



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: **January 31st Report (2022 Candidates)**

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

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 12/11/2021 through 1/31/2022		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 117,347.97	
(c) Total Receipts [from Line (16)]	\$ 63,419.70	\$ 186,376.19
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 180,767.67	
7. Total Expenditures (from Line 22)	\$ 40,280.63	\$ 45,889.15
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 140,487.04	
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

01/31/2022

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: 12/11/2021 TO: 1/31/2022	
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)	\$ 61,787.37	\$ 82,312.37 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)	\$ 1,632.33	\$ 104,063.82 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)]	\$ 63,419.70	\$ 186,376.19 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]	\$ 63,419.70	\$ 186,376.19 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 40,280.63	\$ 43,264.15 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 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)]	\$ 0.00	\$ 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)]	\$ 40,280.63	\$ 45,889.15 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	117,347.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	63,419.70
25. SUBTOTAL (add Lines 23 and 24)	\$	180,767.67
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	40,280.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	140,487.04

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

1. Full Name, Mailing Address and Zip Code Edith Ramirez 400 Massachusetts Ave NW Apt 306, Washington, DC 20001-6802	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) 12/11/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Hogan Lovells 555 13th St NW, Washington, DC 20004-1109		
Aggregate Year-To-date		\$ 1,500.00	
2. Full Name, Mailing Address and Zip Code jerry harpole 1155 23rd St NW, Washington, DC 20037-3301	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) 12/13/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Harpole Architects PC 1155 23rd St NW, Washington, DC 20037-3301		
Aggregate Year-To-date		\$ 500.00	
3. Full Name, Mailing Address and Zip Code Marc Goldman 2109 O St NW, Washington, DC 20037-1008	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) 12/13/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Massey & Gail 1000 Maine Ave SW, Washington, DC 20024-3494		
Aggregate Year-To-date		\$ 500.00	
4. Full Name, Mailing Address and Zip Code Rhona Friedman 2441 Tracy Pl NW, Washington, DC 20008-1628	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) Catering & Event Expenses	Date (month, day, year) 12/14/2021	Amount of Each Receipt This Period \$ 333.68
Contributor Type Individual	Occupation Retired Name and Address of Employer N/A 2441 Tracy Pl NW, Washington, DC 20008-1628		
Aggregate Year-To-date		\$ 333.68	
5. Full Name, Mailing Address and Zip Code Sally Berk 2214 Wyoming Ave NW, Washington, DC 20008-3908	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) 12/14/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2214 Wyoming Ave NW, Washington, DC 20008-3908		

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		\$ 100.00
6. Full Name, Mailing Address and Zip Code Allyson Baker 3308 Rowland Pl NW, Washington, DC 20008-3225		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) 12/14/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Paul Hastings 3308 Rowland Pl NW, Washington, DC 20008-3225		
		Aggregate Year-To-date		\$ 100.00
7. Full Name, Mailing Address and Zip Code Carole Feld 2556 Massachusetts Ave NW, Washington, DC 20008-2822		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) 12/14/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Branding Consultant Name and Address of Employer Self 2556 Massachusetts Ave NW, Washington, DC 20008-2843		
		Aggregate Year-To-date		\$ 250.00
8. Full Name, Mailing Address and Zip Code Jason Burnett 2316 Tracy Pl NW, Washington, DC 20008-1639		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) 12/14/2021	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual		Occupation CEO Name and Address of Employer GBD Labs 2316 Tracy Pl NW, Washington, DC 20008-1639		
		Aggregate Year-To-date		\$ 1,000.00
9. Full Name, Mailing Address and Zip Code Lisa Siegel 2425 Tracy Pl NW, Washington, DC 20008-1628		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) 12/14/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 2425 Tracy Pl NW, Washington, DC 20008-1628		
		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

10. Full Name, Mailing Address and Zip Code DONALD J FRIEDMAN 2441 Tracy Pl NW, Washington, DC 20008-1628	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) Catering & Event Expenses	Date (month, day, year) 12/14/2021	Amount of Each Receipt This Period \$ 333.69
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie LLP 2441 Tracy Pl NW, Washington, DC 20008-1628		
Aggregate Year-To-date		\$ 333.69	
11. Full Name, Mailing Address and Zip Code Chandanie Botejue 1275 8th Ave Apt 102, San Francisco, CA 94122-2447	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) 12/16/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1275 8th Ave Apt 102, San Francisco, CA 94122-2447		
Aggregate Year-To-date		\$ 250.00	
12. Full Name, Mailing Address and Zip Code Leah Litman 511 Gabrielino Dr, Irvine, CA 92617-4101	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) 12/16/2021	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Assistant Professor of Law Name and Address of Employer Michigan 1207 W Liberty St, Ann Arbor, MI 48103-4331		
Aggregate Year-To-date		\$ 50.00	
13. Full Name, Mailing Address and Zip Code Reginald Brown 317 Mansion Dr, Alexandria, VA 22302-2904	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) 12/16/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Kirkland & Ellis 1301 Pennsylvania Ave NW, Washington, DC 20004-1701		
Aggregate Year-To-date		\$ 1,500.00	
14. Full Name, Mailing Address and Zip Code Micki Chen 4935 47th St NW, Washington, DC 20016-4005	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) 12/16/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation lawyer Name and Address of Employer Verizon 1300 I St NW Ste 500, Washington, DC 20005-3314		

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
15. Full Name, Mailing Address and Zip Code Jonathan Molot 2424 Wyoming Ave NW, Washington, DC 20008-1643		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) 12/16/2021 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Lawyer Name and Address of Employer Georgetown University Law Center 800 New Jersey Ave NW, Washington, DC 20001-5766		
		Aggregate Year-To-date		
				\$ 250.00
16. Full Name, Mailing Address and Zip Code Kay Kendall 2412 Tracy Pl NW, Washington, DC 20008-1627		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) 12/16/2021 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 2412 Tracy Pl NW, Washington, DC 20008-1627		
		Aggregate Year-To-date		
				\$ 500.00
17. Full Name, Mailing Address and Zip Code susan pierce 2101 Dexter Ave, Silver Spring, MD 20902-5009		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) 12/17/2021 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 2101 Dexter Ave, Silver Spring, MD 20902-5009		
		Aggregate Year-To-date		
				\$ 50.00
18. Full Name, Mailing Address and Zip Code Kevin Landy 4805 48th St NW, Washington, DC 20016-4403		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) 12/17/2021 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 4805 48th St NW, Washington, DC 20016-4403		
		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

