Name, Mailing Address and Zip Code Matt Downs630 E Capitol St NE, Washington, DC 20003	Aggregate Year-To-date Contribution Type Cash Cashier Check Cashier Check Cother (Specify) In Kind (Specify)	Date (month, day, year) 04/29/2020	\$ 500.00 Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self			

Aggregate Year-To-date

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 101. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Jolene Sloter Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 9112 Vendome Dr, Bethesda, MD 20817 04/29/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) Not Employed **Contributor Type** Occupation Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 250.00 102. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Diana Farrell** □ Money Order Check Receipt This Period Cash day, year) Cashier Check Credit Card 3038 Macomb St NW, Washington, DC 20008 \$ 500.00 04/29/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Researcher Individual Name and Address of Employer **DJPMC Institute** Aggregate Year-To-date \$ 500.00 103. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Peter Anderson Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1391 Pennsylvania Ave SE, Washington, DC 04/29/2020 \$ 100.00 □ Other (Specify) 20003 □ In Kind (Specify) Educator **Contributor Type** Occupation Individual Name and Address of Employer Washington Latin PCS Aggregate Year-To-date \$ 100.00 104. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Raymond Weeden** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3624 Camden St SE, Washington, DC 20020 04/29/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Educator Individual Name and Address of Employer **Thurgood Marshall Academy** \$ 500.00 Aggregate Year-To-date 105. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Mashea Ashton Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 520 12th St SW # 917, Washington, DC 20024 04/29/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Not Employed **Contributor Type** Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 500.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 106. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Scott Pearson** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3038 Macomb St NW, Washington, DC 20008 04/29/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Gov't Official **Contributor Type** Individual Name and Address of Employer DC PCSB \$ 1.000.00 Aggregate Year-To-date 107. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Nationwide Electrical Services, Inc. Check Receipt This Period Cash □ Money Order day, year) Cashier Check Credit Card 2625 Evarts St NE Ste B, Washington, DC \$ 500.00 04/30/2020 Cher (Specify) 20018 □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 108. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Ramin Taheri Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 915 Maryland Ave NE, Washington, DC 20002 04/30/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation Director **Contributor Type** Individual Name and Address of Employer DFER \$ 100.00 Aggregate Year-To-date 109. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Greenscape Environmental Services, Inc. Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 607 Division Ave NE, Washington, DC 20019 05/01/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 110. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Ann P Chapman Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 12005 Pleasant Prospect Rd, Mitchellville, MD 05/01/2020 \$ 250.00 □ Other (Specify) 20721 □ In Kind (Specify) Occupation Retired **Contributor Type** Individual Name and Address of Employer N/A Aggregate Year-To-date \$ 250.00

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contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 111. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Georgetown Financial Services, LLC** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1732 Webster St NW, Washington, DC 20011 05/01/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Business** Name and Address of Employer **Business Type** Corporation \$ 500.00 Aggregate Year-To-date 112. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Michael Olding** Cash D Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3695 Prince Rd, Marshall, VA 20115 05/01/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation MD Individual Name and Address of Employer **GWU-MFA** \$ 100.00 Aggregate Year-To-date 113. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Desiree Payne** Cash Check □ Money Order Receipt This Period day, year) Cashier Check Credit Card 10802 New Hampshire Ave, Silver Spring, MD 05/01/2020 \$ 500.00 □ Other (Specify) 20903 □ In Kind (Specify) Occupation Teacher **Contributor Type** Individual Name and Address of Employer VACMD \$ 500.00 Aggregate Year-To-date 114. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each JW Lanum Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 407 Constitution Ave NE, Washington, DC 05/01/2020 \$ 100.00 □ Other (Specify) 20002 □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 100.00 115. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Bonnie Gantt** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3900 7th St NE, Washington, DC 20017 05/01/2020 \$ 5.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 5.00

