



**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) Ward 1 Residents for Brianne	2. OCF Identification Number RECOTH246677
Address 619 Lamont Street, 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 20010	

4. TYPE OF REPORT: **First Report**
This REPORT contains activity for: **Not Applicable**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 2/23/2024 through 3/4/2024		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 0.00	
(c) Total Receipts [from Line (16)]	\$ 41,838.00	\$ 41,838.00
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 41,838.00	
7. Total Expenditures (from Line 22)	\$ 700.00	\$ 700.00
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 41,138.00	
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.

Kathryn B Tilley

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

03/04/2024

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) Ward 1 Residents for Brianne	REPORT COVERING THE PERIOD FROM: 2/23/2024 TO: 3/4/2024	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 41,838.00	\$ 41,838.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 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) Non Contribution Receipts (Schedule A-8)	\$ 0.00	\$ 0.00 11(g)
(h) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e), (f) and (g)]	\$ 41,838.00	\$ 41,838.00 11(h)
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]	\$ 41,838.00	\$ 41,838.00 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 0.00	\$ 0.00 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)	\$ 700.00	\$ 700.00 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)]	\$ 700.00	\$ 700.00 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)]	\$ 700.00	\$ 700.00 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$ 0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$ 41,838.00
25. SUBTOTAL (add Lines 23 and 24)		\$ 41,838.00
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		\$ 700.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		\$ 41,138.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.			
Full Name of Committee (Name of Candidate, if Candidate is reporting) Ward 1 Residents for Brianne			
1. Full Name, Mailing Address and Zip Code Brianne Nadeau 619 Lamont St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/23/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Councilmember Name and Address of Employer DC Government 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 500.00
2. Full Name, Mailing Address and Zip Code Jayson Harpster 619 Lamont St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/23/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Senior Director Name and Address of Employer Clarify Health 75 Hawthorne St, San Francisco, CA 94105		
Aggregate Year-To-date			\$ 500.00
3. Full Name, Mailing Address and Zip Code Jon Bouker 6220 33rd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/25/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer ArentFox Schiff LLP 6220 33rd St NW, Washington, DC 20015		
Aggregate Year-To-date			\$ 250.00
4. Full Name, Mailing Address and Zip Code Shelore Williams Esq 3215 13th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/25/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self 1450 Mercantile Ln Ste 155, Upper Marlboro, MD 20774		
Aggregate Year-To-date			\$ 50.00
5. Full Name, Mailing Address and Zip Code Sandra Robinson 1359 Kalmia Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer The Cochran Firm 1666 K St NW Ste 1150, Washington, DC 20006		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 250.00
6. Full Name, Mailing Address and Zip Code Victor Long 12759 Bullet Bend Rd, Lusby, MD 20657		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Attorney		
		Name and Address of Employer Regan Zambri Long PLLC 12759 Bullet Bend Rd, Lusby, MD 20657		
		Aggregate Year-To-date		\$ 250.00
7. Full Name, Mailing Address and Zip Code Andy Bederman 1111 Bonifant St, Silver Spring, MD 20910		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Attorney		
		Name and Address of Employer Self 1111 Bonifant Rd, Silver Spring, MD 20905		
		Aggregate Year-To-date		\$ 500.00
8. Full Name, Mailing Address and Zip Code Daniel Scialpi 2218 N Quincy St, Arlington, VA 22207		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Attorney		
		Name and Address of Employer Patrick Malone and Associates 1310 L St NW Ste 800, Washington, DC 20005		
		Aggregate Year-To-date		\$ 500.00
9. Full Name, Mailing Address and Zip Code Barry Chasen 16299 Vintage Oaks Ln, Delray Beach, FL 33484		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Attorney		
		Name and Address of Employer ChasenBoscolo 7852 Walker Dr, Greenbelt, MD 20770		
		Aggregate Year-To-date		\$ 100.00
10. Full Name, Mailing Address and Zip Code Salvador Zambri 6621 Lybrook Ct, Bethesda, MD 20817		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Attorney		
		Name and Address of Employer Regan Zambri Long PLLC 1919 M St NW Ste 600, Washington, DC 20036		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 500.00
11. Full Name, Mailing Address and Zip Code David Ginsburg 1335 Fishing Creek Rd, Annapolis, MD 21403	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Wingfield, Ginsburg & Lipp 700 5th St NW, Washington, DC 20001		
		Aggregate Year-To-date	\$ 100.00
12. Full Name, Mailing Address and Zip Code Felipe Pabon-Rodriguez 7852 Walker Dr Ste 300, Greenbelt, MD 20770	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Controller Name and Address of Employer ChasenBoscolo Injury Lawyers 7852 Walker Dr Ste 300, Greenbelt, MD 20770		
		Aggregate Year-To-date	\$ 500.00
13. Full Name, Mailing Address and Zip Code Daniel Singer 4719 Brandywine St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Wiley Rein 4719 Brandywine St NW, Washington, DC 20016		
		Aggregate Year-To-date	\$ 500.00
14. Full Name, Mailing Address and Zip Code Kenneth Trombly 1825 K St NW Ste 1150, Washington, DC 20006	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Trombly & Singer, PLLC 1825 K St NW Ste 1150, Washington, DC 20006		
		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)