19. Full Name, Mailing Address and Zip Code Courtney Elgart 3816 4th St NW # 2, Washington, DC 20011-5916	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) 12/17/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Sullivan & Triggs 3816 4th St NW # 2, Washington, DC 20011-5916		
Aggregate Year-To-date			\$ 250.00
20. Full Name, Mailing Address and Zip Code D. Scott Barash 1440 Swann St NW, Washington, DC 20009-3904	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) 12/17/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer DC Public Schools 1440 Swann St NW, Washington, DC 20009-3904		
Aggregate Year-To-date			\$ 250.00
21. Full Name, Mailing Address and Zip Code Peter Levine 16 Martin St, Cambridge, MA 02138-1608	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) 12/17/2021	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Tufts University 419 Boston Ave, Medford, MA 02155-5801		
Aggregate Year-To-date			\$ 50.00
22. Full Name, Mailing Address and Zip Code John Capozzi 3612 Austin St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/18/2021	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 20.00
23. Full Name, Mailing Address and Zip Code John Delaney 222 Park Ave S Apt 10E, New York, NY 10003-1508	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) 12/18/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 1155 Avenue Of The Americas, New York, NY 10036-2711		

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		\$ 500.00
24. Full Name, Mailing Address and Zip Code Spencer Waller 1 E Schiller St Apt 15A, Chicago, IL 60610-5098	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) 12/19/2021	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Professor Name and Address of Employer Loyola University Chicago 25 E Pearson St, Chicago, IL 60611-2045			
		Aggregate Year-To-date		\$ 100.00
25. Full Name, Mailing Address and Zip Code Beneva Schulte 4603 Davidson Dr, Chevy Chase, MD 20815-5335	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) 12/19/2021	Amount of Each Receipt This Period \$ 1,500.00	
Contributor Type Individual	Occupation PR Name and Address of Employer Self 4603 Davidson Dr, Chevy Chase, MD 20815-5335			
		Aggregate Year-To-date		\$ 1,500.00
26. Full Name, Mailing Address and Zip Code Sam Hirsch 5006 Cloister Dr, Rockville, MD 20852-3365	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) 12/20/2021	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Jenner & Block LLP 1099 New York Ave NW, Washington, DC 20001-4411			
		Aggregate Year-To-date		\$ 500.00
27. Full Name, Mailing Address and Zip Code Elaine Harris 3521 16th St NW, Washington, DC 20010-3041	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) 12/20/2021	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation consultant Name and Address of Employer Golden Rule Technology 9103 Woodmore Center Dr Ste 161, Lanham, MD 20706-1653			
		Aggregate Year-To-date		\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

28. Full Name, Mailing Address and Zip Code Aileen Ortega 648 Palermo Ave, Coral Gables, FL 33134-5616	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) 12/22/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Larrea & Ortega 2151 S Le Jeune Rd Ste 301, Coral Gables, FL 33134-4200		
Aggregate Year-To-date		\$ 500.00	
29. Full Name, Mailing Address and Zip Code Patricia Arzuaga 11611 Marjorie Dr, Mitchellville, MD 20721-2234	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) 12/22/2021	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Kaiser Foundation Health Plan Inc. 11611 Marjorie Dr, Mitchellville, MD 20721-2234		
Aggregate Year-To-date		\$ 1,000.00	
30. Full Name, Mailing Address and Zip Code David A Angel 2680 Diamond St, San Francisco, CA 94131-3058	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) 12/23/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation prosecutor Name and Address of Employer Santa Clara County CA 70 W Hedding St, San Jose, CA 95110-1705		
Aggregate Year-To-date		\$ 500.00	
31. Full Name, Mailing Address and Zip Code Paul Smith 616 Zachary Taylor Hwy, Flint Hill, VA 22627	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) 12/23/2021	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Law Name and Address of Employer Georgetown University 600 New Jersey Ave NW, Washington, DC 20001-2022		
Aggregate Year-To-date		\$ 150.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

32. Full Name, Mailing Address and Zip Code Aggie Alvez 14011 Drake Dr, Rockville, MD 20853-2641	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) 12/26/2021	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer MCPS 850 Hungerford Dr, Rockville, MD 20850-1718		
Aggregate Year-To-date			\$ 50.00
33. Full Name, Mailing Address and Zip Code Kenneth Lamotte 3005 O St NW, Washington, DC 20007-3108	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) 12/26/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Beveridge & Diamond 1900 N St NW, Washington, DC 20036-1656		
Aggregate Year-To-date			\$ 100.00
34. Full Name, Mailing Address and Zip Code Marie Milnes-Vasquez 3206 N Kensington St, Arlington, VA 22207-1323	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) 12/27/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer US Treasury Dept 1067 N George Mason Dr, Arlington, VA 22205-2565		
Aggregate Year-To-date			\$ 250.00
35. Full Name, Mailing Address and Zip Code Sheryll Cashin 1630 Upshur St NW, Washington, DC 20011-5315	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) 12/27/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Law Professor Name and Address of Employer Georgetown Law 600 New Jersey Ave NW, Washington, DC 20001-2022		
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