SCHEDULE A

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

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 116. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Roger Clark** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 1415 Montague St NW, Washington, DC 20011 05/02/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer **Squire Patton Boggs** Aggregate Year-To-date \$ 250.00 117. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Felix Yeoman Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 6300 44th Ave, University Park, MD 20782 \$ 100.00 05/02/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Principal Individual Name and Address of Employer **360 Cooperative Advisors** Aggregate Year-To-date \$ 100.00 118. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Colicchio Proctor** Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 22 Randle Cir SE, Washington, DC 20019 05/02/2020 \$ 50.00 □ Other (Specify) □ In Kind (Specify) Retired **Contributor Type** Occupation Individual Name and Address of Employer Retired Aggregate Year-To-date \$ 50.00 119. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Session Law Firm Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1200 New Hampshire Ave NW Ste 600, 05/04/2020 \$ 500.00 Other (Specify) Washington, DC 20036 □ In Kind (Specify) **Contributor Type** Occupation Business Name and Address of Employer **Business Type** Corporation Aggregate Year-To-date \$ 500.00 120. Full Name, Mailing Address and Zip Code **Contribution Type** Amount of Each Date (month, **Pedro Ribeiro** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 5908 17th St NW, Washington, DC 20011 05/04/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Communications Individual Name and Address of Employer AAU Aggregate Year-To-date \$ 250.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 121. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Beverly Hill** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3652 Bangor St SE, Washington, DC 20020 05/04/2020 \$ 10.00 □ Other (Specify) □ In Kind (Specify) Not Employed **Contributor Type** Occupation Individual Name and Address of Employer Not Employed \$ 10.00 Aggregate Year-To-date 122. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Jennifer Moore □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 1811 12th St NW, Washington, DC 20009 05/05/2020 \$ 50.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Requested Individual Name and Address of Employer Requested Aggregate Year-To-date \$ 50.00 123. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Connie Spinner** Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 1416 35th St SE, Washington, DC 20020 05/05/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Educator **Contributor Type** Occupation Individual Name and Address of Employer **Community College Prep** Aggregate Year-To-date \$ 500.00 124. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Herbert Miller Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1413 P St NW Apt 402, Washington, DC 20005 05/05/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Real Estate** Individual Name and Address of Employer Western Development \$ 500.00 Aggregate Year-To-date 125. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **MaryEva** Candon Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 2122 California St NW, Washington, DC 20008 05/05/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Self Aggregate Year-To-date \$ 500.00

\$ 500.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 126. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Peter Anderson** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 1391 Pennsylvania Ave SE, Washington, DC 05/06/2020 \$ 400.00 □ Other (Specify) 20003 □ In Kind (Specify) Occupation Educator **Contributor Type** Individual Name and Address of Employer Washington Latin PCS \$ 500.00 Aggregate Year-To-date 127. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Check Dane Edley Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 3192 Westover Dr SE, Washington, DC 20020 \$ 50.00 05/06/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Social Worker Individual Name and Address of Employer **DC Public Schools** Aggregate Year-To-date \$ 50.00 128. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sean Sullivan Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 330 13th St Ste 301, Oakland, CA 94612 05/08/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Owner **Contributor Type** Occupation Individual Name and Address of Employer The Port Bar Aggregate Year-To-date \$ 100.00 129. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Corey Barnette** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1440 Primrose Rd NW, Washington, DC 20012 05/08/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Owner Individual Name and Address of Employer **District Growers** \$ 500.00 Aggregate Year-To-date 130. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Wendy Stark Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 1529 Hardwood Ln, McLean, VA 22101 05/08/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Pepco

Aggregate Year-To-date

SCHEDULE A

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

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 131. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Phillip Barnett** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 307 Earles Ln, Newtown Square, PA 19073 05/09/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation CFO **Contributor Type** Individual Name and Address of Employer Pepco \$ 500.00 Aggregate Year-To-date 132. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Kevin McGowan** □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 139 Spa View Ave, Annapolis, MD 21401 05/09/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Regulatory Individual Name and Address of Employer Pepco Aggregate Year-To-date \$ 500.00 133. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each William Sullivan Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 437 New York Ave NW, Washington, DC 20001 05/09/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) Utility Executive **Contributor Type** Occupation Individual Name and Address of Employer Pepco Aggregate Year-To-date \$ 250.00 134. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Marleana Edwards** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1117 Fern St NW, Washington, DC 20012 05/10/2020 \$ 10.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Individual Name and Address of Employer **Metropolitan Alliance** \$ 30.00 Aggregate Year-To-date 135. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Bill Enright** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 2122 Newport Pl NW, Washington, DC 20037 05/10/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Florist **Contributor Type** Individual Name and Address of Employer WIlliam Thomas Floral Aggregate Year-To-date

\$ 500.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 136. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Bruce Sellers** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 4922 Meade St NE, Washington, DC 20019 05/11/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation Retired **Contributor Type** Individual Name and Address of Employer Retired \$ 100.00 Aggregate Year-To-date 137. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Miguel Ortega** □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 11310 72nd St, Burr Ridge, IL 60527 05/11/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation VP Individual Name and Address of Employer Pepco Aggregate Year-To-date \$ 250.00 138. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each James Calabrese Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 645 Ponte Villas S, Baltimore, MD 21230 05/11/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) IT Executive **Contributor Type** Occupation Individual Name and Address of Employer Exelon Aggregate Year-To-date \$ 500.00 139. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **David Carmen** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 5115 Lowell Ln NW, Washington, DC 20016 05/11/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation President Individual Name and Address of Employer **Carmen Group** \$ 500.00 Aggregate Year-To-date 140. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Claudia McKoin** Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 1610 Tamarack St NW, Washington, DC 20012 05/11/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 100.00