Ward 1 Residents for Brianne

15. Full Name, Mailing Address and Zip Code Kasey Murray Imadojemu 4767 Berkeley Ter NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Koonz McKenney Johnson & DePaolis LLP 2001 Pennsylvania Ave NW Ste 530, Washington, DC 20006		
Aggregate Year-To-date		\$ 500.00	
16. Full Name, Mailing Address and Zip Code Marc Fiedler 2737 Devonshire Pl NW Apt 316, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Koonz McKenney Johnson & DePaolis LLP 2001 Pennsylvania Ave NW Ste 530, Washington, DC 20006		
Aggregate Year-To-date		\$ 100.00	
17. Full Name, Mailing Address and Zip Code Allan Siegel 5 Quelway Ct, North Potomac, MD 20878	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Chaikin, Sherman, Cammarata & Siegel 1232 17th St NW, Washington, DC 20036		
Aggregate Year-To-date		\$ 500.00	
18. Full Name, Mailing Address and Zip Code Julie Heiden 1901 Abbotsford Dr, Vienna, VA 22182	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Koonz McKenney Johnson & DePaolis LLP 10300 Eaton Pl Ste 200, Fairfax, VA 22030		
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)

Ward 1 Residents for Brianne

19. Full Name, Mailing Address and Zip Code Jaqueline Colclough 661 Old Hunt Way, Herndon, VA 20170	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney		
Name and Address of Employer Regan Zambri Long PLLC 1919 M St NW Ste 600, Washington, DC 20036			
Aggregate Year-To-date			\$ 500.00
20. Full Name, Mailing Address and Zip Code Jose Barrios 718 Roxboro Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Enterprise Architect		
Name and Address of Employer The MITRE Corporation 7515 Colshire Dr, Mc Lean, VA 22102			
Aggregate Year-To-date			\$ 250.00
21. Full Name, Mailing Address and Zip Code Matthew Nace 768 Burnt House Rd, Carlisle, PA 17015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/29/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney		
Name and Address of Employer Paulson & Nace, PLLC 1025 Thomas Jefferson St NW Ste 810W, Washington, DC 20007			
Aggregate Year-To-date			\$ 500.00
22. Full Name, Mailing Address and Zip Code Harvey Williams 2300 Wisconsin Ave NW Ste 100A, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney		
Name and Address of Employer Williams Legal Group 2300 Wisconsin Ave NW Ste 100A, Washington, DC 20007			
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)

Ward 1 Residents for Brianne

23. Full Name, Mailing Address and Zip Code Steven H. Kaminski 6533 Kelsey Point Cir, Alexandria, VA 22315	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Law Offices of Steven H. Kaminski 1825 K St NW Ste 1150, Washington, DC 20006		
Aggregate Year-To-date			\$ 250.00
24. Full Name, Mailing Address and Zip Code Julie Heiden 1901 Abbotsford Dr, Vienna, VA 22182	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Koonz McKenney Johnson & DePaolis LLP 10300 Eaton Pl Ste 200, Fairfax, VA 22030		
Aggregate Year-To-date			\$ 100.00
25. Full Name, Mailing Address and Zip Code Roger Johnson 2001 Pennsylvania Ave NW Ste 530, Washington, DC 20006	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Paralegal Name and Address of Employer Koonz McKenney Johnson & DePaolis LLP 2001 Pennsylvania Ave NW Ste 530, Washington, DC 20006		
Aggregate Year-To-date			\$ 500.00
26. Full Name, Mailing Address and Zip Code Joseph Cammarata 5901 River Dr, Lorton, VA 22079	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer Koonz McKenney Johnson & DePaolis LLP 5901 River Dr, Lorton, VA 22079		
Aggregate Year-To-date			\$ 500.00
27. Full Name, Mailing Address and Zip Code Bernard Solnik 2801 Valley Dr, Alexandria, VA 22302	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self 2801 Valley Dr, Alexandria, VA 22302		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 500.00
28. Full Name, Mailing Address and Zip Code Justin Dross 8203 Maple Ridge Rd, Bethesda, MD 20814	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Dross Berman, LLC 11140 Rockville Pike Ste 500, Rockville, MD 20852		
		Aggregate Year-To-date	\$ 500.00
29. Full Name, Mailing Address and Zip Code Christopher Nace 5 Island Ave Apt 4C, Miami Beach, FL 33139	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Paulson & Nace, PLLC 1025 Thomas Jefferson St NW Ste 810W, Washington, DC 20007		
		Aggregate Year-To-date	\$ 500.00
30. Full Name, Mailing Address and Zip Code Paulson & Nace, PLLC 1025 Thomas Jefferson St NW Ste 810W, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		
		Aggregate Year-To-date	\$ 500.00
31. Full Name, Mailing Address and Zip Code Joshua Berman 311 Dean Dr, Rockville, MD 20851	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Dross Berman LLC 11140 Rockville Pike, Rockville, MD 20852		
		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)