36. Full Name, Mailing Address and Zip Code Carlos Angulo 2927 11th St NW, Washington, DC 20001-3903	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) 12/27/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Schoolteacher Name and Address of Employer Georgetown Day School 4200 Davenport St NW, Washington, DC 20016-4560		
Aggregate Year-To-date		\$ 100.00	
37. Full Name, Mailing Address and Zip Code Stephen Ansolabehere 164 West Newton St, Boston, MA 02118-1203	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) 12/27/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Harvard University 1737 Cambridge St, Cambridge, MA 02138-3016		
Aggregate Year-To-date		\$ 500.00	
38. Full Name, Mailing Address and Zip Code Kyle Parrish 10817 W Bridgford Dr, Cary, NC 27518-1519	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) 12/28/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Fidelity Investments 100 New Millennium Way, Durham, NC 27709-0317		
Aggregate Year-To-date		\$ 100.00	
39. Full Name, Mailing Address and Zip Code Lori-Christina Webb 850 Hungerford Dr, Rockville, MD 20850-1718	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) 12/30/2021	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Educator Name and Address of Employer Montgomery County Public Schools 850 Hungerford Dr, Rockville, MD 20850-1718		
Aggregate Year-To-date		\$ 500.00	
40. Full Name, Mailing Address and Zip Code Joshua Seidman 5144 Newport Ave, Bethesda, MD 20816-3025	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) 12/30/2021	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Healthcare Name and Address of Employer Fountain House 425 W 47th St, New York, NY 10036-2304		

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			\$ 250.00
41. Full Name, Mailing Address and Zip Code Kathleen Hartnett 5302 Lawton Ave, Oakland, CA 94618-1108	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) 12/31/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Cooley LLP 5302 Lawton Ave, Oakland, CA 94618-1108			
	Aggregate Year-To-date			\$ 1,500.00
42. Full Name, Mailing Address and Zip Code aviva kempner 5005 Linnean Ave NW, Washington, DC 20008-2042	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) 12/31/2021	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation filmmaker Name and Address of Employer the ciesla foundation 5005 Linnean Ave NW, Washington, DC 20008-2042			
	Aggregate Year-To-date			\$ 100.00
43. Full Name, Mailing Address and Zip Code Thomas Perrelli 5809 37th St N, 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) 12/31/2021	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Jenner & Block 1099 New York Ave NW, Washington, DC 20001-4411			
	Aggregate Year-To-date			\$ 1,500.00
44. Full Name, Mailing Address and Zip Code Danai Brooks 2445 Wyoming Ave NW, Washington, DC 20008-1644	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) 01/03/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Business Name and Address of Employer Glen Echo Capital 1765 Greensboro Station Pl Fl 9, Mclean, VA 22102-3472			
	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

45. Full Name, Mailing Address and Zip Code Mark Eichorn 133 N Irving St, Arlington, VA 22201-1060	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) 01/04/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation attorney Name and Address of Employer FTC 600 Pennsylvania Ave NW, Washington, DC 20580-0001		
Aggregate Year-To-date		\$ 100.00	
46. Full Name, Mailing Address and Zip Code Robert Bauer 4413 Stanford St, Chevy Chase, MD 20815-5207	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) 01/04/2022	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Law Professor Name and Address of Employer New York University School of Law 4413 Stanford St, Chevy Chase, MD 20815-5207		
Aggregate Year-To-date		\$ 1,500.00	
47. Full Name, Mailing Address and Zip Code William Bentley 1719 Crestwood Dr NW, Washington, DC 20011-5333	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) 01/04/2022	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Managing Director Name and Address of Employer Graphic Visions 620 E Diamond Ave Ste G, Gaithersburg, MD 20877-5328		
Aggregate Year-To-date		\$ 150.00	
48. Full Name, Mailing Address and Zip Code MYRNA Melgar 44 Entrada Ct, San Francisco, CA 94127-2815	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) 01/06/2022	Amount of Each Receipt This Period \$ 180.00
Contributor Type Individual	Occupation District 7 Supervisor Name and Address of Employer City & County of San Francisco 1 Carlton B Goodlett Pl Rm 260, San Francisco, CA 94102		
Aggregate Year-To-date		\$ 180.00	

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

49. Full Name, Mailing Address and Zip Code David Walker 6429 Shady Ln, falls church, VA 22042-2335	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) 01/07/2022	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Analyst Name and Address of Employer GQRR		
Aggregate Year-To-date			\$ 50.00
50. Full Name, Mailing Address and Zip Code harron ellenson 151 Tremont St Apt 20E, Boston, MA 02111-1118	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) 01/07/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 151 Tremont St Apt 20E, Boston, MA 02111-1118		
Aggregate Year-To-date			\$ 100.00
51. Full Name, Mailing Address and Zip Code Rachel Pierson 3255 N Ohio St, Arlington, VA 22207-1349	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) 01/08/2022	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Artist/Instructor Name and Address of Employer Studio Incamminati 1909 S 9th St Fl 7, Philadelphia, PA 19148-2366		
Aggregate Year-To-date			\$ 1,500.00
52. Full Name, Mailing Address and Zip Code michael weaver 11609 Pawnee Ln, Leawood, KS 66211-3073	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) 01/11/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation physician Name and Address of Employer Fonemed 3 Lincoln Dr, Ventura, CA 93001-3276		
Aggregate Year-To-date			\$ 500.00
53. Full Name, Mailing Address and Zip Code William Christie 77 School St, Concord, NH 03301-3913	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) 01/12/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Shaheen & Gordon P.A. PO Box 2133, Concord, NH 03302-2133		
Aggregate Year-To-date			\$ 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

54. Full Name, Mailing Address and Zip Code Simone Francis PO Box 334, Washington, DC 20044	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) 01/13/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Ogletree Deakins		
Aggregate Year-To-date		\$ 500.00	
55. Full Name, Mailing Address and Zip Code Jamie Schafer 1159 Morse St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/13/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie		
Aggregate Year-To-date		\$ 250.00	
56. Full Name, Mailing Address and Zip Code Brian Eisen 16333 Parkland Dr, Shaker Heights, OH 44120-2537	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) 01/13/2022	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer The Eisen Law Firm 3601 Green Rd Ste 308, Cleveland, OH 44122-5719		
Aggregate Year-To-date		\$ 1,500.00	
57. Full Name, Mailing Address and Zip Code Pamela Gilbert 8413 W Boulevard Dr, Alexandria, VA 22308-1915	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) 01/13/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Cuneo Gilbert & LaDuca LLP 4725 Wisconsin Ave NW, Washington, DC 20016-4662		
Aggregate Year-To-date		\$ 250.00	
58. Full Name, Mailing Address and Zip Code donald baur 2109 Foresthill Rd, Alexandria, VA 22307-1129	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) 01/13/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation attorney Name and Address of Employer Perkins Coie 700 13th St NW, Washington, DC 20005-3960		