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\$ 100.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 141. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Bruce Bereano** Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 720 N Holly Dr, Annapolis, MD 21409 05/12/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Lobbyist **Contributor Type** Individual Name and Address of Employer Self \$ 500.00 Aggregate Year-To-date 142. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each William Howland □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 1421 Holly St NW, Washington, DC 20012 \$ 100.00 05/12/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 100.00 143. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sheila Reid Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 3421 14th St NW, Washington, DC 20010 05/12/2020 \$ 50.00 □ Other (Specify) □ In Kind (Specify) Broker **Contributor Type** Occupation Individual Name and Address of Employer Avanti Real Estate Aggregate Year-To-date \$ 50.00 144. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Tyna Hepburn** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1628 40th St SE, Washington, DC 20020 05/12/2020 \$ 10.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Librarian Individual Name and Address of Employer Library of Congress \$ 10.00 Aggregate Year-To-date 145. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Julie Rones Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 3648 Southern Ave SE, Washington, DC 20020 05/12/2020 \$ 25.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Attorney Individual Name and Address of Employer Law Office of Julie E Rones, PLLC

Aggregate Year-To-date

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SCHEDULE A ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Vince Gray 2020 146. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **David Velazquez** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2701 Calvert St NW Apt 1021, Washington, DC 05/13/2020 \$ 500.00 □ Other (Specify) 20008 □ In Kind (Specify) Occupation Executive **Contributor Type** Individual Name and Address of Employer Pepco \$ 500.00 Aggregate Year-To-date 147. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Terence Golden** □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 400 Alton Rd, Miami Beach, FL 33139 05/13/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Not Employed Individual Name and Address of Employer Not Employed Aggregate Year-To-date \$ 250.00 148. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Dal Harper** Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 9404 Lakeside Dr, Vienna, VA 22182 05/13/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Consultant **Contributor Type** Occupation Individual Name and Address of Employer **Carmen Group** Aggregate Year-To-date \$ 100.00 149. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Melissa Lavinson Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 3155 19th St NW, Washington, DC 20010 05/14/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Govt Affairs** Individual Name and Address of Employer Pepco \$ 500.00 Aggregate Year-To-date 150. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Marshall Murphy** Check day, year) Cash □ Money Order Receipt This Period Cashier Check Credit Card 2700 Woodley Pl NW # 326, Washington, DC 05/15/2020 \$ 500.00 □ Other (Specify) 20008 □ In Kind (Specify) **Contributor Type** Occupation Executive Individual Name and Address of Employer Pepco Aggregate Year-To-date

\$ 500.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 151. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sandy Fisher Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 141 Buddy Powell Ln, Wenonah, NJ 08090 05/15/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Vice President **Contributor Type** Individual Name and Address of Employer Pepco \$ 500.00 Aggregate Year-To-date 152. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each William Collins Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 101 49th St NE, Washington, DC 20019 \$ 500.00 05/16/2020 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Dentist Individual Name and Address of Employer Self Aggregate Year-To-date \$ 1.000.00 153. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Victoria Collins Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 101 49th St NE, Washington, DC 20019 05/16/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Retired **Contributor Type** Occupation Individual Name and Address of Employer Retired Aggregate Year-To-date \$ 500.00 154. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Felecia Greer** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 11717 Capstan Dr, Upper Marlboro, MD 20772 05/16/2020 \$ 500.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation VP Individual Name and Address of Employer Pepco \$ 500.00 Aggregate Year-To-date 155. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, William Collins Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 101 49th St NE, Washington, DC 20019 05/16/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Dentist Individual Name and Address of Employer Self Aggregate Year-To-date \$ 1,000.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 156. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lisa Duperier Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2006 Columbia Rd NW Apt 34, Washington, DC 05/17/2020 \$ 10.00 □ Other (Specify) 20009 □ In Kind (Specify) Not Employed **Contributor Type** Occupation Individual Name and Address of Employer Not Employed \$ 10.00 Aggregate Year-To-date 157. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Carolyn Nicholas** □ Money Order Check Cash day, year) Receipt This Period Cashier Check Credit Card 6101 16th St NW Apt 514, Washington, DC \$ 50.00 05/17/2020 □ Other (Specify) 20011 □ In Kind (Specify) **Contributor Type** Occupation Realtor Individual Name and Address of Employer Long & Foster Aggregate Year-To-date \$ 250.00 158. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lara Levison Cash □ Money Order Check Receipt This Period day, year) Credit Card Cashier Check 919 Constitution Ave NE, Washington, DC 05/17/2020 \$ 50.00 □ Other (Specify) 20002 □ In Kind (Specify) Sr. Director **Contributor Type** Occupation Individual Name and Address of Employer Oceana Inc. Aggregate Year-To-date \$ 50.00 159. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Tyna Hepburn** Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 1628 40th St SE, Washington, DC 20020 05/18/2020 \$ 10.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation Librarian Individual Name and Address of Employer Library of Congress \$ 20.00 Aggregate Year-To-date 160. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, Samuel WIlliams Check Cash □ Money Order Receipt This Period day, year) Cashier Check Credit Card 4505 Gina Ct, Baltimore, MD 21237 05/19/2020 \$ 250.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation VP Individual Name and Address of Employer Pepco Aggregate Year-To-date \$ 250.00
SCHEDULE A

