



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

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

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Spiva for DC AG	2. OCF Identification Number PCCATG227208
Address 1718 Crestwood Dr., NW	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20011	

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

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

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 8/1/2021 through 12/10/2021		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 0.00	
(c) Total Receipts [from Line (16)]	\$ 122,956.49	\$ 122,956.49
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 122,956.49	
7. Total Expenditures (from Line 22)	\$ 5,608.52	\$ 5,608.52
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 117,347.97	
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

SIGNATURE OF CANDIDATE

DATE

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

NOTARY PUBLIC

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

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

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

Ms. Allison Murray

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

12/10/2021

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Spiva for DC AG	REPORT COVERING THE PERIOD FROM: 8/1/2021 TO: 12/10/2021	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 20,525.00	\$ 20,525.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 102,431.49	\$ 102,431.49 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 122,956.49	\$ 122,956.49 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 122,956.49	\$ 122,956.49 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 2,983.52	\$ 2,983.52 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 2,625.00	\$ 2,625.00 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)]	\$ 2,625.00	\$ 2,625.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 5,608.52	\$ 5,608.52 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	122,956.49
25. SUBTOTAL (add Lines 23 and 24)	\$	122,956.49
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	5,608.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	117,347.97

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)

Spiva for DC AG

1. Full Name, Mailing Address and Zip Code Ruthzee Louijeune 360 H St NE Apt 208, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/23/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer The Opening PLLC 46 Lexington Ave, Boston, MA 02136		
Aggregate Year-To-date		\$ 250.00	
2. Full Name, Mailing Address and Zip Code Kit Pierson 3255 N Ohio St, Arlington, VA 22207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/24/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Cohen MILSTEIN 1100 New York Ave NW Ste 500, Washington, DC 20005		
Aggregate Year-To-date		\$ 3,000.00	
3. Full Name, Mailing Address and Zip Code Kit Pierson 3255 N Ohio St, Arlington, VA 22207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/24/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Cohen MILSTEIN 1100 New York Ave NW Ste 500, Washington, DC 20005		
Aggregate Year-To-date		\$ 3,000.00	
4. Full Name, Mailing Address and Zip Code Matthew Koos 660 Boas St Apt 921, Harrisburg, PA 17102	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/27/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer Texas HDCC 314 E Highland Mall Blvd, Austin, TX 78752		
Aggregate Year-To-date		\$ 100.00	

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

Spiva for DC AG

5. Full Name, Mailing Address and Zip Code Anthony Pierce 3214 Chestnut St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/29/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Akin Gump 2001 K St NW, Washington, DC 20006		
Aggregate Year-To-date			\$ 500.00
6. Full Name, Mailing Address and Zip Code Steven Escobar 11929 Oden Ct, Rockville, MD 20852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/29/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Real Estate Agent Name and Address of Employer Steven R. Escobar Inc. 11929 Oden Ct, Rockville, MD 20852		
Aggregate Year-To-date			\$ 1,500.00
7. Full Name, Mailing Address and Zip Code John Devaney 3428 Patterson St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/29/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie LLP 700 13th St NW Ste 600, Washington, DC 20005-3960		
Aggregate Year-To-date			\$ 1,500.00
8. Full Name, Mailing Address and Zip Code Mary E. Gosselink 1353 E Capitol St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/01/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Self Employed Name and Address of Employer EWC LLC 660 Pennsylvania Ave SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 1,500.00
9. Full Name, Mailing Address and Zip Code Janis Kestenbaum 2415 20th St NW Apt 18, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/01/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie LLP 700 13th St NW Ste 600, Washington, DC 20005		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

	Aggregate Year-To-date		\$ 1,500.00
10. Full Name, Mailing Address and Zip Code Heidee Stoller 12025 SW FAIRFIELD ST, Beaverton, OR 97005-1441	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/02/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie LLP 1120 NW Couch St, Portland, OR 97209		
	Aggregate Year-To-date		\$ 250.00
11. Full Name, Mailing Address and Zip Code Milton Marquis 11509 Lake Potomac Dr, Potomac, MD 20854	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/03/2021	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Cozen O'Connor 11509 Lake Potomac Dr, Potomac, MD 20854		
	Aggregate Year-To-date		\$ 1,000.00
12. Full Name, Mailing Address and Zip Code Paul Orzulak 4603 Davidson Dr, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/04/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Founding Partner Name and Address of Employer West Wing Writers LLC 4603 Davidson Dr, Chevy Chase, MD 20815		
	Aggregate Year-To-date		\$ 1,500.00
13. Full Name, Mailing Address and Zip Code Robert Gosselink 1353 E Capitol St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/04/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Self Employed Name and Address of Employer Self Employed 1353 E Capitol St SE, Washington, DC 20003		
	Aggregate Year-To-date		\$ 1,500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

14. Full Name, Mailing Address and Zip Code David Umansky 736 9th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/05/2021	Amount of Each Receipt This Period \$ 1,125.00
Contributor Type Individual	Occupation Public Affairs Officer Name and Address of Employer DC Government 1350 Pennsylvania Ave NW # 203, Washington, DC 20004		
Aggregate Year-To-date			\$ 1,125.00
15. Full Name, Mailing Address and Zip Code Ruth Gramlich 2101 Connecticut Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/05/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 250.00
16. Full Name, Mailing Address and Zip Code Donald Verrilli 5117 Watson St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/07/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Munger Tolles & Olson 601 Massachusetts Ave NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 1,500.00
17. Full Name, Mailing Address and Zip Code Rosalind Cohen 1426 Corcoran St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/07/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 250.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