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		\$ 250.00
59. Full Name, Mailing Address and Zip Code Penelope Codrington 6358 Brampton Ct, Alexandria, VA 22304-3509		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) 01/13/2022 Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual		Occupation attorney Name and Address of Employer The Codrington Law Firm 1701 Pennsylvania Ave NW Ste 200, Washington, DC 20006-5823		
		Aggregate Year-To-date		\$ 1,500.00
60. Full Name, Mailing Address and Zip Code Marc Martin 1487 Broadstone Pl, Vienna, VA 22182-1752		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) 01/13/2022 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Lawyer Name and Address of Employer Perkins Coie 700 13th St NW Ste 800, Washington, DC 20005-5938		
		Aggregate Year-To-date		\$ 100.00
61. Full Name, Mailing Address and Zip Code Vivek Chopra 9708 Lawndale Dr, Silver Spring, MD 20901-3024		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) 01/13/2022 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Lawyer Name and Address of Employer Perkins Coie LLP 700 13th St NW, Washington, DC 20005-3960		
		Aggregate Year-To-date		\$ 500.00
62. Full Name, Mailing Address and Zip Code Dori Bernstein 1412 Geranium St NW, Washington, DC 20012-1518		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) 01/13/2022 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 1412 Geranium St NW, Washington, DC 20012-1518		
		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

63. Full Name, Mailing Address and Zip Code Kyle Simon 724 Upshur St NW, Washington, DC 20011-7936	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) 01/13/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 700 13th St NW, Washington, DC 20005-3960		
Aggregate Year-To-date		\$ 250.00	
64. Full Name, Mailing Address and Zip Code Peter Rouse 2444 39th Pl NW, Washington, DC 20007-1701	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) 01/13/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Perkins Coie LLP 700 13th St NW, Washington, DC 20005-3960		
Aggregate Year-To-date		\$ 1,000.00	
65. Full Name, Mailing Address and Zip Code Karl Sandstrom 2445 NW Westover Rd, Portland, OR 97210-3149	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) 01/14/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie 607 14th St NW, Washington, DC 20005-2000		
Aggregate Year-To-date		\$ 250.00	
66. Full Name, Mailing Address and Zip Code Jeffrey Colman 353 N Clark St Fl 38, Chicago, IL 60654-4704	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) 01/14/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Jenner & Block LLP 353 N Clark St Fl 42, Chicago, IL 60654-4704		
Aggregate Year-To-date		\$ 500.00	
67. Full Name, Mailing Address and Zip Code Reginald Hill 650 N Morgan St Apt 604, Chicago, IL 60642-6547	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) 01/14/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Jenner & Block 650 N Morgan St Apt 604, Chicago, IL 60642-6547		
Aggregate Year-To-date		\$ 1,000.00	

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

68. Full Name, Mailing Address and Zip Code Charles Curtis 2115 Van Hise Ave, Madison, WI 53726-3945	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) 01/14/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 33 E Main St Ste 201, Madison, WI 53703-3095		
Aggregate Year-To-date		\$ 500.00	
69. Full Name, Mailing Address and Zip Code baine alexander 2115 Van Hise Ave, Madison, WI 53726-3945	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) 01/14/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation counselor Name and Address of Employer self 2115 Van Hise Ave, Madison, WI 53726-3945		
Aggregate Year-To-date		\$ 500.00	
70. Full Name, Mailing Address and Zip Code Albert Foer 2919 Ellicott St NW, Washington, DC 20008-1022	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) 01/14/2022	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2919 Ellicott St NW, Washington, DC 20008-1022		
Aggregate Year-To-date		\$ 150.00	
71. Full Name, Mailing Address and Zip Code Thomas Jensen 4025 N Randolph St, Arlington, VA 22207-4811	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) 01/15/2022	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 800, Washington, DC 20005-5938		
Aggregate Year-To-date		\$ 1,500.00	
72. Full Name, Mailing Address and Zip Code Katie Fallow 569 4th St, Brooklyn, NY 11215-3008	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) 01/16/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Columbia University 475 Riverside Dr Ste 302, New York, NY 10115-0116		

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		\$ 250.00
73. Full Name, Mailing Address and Zip Code Alexander Joseph 1901 Columbia Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/17/2022	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 20.00
74. Full Name, Mailing Address and Zip Code Sean Donahue 44 Entrada Ct, San Francisco, CA 94127-2815	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) 01/17/2022	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Donahue Goldberg & Littleton 44 Entrada Ct, San Francisco, CA 94127-2815			
		Aggregate Year-To-date		\$ 250.00
75. Full Name, Mailing Address and Zip Code Jessica Amunson 3716 Fort Worth Ave, Alexandria, VA 22304-1738	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) 01/17/2022	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Jenner & Block LLP 1099 New York Ave NW, Washington, DC 20001-4411			
		Aggregate Year-To-date		\$ 500.00
76. Full Name, Mailing Address and Zip Code Dana Riel 2329 Dartmouth Ln, Crofton, MD 21114-1208	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) 01/17/2022	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Business Solutions Inc. 1701 Pennsylvania Ave NW, Washington, DC 20006-5805			
		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

77. Full Name, Mailing Address and Zip Code susan pierce 2101 Dexter Ave, Silver Spring, MD 20902-5009	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) 01/17/2022	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2101 Dexter Ave, Silver Spring, MD 20902-5009		
Aggregate Year-To-date			\$ 100.00
78. Full Name, Mailing Address and Zip Code Eric Greenberg 14804 Marlin Ter, Rockville, MD 20853-3612	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) 01/17/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer CMG Media Corporation 14804 Marlin Ter, Rockville, MD 20853-3612		
Aggregate Year-To-date			\$ 250.00
79. Full Name, Mailing Address and Zip Code Robert Portman 6803 West Ave, Chevy Chase, MD 20815-5203	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) 01/17/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Powers Pyles Sutter & Verville PC 6803 West Ave, Chevy Chase, MD 20815-5203		
Aggregate Year-To-date			\$ 250.00
80. Full Name, Mailing Address and Zip Code Jon Cuneo 647 E Capitol St SE, Washington, DC 20003-1234	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) 01/17/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Cuneo Gilbert & LaDuca 4725 Wisconsin Ave NW, Washington, DC 20016-4662		
Aggregate Year-To-date			\$ 1,000.00
81. Full Name, Mailing Address and Zip Code Lalitha Madduri 104 S Hayworth Ave Apt 307, Los Angeles, CA 90048-3666	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) 01/18/2022	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Elias Law Group LLP 5958 W Robin Ln, Glendale, AZ 85310-4279		