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

contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 161. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Scott Reiter Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 2500 Lindley Ter, Rockville, MD 20850 05/19/2020 \$ 100.00 □ Other (Specify) □ In Kind (Specify) Occupation CEO **Contributor Type** Individual Name and Address of Employer **DC Assn of Realtors** \$ 100.00 Aggregate Year-To-date 162. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each **Michael Musante** Check Cash Money Order day, year) Receipt This Period Cashier Check Credit Card 808 Constitution Ave NE, Washington, DC \$ 500.00 05/22/2020 □ Other (Specify) 20002 □ In Kind (Specify) **Contributor Type** Occupation Self Employed Individual Name and Address of Employer **Musante Strategies** Aggregate Year-To-date \$ 500.00 163. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Sheha Hilal Cash □ Money Order Check Receipt This Period day, year) Cashier Check Credit Card 8715 1st Ave, Silver Spring, MD 20910 05/22/2020 \$ 25.00 □ Other (Specify) □ In Kind (Specify) IT Tech **Contributor Type** Occupation Individual Name and Address of Employer **DC Government** Aggregate Year-To-date \$ 25.00 164. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Lamont Harrell Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 4513 Clay St NE, Washington, DC 20019 05/24/2020 \$ 250.00 Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Managing Partner** Individual Name and Address of Employer Clay Street Marketing, LLC \$ 250.00 Aggregate Year-To-date 165. Full Name, Mailing Address and Zip Code Amount of Each **Contribution Type** Date (month, **Elizabeth Carmen** Check Cash □ Money Order day, year) Receipt This Period Cashier Check Credit Card 5115 Lowell Ln NW, Washington, DC 20016 05/25/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation N/A Individual Name and Address of Employer N/A Aggregate Year-To-date \$ 500.00

Individual

SCHEDULE A

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

contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting) Vince Gray 2020 166. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Osa Imadojemu Check Cash □ Money Order Receipt This Period day, year) Credit Card 4767 Berkeley Ter NW, Washington, DC 20007 Cashier Check 05/25/2020 \$ 500.00 □ Other (Specify) □ In Kind (Specify) Occupation Attorney **Contributor Type** Individual Name and Address of Employer **Primmer Piper Eggleston & Cramer** Aggregate Year-To-date 167. Full Name, Mailing Address and Zip Code **Contribution Type** Date (month, Amount of Each Ed Krauze Cash □ Money Order Check day, year) Receipt This Period Cashier Check Credit Card 4516 Avamere St, Bethesda, MD 20814 05/25/2020 \$ 200.00 □ Other (Specify) □ In Kind (Specify) **Contributor Type** Occupation **Association Management**

Name and Address of Employer

Aggregate Year-To-date

GCAAR

\$ 200.00

\$ 500.00

Contributor Type Labor Sponsored PAC

OCF FORM 16 ITEMIZED RECEIPTS FROM COMMITTEES Any information copied from such Reports or Stateme	SCHEDULE A-2 S OTHER THAN POLITICAL COMMITTEES AUTHOI ents may not be sold or used by any person for the pu	
contributions, or for commercial purposes.		
Full Name of Committee (Name of Candidate, if Candid	late is reporting)	
Vince Gray 2020		i
1. Full Name, Mailing Address and Zip Code DC Hospital Association PAC	Contribution Type □ Cash □ Money Order ☑ Check	Date (month, day, year)
1152 15th St NW, Washington, DC 20005	Cashier Check Credit Card	
		03/12/2020
Contributor Type	□ In Kind (Specify)	
Corporate Sponsored PAC		
	Aggregate Year-To-date	
2. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,
DC First PAC	□ Cash □ Money Order ☑ Check	day, year)
1200 29th St NW, Washington, DC 20007	Cashier Check Credit Card	03/12/2020
	□ Other (Specify) □ In Kind (Specify)	
Contributor Type		
Corporate Sponsored PAC		
	Aggregate Year-To-date	
3. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,
Truist Financial Corp PAC	Cash Money Order Check	day, year)
1001 Semmes Ave, Richmond, VA 23224	Cashier Check Credit Card	03/17/2020
	□ Other (Specify) □ In Kind (Specify)	
Contributor Type		
Corporate Sponsored PAC		
	Aggregate Year-To-date	
4. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,
DRIVE Committee	Cash Money Order Check	day, year)
25 Louisiana Ave NW, Washington, DC 20001	$\Box \text{ Cashier Check } \Box \text{ Credit Card}$	05/05/2020
	□ Other (Specify) □ In Kind (Specify)	
Contributor Type		
Labor Sponsored PAC		
	Aggregate Year-To-date	
5. Full Name, Mailing Address and Zip Code	Contribution Type	Date (month,
Plumbers and Gasfitters Union Local 5	Cash Money Order Check	day, year)
5891 Allentown Rd, Camp Springs, MD 20746	\Box Cashier Check \Box Credit Card	05/18/2020
	□ Other (Specify) □ In Kind (Specify)	