18. Full Name, Mailing Address and Zip Code David Umansky 736 9th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/07/2021	Amount of Each Receipt This Period \$ 125.00
Contributor Type Individual	Occupation Public Affairs Officer Name and Address of Employer DC Government 1350 Pennsylvania Ave NW # 203, Washington, DC 20004		
Aggregate Year-To-date			\$ 1,250.00
19. Full Name, Mailing Address and Zip Code Andy Litsky 423 N ST SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/07/2021	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 50.00
20. Full Name, Mailing Address and Zip Code Donald J. Friedman 2441 Tracy Pl NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/07/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie LLP 700 13th St NW Ste 600, Washington, DC 20005-3960		
Aggregate Year-To-date			\$ 500.00
21. Full Name, Mailing Address and Zip Code Brooksley Born 2319 Tracy Pl NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 200.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

22. Full Name, Mailing Address and Zip Code Alexander Bennett 2319 Tracy Pl NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 200.00
23. Full Name, Mailing Address and Zip Code Claudia Stankiewicz 3605 Oswego Rd, Blossvale, NY 13308	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Campaign Staffer Name and Address of Employer Friends for Kathy Hochul 95 Eagle St Apt 4R, Brooklyn, NY 11222		
Aggregate Year-To-date			\$ 25.00
24. Full Name, Mailing Address and Zip Code Marcie Kelso 1212 Home Pl, Matthews, NC 28105	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Marketing Name and Address of Employer Kelso Communications 1212 Home Pl, Matthews, NC 28105		
Aggregate Year-To-date			\$ 250.00
25. Full Name, Mailing Address and Zip Code Ann Stephens 22819 SE 48th st, Issaquah, WA 98029	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 250.00
26. Full Name, Mailing Address and Zip Code Jay Cox 809 Independence Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Clark Construction Group LLC 7500 Old Georgetown Rd, Bethesda, MD 20814		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

27. Full Name, Mailing Address and Zip Code Suze Villano 50630 Hollybrook Dr, Granger, IN 46530	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Univ. Of Notre Dame 534 O'Neill Hall of Music, Notre Dame, IN 46556		
Aggregate Year-To-date			\$ 50.00
28. Full Name, Mailing Address and Zip Code Kate Nicholson 2220 Pine St Apt A, Boulder, CO 80302	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/08/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer NPAC PO Box 4172, Boulder, CO 80306		
Aggregate Year-To-date			\$ 1,500.00
29. Full Name, Mailing Address and Zip Code Stephen Moss 720 State St, Emporia, KS 66801	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/09/2021	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Harp Technician Name and Address of Employer Moss Harp Service 720 State St, Emporia, KS 66801		
Aggregate Year-To-date			\$ 50.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 20,525.00

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

Spiva for DC AG

	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Website Domain	Date (month, day, year) 11/11/2021	Amount of Each Receipt This Period \$ 61.32
	Aggregate Year-To-date \$ 61.32		
	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) PO Box rental	Date (month, day, year) 11/14/2021	Amount of Each Receipt This Period \$ 88.00
	Aggregate Year-To-date \$ 149.32		
	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Website Design	Date (month, day, year) 11/17/2021	Amount of Each Receipt This Period \$ 1,749.00
	Aggregate Year-To-date \$ 1,898.32		
	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Website Hosting	Date (month, day, year) 11/24/2021	Amount of Each Receipt This Period \$ 183.17
	Aggregate Year-To-date \$ 2,431.49		
	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Photo for Website	Date (month, day, year) 11/24/2021	Amount of Each Receipt This Period \$ 350.00
	Aggregate Year-To-date \$ 2,431.49		
	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/07/2021	Amount of Each Receipt This Period \$ 100,000.00
	Aggregate Year-To-date \$ 102,431.49		
TOTAL This Period (Aggregate of all Receipt pages)			\$ 102,431.49

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

Spiva for DC AG

1. Full Name, Mailing Address and Zip Code GoDaddy.com, LLC 14455 N Hayden Rd Suite 219, Scottsdale, AZ 85260	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 11/11/2021	Amount of Each Expenditure This Period \$ 61.32
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code USPS 2000 14TH ST NW STE 104 , Washington, DC 20009	Purpose of Expenditure Postage	Date (month, day, year) 11/14/2021	Amount of Each Expenditure This Period \$ 88.00
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Swayed LLC PO Box 13480, New Orleans, LA 70185	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 11/17/2021	Amount of Each Expenditure This Period \$ 1,749.00
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Squarespace, Inc. 225 Varick Street 12th Floor , New York, NY 10014	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 11/24/2021	Amount of Each Expenditure This Period \$ 183.17
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Ben Droz Photography 57 N Street NW , Washington, DC 20001	Purpose of Expenditure Campaign Materials	Date (month, day, year) 11/24/2021	Amount of Each Expenditure This Period \$ 350.00
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 11/28/2021	Amount of Each Expenditure This Period \$ 132.33
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 12/05/2021	Amount of Each Expenditure This Period \$ 419.70
Occupation	Name and Address of Employer		

TOTAL This Period (Aggregate of all expenditure pages)	\$ 2,983.52
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REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

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

Spiva for DC AG

1. Full Name, Mailing Address and Zip Code Kit Pierson 3255 N Ohio St, Arlington, VA 22207	Purpose of Expenditure	Date (month, day, year) 12/03/2021	Amount of Each Expenditure This Period \$ 1,500.00
Contributor Type Individual			
2. Full Name, Mailing Address and Zip Code David Umansky 736 9th St SE, Washington, DC 20003	Purpose of Expenditure	Date (month, day, year) 12/07/2021	Amount of Each Expenditure This Period \$ 1,125.00
Contributor Type Individual			
TOTAL This Period (Aggregate of all expenditure pages)			\$ 2,625.00