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
82. Full Name, Mailing Address and Zip Code LeAnn Johnson 308 S Lee St, Alexandria, VA 22314-3814	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) 01/18/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie 700 13th St NW, Washington, DC 20005-3960		
	Aggregate Year-To-date		\$ 100.00
83. Full Name, Mailing Address and Zip Code Ted Boling 2403 Daphne Ln, Alexandria, VA 22306-2551	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) 01/18/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation attorney Name and Address of Employer Perkins Coie 2403 Daphne Ln, Alexandria, VA 22306-2551		
	Aggregate Year-To-date		\$ 100.00
84. Full Name, Mailing Address and Zip Code benjamin Sharp 502 High St, Alexandria, VA 22302-4110	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) 01/18/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation lawyer Name and Address of Employer Perkins Coie 700 13th St NW, Washington, DC 20005-3960		
	Aggregate Year-To-date		\$ 100.00
85. Full Name, Mailing Address and Zip Code Lara Flint 3005 N Stuart St, Arlington, VA 22207-4118	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) 01/18/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Democracy Fund 1200 17th St NW, Washington, DC 20036-3006		
	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

86. Full Name, Mailing Address and Zip Code Michael Ross 1813 N Randolph St, Arlington, VA 22207-3026	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) 01/18/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Aegis Law Group LLP 801 Pennsylvania Ave NW Ste 740, Washington, DC 20004-2670		
Aggregate Year-To-date		\$ 1,000.00	
87. Full Name, Mailing Address and Zip Code Val Dahiya 414 Orleans Cir SW, Vienna, VA 22180-6470	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) 01/18/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie 700 13th St NW Ste 800, Washington, DC 20005-5938		
Aggregate Year-To-date		\$ 500.00	
88. Full Name, Mailing Address and Zip Code Robert Burgoyne 6912 Arbor Ln, Mclean, VA 22101-1542	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) 01/18/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Perkins Coie LLC 700 13th St NW Ste 800, Washington, DC 20005-5938		
Aggregate Year-To-date		\$ 250.00	
89. Full Name, Mailing Address and Zip Code Alec W Farr 8319 Woodhaven Blvd, Bethesda, MD 20817-3131	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) 01/18/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie 700 13th St NW, Washington, DC 20005-3960		
Aggregate Year-To-date		\$ 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

90. Full Name, Mailing Address and Zip Code Bruce Klores 5330 Kenwood Ave, Chevy Chase, MD 20815-6602	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) 01/18/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Self 1735 20th St NW, Washington, DC 20009-1104		
Aggregate Year-To-date		\$ 500.00	
91. Full Name, Mailing Address and Zip Code Alexander Tischenko 4200 13th St NE, Washington, DC 20017-3825	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) 01/18/2022	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer New Venture Fund 1828 L St NW Ste 300, Washington, DC 20036-5104		
Aggregate Year-To-date		\$ 200.00	
92. Full Name, Mailing Address and Zip Code Amanda Callais 135 Varum St NW, Washington, DC 20011-7319	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) 01/18/2022	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 20005-5998		
Aggregate Year-To-date		\$ 1,500.00	
93. Full Name, Mailing Address and Zip Code Stephanie Command 1205 Half St SE Apt 917, Washington, DC 20003-4584	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) 01/18/2022	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 700 13th St NW, Washington, DC 20005-3960		
Aggregate Year-To-date		\$ 300.00	

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

94. Full Name, Mailing Address and Zip Code Peter Tracey 1213 New Jersey Ave NW, Washington, DC 20001-1225	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) 01/18/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 700 13th St NW Ste 800, Washington, DC 20005-5938		
Aggregate Year-To-date		\$ 100.00	
95. Full Name, Mailing Address and Zip Code Richard Ross 383 Carlton Ave Apt 4W, Brooklyn, NY 11238-1020	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) 01/18/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 1155 Avenue Of The Americas Fl 22, New York, NY 10036-2711		
Aggregate Year-To-date		\$ 500.00	
96. Full Name, Mailing Address and Zip Code Harry Bainbridge 3104 Cathedral Ave NW, Washington, DC 20008-3419	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) 01/19/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Consultant / Writer Name and Address of Employer Self 3104 Cathedral Ave NW, Washington, DC 20008-3419		
Aggregate Year-To-date		\$ 500.00	
97. Full Name, Mailing Address and Zip Code Christine M Lee 321 23rd St SW, Roanoke, VA 24014-1741	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) 01/20/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation public defender Name and Address of Employer federal government 210 1st St SW, Roanoke, VA 24011-1605		
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

98. Full Name, Mailing Address and Zip Code Jon Winovich 555 Highland Way, Hagerstown, MD 21740-6235	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) 01/20/2022	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Legal Practice Assistant Name and Address of Employer Perkins Coie 700 13th St NW Ste 800, Washington, DC 20005-5938		
Aggregate Year-To-date			\$ 50.00
99. Full Name, Mailing Address and Zip Code Daniel Osher 1473 Harvard St NW Unit 2, Washington, DC 20009-4704	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) 01/20/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Elias Law Group LLP 10 G St NE, Washington, DC 20002-4213		
Aggregate Year-To-date			\$ 100.00
100. Full Name, Mailing Address and Zip Code Ann Kappler 3320 Shepherd St, Chevy Chase, MD 20815-3226	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) 01/21/2022	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Executive Name and Address of Employer Prudential Financial 751 Broad St, Newark, NJ 07102-3754		
Aggregate Year-To-date			\$ 150.00
101. Full Name, Mailing Address and Zip Code Del Spiva 939 E San Jose Ave, Burbank, CA 91501-1319	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) 01/22/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Film Music Post Pro Editor Name and Address of Employer Amblin Entertainment 939 E San Jose Ave, Burbank, CA 91501-1319		
Aggregate Year-To-date			\$ 1,000.00
102. Full Name, Mailing Address and Zip Code Isabel LeBoutillier 1712 Crestwood Dr NW, Washington, DC 20011-5334	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) 01/22/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation VP Name and Address of Employer Kymeta Government Solutions Inc. 2000 Corporate Rdg, Mclean, VA 22102-7854		