Aggregate Year-To-date

for Line Number 11c

Amount of Each Receipt This Period

\$ 95.95

Amount of Each

Receipt This Period

\$ 500.00

Amount of Each Receipt This Period

\$ 500.00

Amount of Each Receipt This Period

\$ 500.00

Amount of Each Receipt This Period

\$ 500.00

\$ 95.95

\$ 500.00

\$ 500.00

\$ 500.00

\$ 500.00

SCHEDULE B ITEMIZED OPERATING EXPENDITURES

FULL Name of Committee (Name of Candidat	e, if Candidate is reporting)		
Vince Gray 2020			
 Full Name, Mailing Address and Zip Code Chuck Thies 1609 Buchanan St NE, Washington, DC 20017 	Purpose of Expenditure Consultant	Date (month, day, year) 03/12/2020	Amount of Each Expenditure This Period \$ 5,000.00
Occupation	Name and Address of Employer	05/12/2020	\$ 5,000.00
2. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144-0031	Purpose of Expenditure Bank Fees	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	03/15/2020	\$ 98.62
3. Full Name, Mailing Address and Zip Code United States Postal Service 3401 12th St NE, Washington, DC 20017	Purpose of Expenditure Postage	Date (month, day, year) 03/17/2020	Amount of Each Expenditure This Period \$ 110.00
Occupation	Name and Address of Employer	03/17/2020	\$ 110.00
 Full Name, Mailing Address and Zip Code BarrComm 16175 Golf Club Rd, Weston, FL 33326 	Purpose of Expenditure Consultant	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	03/17/2020	\$ 1,050.00
5. Full Name, Mailing Address and Zip Code Mail Chimp 675 Ponce de Leon Ave NE, Atlanta, GA 30308	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 03/23/2020	Amount of Each Expenditure This Period \$ 79.49
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Stephanie Oliver 5705 Middleton Dr, Temple Hills, MD 20748	Purpose of Expenditure Salary/Stipend	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	03/25/2020	\$ 150.00
 7. Full Name, Mailing Address and Zip Code Latisha Atkins 3824 V St SE Apt 102, Washington, DC 20020 	Purpose of Expenditure Salary/Stipend	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	03/25/2020	\$ 3,000.00

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8. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Dawn Kum	Catering/Refreshments	(month, day,	Expenditure This Period
1525 Blue Meadow Rd, Potomac, MD		year)	
20854		03/26/2020	\$ 487.30
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Public Policy Polling 2912 Highwoods Blvd, Raleigh, NC 27604	Polling/Mailing List	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	03/27/2020	\$ 6,000.00
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Amazon.com, Inc. 410 Terry Ave, Seattle, WA 98109	Supplies	(month, day, year)	Expenditure This Period
		03/27/2020	\$ 29.65
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue PO Box 441146, Somerville, MA	Bank Fees	(month, day, year)	Expenditure This Period
02144-0031	New set A three Creeks as	03/29/2020	\$ 12.25
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
CoverWallet, Inc. 100 Avenue of the Americas, New	Rental	(month, day, year)	Expenditure This Period
York, NY 10013		03/30/2020	\$ 119.13
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
CoverWallet, Inc. 100 Avenue of the Americas, New	Rental	(month, day, year)	Expenditure This Period
York, NY 10013		03/30/2020	\$ 138.35
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue PO Box 441146, Somerville, MA	Bank Fees	(month, day, year)	Expenditure This Period
02144-0031 Occupation	Name and Address of Employer	03/31/2020	\$ 5.93
occupation	Traine and Address of Employer		
15. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Latisha Atkins 3824 V St SE Apt 102, Washington,	Salary/Stipend	(month, day, year)	Expenditure This Period
DC 20020	Name and Address (Press)	04/01/2020	\$ 3,000.00
Occupation	Name and Address of Employer		1

16. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
	Supplies	(month, day,	Expenditure This Period
Amazon.com, Inc.	Supplies		Experiature This Ferror
410 Terry Ave, Seattle, WA 98109		year)	
		04/02/2020	\$ 58.82
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue	Bank Fees	(month, day,	Expenditure This Perio
PO Box 441146, Somerville, MA		year)	
02144-0031		04/05/2020	\$ 39.90
Occupation	Name and Address of Employer	04/05/2020	
8. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Kennedy Communications, Inc.	Consultant	(month, day,	Expenditure This Period
1301 K Street NW, Washington, DC		year)	
20005		04/08/2020	\$ 1,000.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Gelberg Signs	Printing	(month, day,	Expenditure This Perio
6511 Chillum Pl, Washington, DC		year)	
20012		04/09/2020	\$ 2,371.97
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Chuck Thies	Consultant	(month, day,	Expenditure This Perio
1609 Buchanan St NE, Washington,		year)	
DC 20017		04/11/2020	\$ 2,500.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
BarrComm	Consultant	(month, day,	Expenditure This Period
16175 Golf Club Rd, Weston, FL 33326		year)	
		04/11/2020	\$ 1,100.00
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue	Bank Fees	(month, day,	Expenditure This Perio
PO Box 441146, Somerville, MA		year)	
02144-0031		04/12/2020	\$ 43.85
Occupation	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Mail Chimp	Computer and Web Expenses	(month, day,	Expenditure This Perio
675 Ponce de Leon Ave NE, Atlanta, GA 30308		year)	
		04/13/2020	\$ 6.78
Occupation	Name and Address of Employer	I	

24. Full Name, Mailing Address and Zip Code Latisha Atkins	Purpose of Expenditure Salary/Stipend	Date (month, day,	Amount of Each Expenditure This Period
3824 V St SE Apt 102, Washington, DC 20020		year)	© 1 700 00
Occupation	Name and Address of Employer	04/15/2020	\$ 1,500.00
25. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue PO Box 441146, Somerville, MA 02144-0031	Bank Fees	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	04/19/2020	\$ 109.62
26. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Mail Chimp 675 Ponce de Leon Ave NE, Atlanta, GA 30308	Computer and Web Expenses	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	04/21/2020	\$ 79.49
27. Full Name, Mailing Address and Zip Code Kannedy Communications, Inc.	Purpose of Expenditure	Date (month, day,	Amount of Each Expenditure This Period
Kennedv Communications, Inc. 1301 K Street NW, Washington, DC 20005	Printing	year)	-
Occupation	Name and Address of Employer	04/23/2020	\$ 14,021.00
28. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue PO Box 441146, Somerville, MA	Bank Fees	(month, day, year)	Expenditure This Period
02144-0031 Occupation	Name and Address of Employer	04/26/2020	\$ 146.16
20 Full Name Mailing Address and 7in Cade	Dumon of Europe Litera	Dete	Amount of Each
29. Full Name, Mailing Address and Zip Code Gertrude Stein Democratic Club PO Box 9393, Washington, DC 20005	Purpose of Expenditure Advertising	Date (month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	04/27/2020	\$ 550.00
30. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
CoverWallet, Inc. 100 Avenue of the Americas, New York, NY 10013	Rental	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	04/29/2020	\$ 119.13
 Full Name, Mailing Address and Zip Code CoverWallet, Inc. 	Purpose of Expenditure Rental	Date (month, day,	Amount of Each Expenditure This Period
100 Avenue of the Americas, New York, NY 10013		(Hohni, day, year) 04/29/2020	\$ 138.35
Occupation	Name and Address of Employer	04/29/2020	\$ 130.35

			-
32. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Kennedy Communications, Inc.	Printing	(month, day,	Expenditure This Period
1301 K Street NW, Washington, DC		year)	
20005		04/30/2020	\$ 7,972.00
Occupation	Name and Address of Employer	04/30/2020	\$ 1,972.00
33. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Latisha Atkins	Salary/Stipend	(month, day,	Expenditure This Perio
3824 V St SE Apt 102, Washington,		year)	-
DC 20020			0 1 500 00
Occupation	Name and Address of Employer	04/30/2020	\$ 1,500.00
occupation			
34. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Chuck Thies	Consultant	(month, day,	Expenditure This Period
1609 Buchanan St NE, Washington,		year)	F
DC 20017		-	6 3 5 00 00
Occupation	Name and Address of Employer	05/01/2020	\$ 2,500.00
occupation	rune una rualess et Employer		
35. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue	Bank Fees	(month, day,	Expenditure This Perio
PO Box 441146, Somerville, MA		year)	
02144-0031		05/03/2020	\$ 195.74
Occupation	Name and Address of Employer		<i>•••••••</i>
36. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Amazon.com, Inc.	Supplies	(month, day,	Expenditure This Perio
410 Terry Ave, Seattle, WA 98109		year)	
		05/04/2020	\$ 23.28
Occupation	Name and Address of Employer		
37. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Amazon.com, Inc.	Supplies	(month, day,	Expenditure This Period
410 Terry Ave, Seattle, WA 98109	Supplies	year)	
		05/04/2020	\$ 32.60
Occupation	Name and Address of Employer		
88. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
NationBuilder			
	Computer and Web Expenses	(month, day,	Expenditure This Perio
PO Box 811428, Los Angeles, CA 90081		year)	
		05/04/2020	\$ 37.10
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Peter Brooks	Consultant	(month, day,	Expenditure This Perio
3513 Sequoia Ave, Baltimore, MD		year)	
core Sequera rive, Daitiliore, 1910		05/05/2020	0 350 00
21215		05/05/2020	\$ 250.00
21215 Occupation	Name and Address of Employer		