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		\$ 250.00
103. Full Name, Mailing Address and Zip Code Staci Warden 4413 Colorado Ave NW, Washington, DC 20011-3723	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) 01/22/2022	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Senior Advisor Name and Address of Employer Milken Institute 730 15th St NW # 404, Washington, DC 20005-1050			
		Aggregate Year-To-date		\$ 500.00
104. Full Name, Mailing Address and Zip Code Kathleen Flynn 2839 Allendale Pl NW, Washington, DC 20008-1038	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) 01/22/2022	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2839 Allendale Pl NW, Washington, DC 20008-1038			
		Aggregate Year-To-date		\$ 100.00
105. Full Name, Mailing Address and Zip Code Caroline Wolverton 4610 Ashby St NW, Washington, DC 20007-1041	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) 01/22/2022	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation attorney Name and Address of Employer Akin Gump Strauss Hauer & Feld LLP 2100 L St NW, Washington, DC 20037-1525			
		Aggregate Year-To-date		\$ 250.00
106. Full Name, Mailing Address and Zip Code Ingrid Rushing 124 E Olive Ave, Burbank, CA 91502-1819	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) 01/22/2022	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation CEO Name and Address of Employer Community Options Inc 126 E Olive Ave, Burbank, CA 91502			
		Aggregate Year-To-date		\$ 250.00
107. Full Name, Mailing Address and Zip Code Bill Kincaid 933 N Pembroke Rd, Fayetteville, AR 72701	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) 01/23/2022	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Professor Name and Address of Employer University of Arkansas			

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		\$ 100.00
108. Full Name, Mailing Address and Zip Code Wendy McGrath 3715 Upton St NW, Washington, DC 20016-2223	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) 01/23/2022	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Coach Name and Address of Employer Self Employed 3715 Upton St NW, Washington, DC 20016-2223			
		Aggregate Year-To-date		\$ 250.00
109. Full Name, Mailing Address and Zip Code Kali Bracey 721 Upshur St NW, Washington, DC 20011-7937	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) 01/23/2022	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Jenner & Block 1099 New York Ave NW, Washington, DC 20001-4411			
		Aggregate Year-To-date		\$ 500.00
110. Full Name, Mailing Address and Zip Code Gerald Hebert 191 Somerville St Apt 405, Alexandria, VA 22304-8216	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) 01/24/2022	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self 191 Somerville St Apt 405, Alexandria, VA 22304-8216			
		Aggregate Year-To-date		\$ 1,000.00
111. Full Name, Mailing Address and Zip Code Joel Kolker 6704 Kerns Rd, Falls Church, VA 22042-4236	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) 01/24/2022	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Urban Planner Name and Address of Employer Self Employed 6704 Kerns Rd, Falls Church, VA 22042-4236			
		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

112. Full Name, Mailing Address and Zip Code Mary Rose Hughes 5118 Warren Pl NW, Washington, DC 20016-4372	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) 01/24/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation attorney Name and Address of Employer Perkins Coie LLP 5118 Warren Pl NW, Washington, DC 20016-4372		
Aggregate Year-To-date		\$ 1,000.00	
113. Full Name, Mailing Address and Zip Code Michele Shannon 3007 Porter St NW, Washington, DC 20008-3272	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) 01/24/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Economist Name and Address of Employer International Monetary Fund 700 19th St NW, Washington, DC 20431-0001		
Aggregate Year-To-date		\$ 500.00	
114. Full Name, Mailing Address and Zip Code Gregory Magarian 5088 Washington Pl, Saint Louis, MO 63108-1113	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) 01/25/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation law professor Name and Address of Employer Washington University School of Law 1 Brookings Dr # 1120, Saint Louis, MO 63130-4862		
Aggregate Year-To-date		\$ 100.00	
115. Full Name, Mailing Address and Zip Code Heather Joseph 1901 Columbia Rd NW Apt 103, Washington, DC 20009-5021	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) 01/25/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation NGO Director Name and Address of Employer New Venture Fund SPARC 1201 Connecticut Ave NW Ste 600, Washington, DC 20036-2732		
Aggregate Year-To-date		\$ 100.00	
116. Full Name, Mailing Address and Zip Code Lynn Parseghian 2954 Macomb St NW, Washington, DC 20008-3315	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) 01/25/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation nonprofit executive Name and Address of Employer Tregaron Conservancy 2954 Macomb St NW, Washington, DC 20008-3315		

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		\$ 100.00
117. Full Name, Mailing Address and Zip Code Mary Wilke 24 Bow St, Concord, NH 03301-2701	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) 01/25/2022	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 24 Bow St, Concord, NH 03301-2701			
		Aggregate Year-To-date		\$ 100.00
118. Full Name, Mailing Address and Zip Code Christine Worrell 8483 Farys Mill Rd, Gloucester, VA 23061-2902	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) 01/25/2022	Amount of Each Receipt This Period \$ 1,500.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 8483 Farys Mill Rd, Gloucester, VA 23061			
		Aggregate Year-To-date		\$ 1,500.00
119. Full Name, Mailing Address and Zip Code Kristine Wilson 3922 NE Belvoir Pl, Seattle, WA 98105-5455	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) 01/26/2022	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Perkins Coie LLP 10885 NE 4th St Ste 700, Bellevue, WA 98004-5579			
		Aggregate Year-To-date		\$ 1,000.00
120. Full Name, Mailing Address and Zip Code David Worley 107 Regents Sq, Peachtree City, GA 30269-4279	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) 01/26/2022	Amount of Each Receipt This Period \$ 750.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Evangelista Worley LLC 500 Sugar Mill Rd Ste 245A, Atlanta, GA 30350-6430			
		Aggregate Year-To-date		\$ 750.00