40. Full Name, Mailing Address and Zip Code Kennedy Communications, Inc.	Purpose of Expenditure Printing	Date (month, day,	Amount of Each Expenditure This Period
1301 K Street NW, Washington, DC 20005		year) 05/06/2020	\$ 6,664.00
Occupation	Name and Address of Employer	05/00/2020	5 0,004.00
41. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Staples 2950 Belcrest Center Drive, Hyattsville, MD 20782	Supplies	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	05/06/2020	\$ 99.07
42. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
United States Postal Service 3401 12th St NE, Washington, DC 20017	Postage	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	05/06/2020	\$ 275.00
43. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Fedex Office 715 D St SE, Washington, DC 20003	Printing	(month, day, year)	Expenditure This Period
Occupation	Name and Address of Employer	05/07/2020	\$ 76.32
 44. Full Name, Mailing Address and Zip Code Facebook, Inc. 1 Hacker Way, Menlo Park, CA 94025 	Purpose of Expenditure Advertising	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	05/08/2020	\$ 25.00
45. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA	Purpose of Expenditure Bank Fees	Date (month, day, year)	Amount of Each Expenditure This Period
02144-0031 Occupation	Name and Address of Employer	05/10/2020	\$ 184.49
 46. Full Name, Mailing Address and Zip Code Costco 2441 Market St NE, Washington, DC 	Purpose of Expenditure Supplies	Date (month, day, year)	Amount of Each Expenditure This Period
20018 Occupation	Name and Address of Employer	05/11/2020	\$ 16.59
47. Full Name, Mailing Address and Zip Code Facebook, Inc. 1 Hacker Way, Menlo Park, CA 94025	Purpose of Expenditure Advertising	Date (month, day, year)	Amount of Each Expenditure This Period
Occupation	Name and Address of Employer	05/11/2020	\$ 25.00
•			

48. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025	Auverusing	year)	Experiance rins reriou
1 Hacker way, Menio Fark, CA 94025		year)	
		05/11/2020	\$ 25.00
Occupation	Name and Address of Employer		
49. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025		year)	
		05/11/2020	\$ 35.00
Occupation	Name and Address of Employer		
50. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025	_	year)	
		05/12/2020	\$ 50.00
Occupation	Name and Address of Employer		
51. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025		year)	
		05/13/2020	\$ 75.00
Occupation	Name and Address of Employer		
52. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025		year)	
		05/14/2020	\$ 75.00
Occupation	Name and Address of Employer		
53. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Fedex Office	Printing	(month, day,	Expenditure This Period
715 D St SE, Washington, DC 20003		year)	
		05/15/2020	\$ 13.78
Occupation	Name and Address of Employer		
54. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Kennedy Communications, Inc.	Printing	(month, day,	Expenditure This Period
1301 K Street NW, Washington, DC		year)	
20005		05/16/2020	\$ 7,078.00
Occupation	Name and Address of Employer		
55. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Kennedy Communications, Inc.	Printing	(month, day, year)	Expenditure This Period
1301 K Street NW, Washington, DC		05/16/2020	¢ 7 079 00
1301 K Street NW, Washington, DC 20005 Occupation	Name and Address of Employer	05/16/2020	\$ 7,078.00

56. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Latisha Atkins	Salary/Stipend	(month, day,	Expenditure This Period
3824 V St SE Apt 102, Washington,		year)	
DC 20020		05/16/2020	\$ 3,000.00
Occupation	Name and Address of Employer		
57. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
BarrComm	Consultant	(month, day,	Expenditure This Period
16175 Golf Club Rd, Weston, FL 33326		year)	
			£ 1 000 00
Occupation	Name and Address of Employer	05/16/2020	\$ 1,000.00
58. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue	Bank Fees	(month, day,	Expenditure This Period
PO Box 441146, Somerville, MA		year)	
02144-0031			
Occupation	Name and Address of Employer	05/17/2020	\$ 177.59
occupation	France and Francess of Employer		
59. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
McDonald's	Catering/Refreshments	(month, day,	Expenditure This Period
3901 Minnesota Ave NE, Washington,	Cutering/iteriesiments	year)	
DC 20019		05/18/2020	\$ 12.06
Occupation	Name and Address of Employer		
60. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025		year)	
		05/18/2020	\$ 125.00
Occupation	Name and Address of Employer		
61. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Costco	Supplies	(month, day,	Expenditure This Period
2441 Market St NE, Washington, DC	Supplies	year)	
20018		05/19/2020	\$ 19.94
Occupation	Name and Address of Employer		· · · · · ·
62. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Lowe's	Supplies	(month, day,	Expenditure This Period
2438 Market Street NE, Washington, DC 20018		year)	
		05/19/2020	\$ 40.56
Occupation	Name and Address of Employer		
	Purpose of Expenditure	Date	Amount of Each
63. Full Name, Mailing Address and Zip Code	Advertising	(month, day,	Expenditure This Period
		year)	
 63. Full Name, Mailing Address and Zip Code Facebook, Inc. 1 Hacker Way, Menlo Park, CA 94025 	· · · · · · · · · · · · · · · · · · ·	year)	
Facebook, Inc.	Name and Address of Employer	05/20/2020	\$ 175.00

64. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
John Bowman	Salary/Stipend	(month, day,	Expenditure This Period
4006 31st St, Mount Rainier, MD		year)	
20712		05/21/2020	\$ 590.00
Occupation	Name and Address of Employer		
65. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Mail Chimp	Computer and Web Expenses	(month, day,	Expenditure This Perio
675 Ponce de Leon Ave NE, Atlanta,	Computer and web Expenses	year)	
GA 30308		year)	
GA 50508		05/21/2020	\$ 79.49
Occupation	Name and Address of Employer		
66. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Dunkin' Donuts	Catering/Refreshments	(month, day,	Expenditure This Period
3030 Queens Chapel Rd, Hyattsville,	-	year)	
MD 20782		05/22/2020	\$ 18.09
Occupation	Name and Address of Employer	03/22/2020	\$ 10.09
67. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Annie's Ace Hardware	Supplies	(month, day,	Expenditure This Perio
3405 8th St NE, Washington, DC		year)	
20017		05/22/2020	\$ 86.84
Occupation	Name and Address of Employer		
68. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Period
1 Hacker Way, Menlo Park, CA 94025	Advertising	year)	
Thacker way, memorark, err 94020			0.250.00
Occupation	Name and Address of Employer	05/22/2020	\$ 250.00
-			
69. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Facebook, Inc.	Advertising	(month, day,	Expenditure This Perio
1 Hacker Way, Menlo Park, CA 94025		year)	
		05/22/2020	\$ 400.00
Occupation	Name and Address of Employer	00/22/2020	
70. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
McDonald's	Catering/Refreshments	(month, day,	Expenditure This Period
McDonald's 3901 Minnesota Ave NE, Washington,		(month, day, year)	Expenditure This Fello
DC 20019			
	Nome and Address of Employer	05/22/2020	\$ 15.59
Occupation	Name and Address of Employer		
71. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Kennedy Communications, Inc.	Printing	(month, day,	Expenditure This Perio
		year)	
1301 K Street NW, Washington, DC 20005		05/23/2020	\$ 7,078.00

72. Full Name, Mailing Address and Zip Code Kennedy Communications, Inc.	Purpose of Expenditure Printing	Date (month, day,	Amount of Each Expenditure This Period
1301 K Street NW, Washington, DC	· · ··································	year)	
20005		05/23/2020	\$ 6,972.00
Occupation	Name and Address of Employer		
73. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Eclectic Cafe 4058 Minnesota Ave NE, Washington,	Catering/Refreshments	(month, day, year)	Expenditure This Period
DC 20019		05/23/2020	\$ 217.14
Occupation	Name and Address of Employer		
74. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Wawa, Inc. 4530 40th St NW, Washington, DC	Catering/Refreshments	(month, day, year)	Expenditure This Period
20016		05/23/2020	\$ 7.11
Occupation	Name and Address of Employer		
75. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
ActBlue	Bank Fees	(month, day,	Expenditure This Period
PO Box 441146, Somerville, MA		year)	1
02144-0031		05/24/2020	\$ 44.85
Occupation	Name and Address of Employer		

SCHEDULE B-2

REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

FULL Name of Committee (Name of Candidate	, if Candidate is reporting)		
Vince Gray 2020			
 Full Name, Mailing Address and Zip Code Warren Williams Sr 9003 Levelle Dr, Chevy Chase, MD 20815 Contributor Type Individual 	Purpose of Expenditure	Date (month, day, year) 04/11/2020	Amount of Each Expenditure This Period \$ 500.00
 2. Full Name, Mailing Address and Zip Code William Collins 101 49th St NE, Washington, DC 20019 Contributor Type Individual 	Purpose of Expenditure	Date (month, day, year) 05/23/2020	Amount of Each Expenditure This Period \$ 500.00
 Full Name, Mailing Address and Zip Code Scott Pearson 3038 Macomb St NW, Washington, DC 20008 Contributor Type Individual 	Purpose of Expenditure	Date (month, day, year) 05/23/2020	Amount of Each Expenditure This Period \$ 500.00

OFFSET TO RECEIPTS (RETURN CHECKS, NON-SUFFICIENT FUND FEES, ETC.,)

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contributions, or for commercial purposes.			
FULL Name of Committee (Name of Candidate	e, if Candidate is reporting)		
Vince Gray 2020			
1. Full Name, Mailing Address and Zip Code	Offset Type	Date	Offset Amount This
Kermit Rosenberg	Return Check and Fees	(month, day,	Period
3849 Whitman Rd, Anandale, VA		year)	
22003		05/06/2020	\$ 520.00
2. Full Name, Mailing Address and Zip Code	Offset Type	Date	Offset Amount This
Susan Gendron	Return Check and Fees	(month, day,	Period
1711 S St NW, Washington, DC 20009		year)	
		05/18/2020	\$ 520.00
3. Full Name, Mailing Address and Zip Code	Offset Type	Date	Offset Amount This
Roger Gendron	Return Check and Fees	(month, day,	Period
1711 S St NW, Washington, DC 20009		year)	
		05/18/2020	\$ 520.00