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

121. Full Name, Mailing Address and Zip Code barry Chovitz 2207 N Kenmore St, Arlington, VA 22201-4332	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) 01/26/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation health consultant Name and Address of Employer Chemonics 2207 N Kenmore St, Arlington, VA 22201-4332		
Aggregate Year-To-date		\$ 100.00	
122. Full Name, Mailing Address and Zip Code susan pierce 2101 Dexter Ave, Silver Spring, MD 20902-5009	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) 01/26/2022	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2101 Dexter Ave, Silver Spring, MD 20902-5009		
Aggregate Year-To-date		\$ 150.00	
123. Full Name, Mailing Address and Zip Code Cathy Bendor 7804 Oldchester Rd, Bethesda, MD 20817-6280	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) 01/26/2022	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer U.S. Dept. Of Justice 150 M St NE, Washington, DC 20002-3388		
Aggregate Year-To-date		\$ 250.00	
124. Full Name, Mailing Address and Zip Code Brian Hauck 5597 Lawton Ave, Oakland, CA 94618-1508	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) 01/27/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Jenner & Block LLP 5597 Lawton Ave, Oakland, CA 94618-1508		
Aggregate Year-To-date		\$ 500.00	
125. Full Name, Mailing Address and Zip Code Celina Gerbic 1824 17th St NW Apt 2, Washington, DC 20009-3268	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) 01/28/2022	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Development Director Name and Address of Employer School for Friends 2201 P St NW, Washington, DC 20037-1033		
Aggregate Year-To-date		\$ 50.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Spiva for DC AG

126. Full Name, Mailing Address and Zip Code Susan Akman 3209 Macomb St NW, Washington, DC 20008-3327	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) 01/28/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3209 Macomb St NW, Washington, DC 20008-3327		
Aggregate Year-To-date		\$ 100.00	
127. Full Name, Mailing Address and Zip Code Peter Lefkowitz 84 Carlton Rd, Waban, MA 02468-1916	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) 01/28/2022	Amount of Each Receipt This Period \$ 750.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Citrix 15 Network Dr, Burlington, MA 01803-2766		
Aggregate Year-To-date		\$ 750.00	
128. Full Name, Mailing Address and Zip Code Ian Gershengorn 6105 Walhonding Rd, Bethesda, MD 20816-2140	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) 01/29/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Jenner & Block 1099 New York Ave NW Ste 900, Washington, DC 20001-4412		
Aggregate Year-To-date		\$ 1,000.00	
129. Full Name, Mailing Address and Zip Code Joseph Palmore 3716 Warren St NW, Washington, DC 20016-2233	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) 01/29/2022	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Morrison & Foerster LLP 2100 L St NW, Washington, DC 20037-1525		
Aggregate Year-To-date		\$ 1,000.00	

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

130. Full Name, Mailing Address and Zip Code Stephen Irwin 1439 Whittier Pl NW, Washington, DC 20012-2845	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) 01/29/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation EVP Name and Address of Employer Dworbell Inc. 1400 16th St NW Ste 420, Washington, DC 20036-2216		
Aggregate Year-To-date			\$ 200.00
131. Full Name, Mailing Address and Zip Code Stephen Irwin 1439 Whittier Pl NW, Washington, DC 20012-2845	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) 01/29/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation EVP Name and Address of Employer Dworbell Inc. 1400 16th St NW Ste 420, Washington, DC 20036-2216		
Aggregate Year-To-date			\$ 200.00
132. Full Name, Mailing Address and Zip Code Margaret Emery 1710 35th St NW, Washington, DC 20007-2304	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) 01/29/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1710 35th St NW, Washington, DC 20007-2304		
Aggregate Year-To-date			\$ 500.00
133. Full Name, Mailing Address and Zip Code John Geise 718 7th St NE, Washington, DC 20002-3602	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) 01/29/2022	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Elias Law Group LLP 10 G St NE Ste 600, Washington, DC 20002-4253		
Aggregate Year-To-date			\$ 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

134. Full Name, Mailing Address and Zip Code Deanne Maynard 500 Summers Ct, Alexandria, VA 22301-2441	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) 01/30/2022	Amount of Each Receipt This Period \$ 1,500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Morrison & Foerster 2100 L St NW, Washington, DC 20037-1525		
Aggregate Year-To-date			\$ 1,500.00
135. Full Name, Mailing Address and Zip Code Susan Hoffman 4025 Oliver St, Chevy Chase, MD 20815-3432	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) 01/30/2022	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Crowell & Moring LLP 1001 Pennsylvania Ave NW, Washington, DC 20004-2505		
Aggregate Year-To-date			\$ 100.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 61,787.37

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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) Database Services	Date (month, day, year) 12/16/2021	Amount of Each Receipt This Period \$ 773.80
	Aggregate Year-To-date \$ 103,205.29		
	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) Event Ticket	Date (month, day, year) 12/18/2021	Amount of Each Receipt This Period \$ 15.00
	Aggregate Year-To-date \$ 103,220.29		
	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) Digital Subscription	Date (month, day, year) 12/31/2021	Amount of Each Receipt This Period \$ 61.04
	Aggregate Year-To-date \$ 103,281.33		
	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) Database Services	Date (month, day, year) 01/01/2022	Amount of Each Receipt This Period \$ 773.80
	Aggregate Year-To-date \$ 104,055.13		
	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) Digital Subscription	Date (month, day, year) 01/24/2022	Amount of Each Receipt This Period \$ 8.69
	Aggregate Year-To-date \$ 104,063.82		
TOTAL This Period (Aggregate of all Receipt pages)			\$ 1,632.33

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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 ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 12/12/2021	Amount of Each Expenditure This Period \$ 214.32
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code CFO Compliance LLC 1 Park Row Ste 5, Providence, RI 02903-1235	Purpose of Expenditure Consultant	Date (month, day, year) 12/13/2021	Amount of Each Expenditure This Period \$ 2,650.00
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code DONALD J FRIEDMAN 2441 Tracy Pl NW, Washington, DC 20008-1628	Purpose of Expenditure In-Kind	Date (month, day, year) 12/14/2021	Amount of Each Expenditure This Period \$ 333.69
Occupation Attorney	Name and Address of Employer Perkins Coie LLP 2441 Tracy Pl NW, Washington, DC 20008-1628		
4. Full Name, Mailing Address and Zip Code Rhona Friedman 2441 Tracy Pl NW, Washington, DC 20008-1628	Purpose of Expenditure In-Kind	Date (month, day, year) 12/14/2021	Amount of Each Expenditure This Period \$ 333.68
Occupation Information Requested	Name and Address of Employer Information Requested		
5. Full Name, Mailing Address and Zip Code Bruce Spiva 1718 Crestwood Dr NW, Washington, DC 20011-5334	Purpose of Expenditure In-Kind	Date (month, day, year) 12/16/2021	Amount of Each Expenditure This Period \$ 773.80
Occupation Attorney	Name and Address of Employer Perkins Coie LLP		
6. Full Name, Mailing Address and Zip Code Bruce Spiva 1718 Crestwood Dr NW, Washington, DC 20011-5334	Purpose of Expenditure In-Kind	Date (month, day, year) 12/18/2021	Amount of Each Expenditure This Period \$ 15.00
Occupation Attorney	Name and Address of Employer Perkins Coie LLP		
7. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 12/19/2021	Amount of Each Expenditure This Period \$ 372.13
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 12/26/2021	Amount of Each Expenditure This Period \$ 112.59
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 12/31/2021	Amount of Each Expenditure This Period \$ 199.49
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Bruce Spiva 1718 Crestwood Dr NW, Washington, DC 20011-5334	Purpose of Expenditure In-Kind	Date (month, day, year) 12/31/2021	Amount of Each Expenditure This Period \$ 61.04
Occupation Attorney	Name and Address of Employer Perkins Coie LLP		
11. Full Name, Mailing Address and Zip Code Bruce Spiva 1718 Crestwood Dr NW, Washington, DC 20011-5334	Purpose of Expenditure In-Kind	Date (month, day, year) 01/01/2022	Amount of Each Expenditure This Period \$ 773.80
Occupation Attorney	Name and Address of Employer Perkins Coie LLP		
12. Full Name, Mailing Address and Zip Code Benjamin Rhind 95 Eagle St Apt 4R, Brooklyn, NY 11222-1046	Purpose of Expenditure Consultant	Date (month, day, year) 01/08/2022	Amount of Each Expenditure This Period \$ 2,000.00
Occupation Information Requested	Name and Address of Employer Information Requested 95 Eagle St Apt 4R, Brooklyn, NY 11222-1046		
13. Full Name, Mailing Address and Zip Code Lucy MacIntosh 1414 Florida Ave NW, Washington, DC 20009-5802	Purpose of Expenditure Consultant	Date (month, day, year) 01/08/2022	Amount of Each Expenditure This Period \$ 8,000.00
Occupation Information Requested	Name and Address of Employer Information Requested 1414 Florida Ave NW, Washington, DC 20009-5802		
14. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 01/09/2022	Amount of Each Expenditure This Period \$ 145.37
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Perkins Coie LLP 700 13th St NW Ste 600, Washington, DC 20005-5998	Purpose of Expenditure Rental	Date (month, day, year) 01/10/2022	Amount of Each Expenditure This Period \$ 200.00
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Quality Printers 301 Kennedy St NW, Washington, DC 20011-6511	Purpose of Expenditure Printing	Date (month, day, year) 01/11/2022	Amount of Each Expenditure This Period \$ 9,508.81
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 01/16/2022	Amount of Each Expenditure This Period \$ 468.11
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code CFO Compliance LLC 1 Park Row Ste 5, Providence, RI 02903-1235	Purpose of Expenditure Consultant	Date (month, day, year) 01/18/2022	Amount of Each Expenditure This Period \$ 1,500.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 01/23/2022	Amount of Each Expenditure This Period \$ 549.90
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code Berlin Rosen Ltd. 15 Maiden Ln Ste 1600, New York, NY 10038-5111	Purpose of Expenditure Advertising	Date (month, day, year) 01/24/2022	Amount of Each Expenditure This Period \$ 958.08
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code Bruce Spiva 1718 Crestwood Dr NW, Washington, DC 20011-5334	Purpose of Expenditure In-Kind	Date (month, day, year) 01/24/2022	Amount of Each Expenditure This Period \$ 8.69
Occupation Attorney	Name and Address of Employer Perkins Coie LLP		
22. Full Name, Mailing Address and Zip Code Amalgamated Bank 1825 K St NW, Washington, DC 20006-1202	Purpose of Expenditure Bank Fees	Date (month, day, year) 01/26/2022	Amount of Each Expenditure This Period \$ 6.79
Occupation	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code Berlin Rosen Ltd. 15 Maiden Ln Ste 1600, New York, NY 10038-5111	Purpose of Expenditure Consultant	Date (month, day, year) 01/28/2022	Amount of Each Expenditure This Period \$ 250.00
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code DC Democratic Party 80 M St SE, Washington, DC 20003-3544	Purpose of Expenditure Equipment Purchases	Date (month, day, year) 01/28/2022	Amount of Each Expenditure This Period \$ 3,000.00
Occupation	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code Alaina M. Haworth 800 P St NW Apt 411, Washington, DC 20001-3378	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 01/28/2022	Amount of Each Expenditure This Period \$ 4,623.22
Occupation Information Requested	Name and Address of Employer Information Requested 800 P St NW Apt 411, Washington, DC 20001-3378		
26. Full Name, Mailing Address and Zip Code Paychex 501 Wampanoag Trl, Riverside, RI 02915-1507	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 01/28/2022	Amount of Each Expenditure This Period \$ 2,393.77
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer St, Somerville, MA 02144-3132	Purpose of Expenditure Bank Fees	Date (month, day, year) 01/30/2022	Amount of Each Expenditure This Period \$ 507.60
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code Paychex 501 Wampanoag Trl, Riverside, RI 02915-1507	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 01/30/2022	Amount of Each Expenditure This Period \$ 320.75
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 40,280.63