Ward 1 Residents for Brianne

32. Full Name, Mailing Address and Zip Code Eric Stravitz 250 Millchurch Rd, Arnold, MD 21012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney		
Name and Address of Employer Stravitz Law Firm, P.C. 4601 Presidents Dr Ste 120, Lanham, MD 20706			
Aggregate Year-To-date			\$ 500.00
33. Full Name, Mailing Address and Zip Code Scott Perry 2134 Emilys Ln, Falls Church, VA 22043	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney		
Name and Address of Employer Breit Biniazan, PC 1010 N Glebe Rd Ste 310, Arlington, VA 22201			
Aggregate Year-To-date			\$ 500.00
34. Full Name, Mailing Address and Zip Code Karl Racine 1309 T St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney		
Name and Address of Employer OAG DC 441 4th St NW, Washington, DC 20001			
Aggregate Year-To-date			\$ 500.00
35. Full Name, Mailing Address and Zip Code Scott Goldstein 3814 Kansas Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Executive Director		
Name and Address of Employer EmpowerEd 3814 Kansas Ave NW, Washington, DC 20011			
Aggregate Year-To-date			\$ 50.00
36. Full Name, Mailing Address and Zip Code John Solomon 625 Park Rd NW Apt 106, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self employed		
Name and Address of Employer Self 625 Park Rd NW Apt 106, Washington, DC 20010			
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)

Ward 1 Residents for Brianne

37. Full Name, Mailing Address and Zip Code LaTanya Ford 10 Blue Ridge Cir, Scotch Plains, NJ 07076	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Learning Name and Address of Employer Halon 184 Liberty Corner Rd, Warren, NJ 07059		
Aggregate Year-To-date		\$ 40.00	
38. Full Name, Mailing Address and Zip Code Michael Wray 743 Morton St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input checked="" type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation BD Name and Address of Employer CSS Inc. 2750 Prosperity Ave Ste 220, Fairfax, VA 22031		
Aggregate Year-To-date		\$ 250.00	
39. Full Name, Mailing Address and Zip Code Mike DiMarco 5 Missouri Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director Name and Address of Employer Horizons Greater Washington 3000 Cathedral Ave NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 100.00	
40. Full Name, Mailing Address and Zip Code Mandi Wolfes 205 Ascot Pl 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) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Finance Specialist Name and Address of Employer Housing Counseling Services Inc. 205 Ascot Pl NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 50.00	
41. Full Name, Mailing Address and Zip Code Gregory Billing 4905 9th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Transportation Director Name and Address of Employer Georgetown BID 4905 9th St NW, Washington, DC 20011		
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)

Ward 1 Residents for Brianne

42. Full Name, Mailing Address and Zip Code Luke Peterson 1352 Kennedy St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Executive VP Name and Address of Employer Golin 909 3rd Ave, New York, NY 10022		
Aggregate Year-To-date		\$ 250.00	
43. Full Name, Mailing Address and Zip Code Max Brown 455 I St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Group360 455 I St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 500.00	
44. Full Name, Mailing Address and Zip Code Thomas Wells 311 4th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 311 4th St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 100.00	
45. Full Name, Mailing Address and Zip Code Daniel Chao 1698 31st St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Staff Name and Address of Employer U.S. House of Representatives Longworth House Office Building, Washington, DC 20515		
Aggregate Year-To-date		\$ 200.00	
46. Full Name, Mailing Address and Zip Code Amanda Goldblatt 2703 Woodley Rd NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer E3 2703 Woodley Rd NW, Washington, DC 20008		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 500.00	
47. Full Name, Mailing Address and Zip Code Emily Goodstein 4455 Connecticut Ave NW Apt 831, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 4455 Connecticut Ave NW Apt 831, Washington, DC 20008			
		Aggregate Year-To-date	\$ 50.00	
48. Full Name, Mailing Address and Zip Code Brian Schwalb 3728 Kanawha St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Office of the Attorney General 400 6th St NW, Washington, DC 20001			
		Aggregate Year-To-date	\$ 500.00	
49. Full Name, Mailing Address and Zip Code Josh Jacobson 2605 Sherman Ave NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Technical Account Manager Name and Address of Employer Datadog 2605 Sherman Ave NW, Washington, DC 20001			
		Aggregate Year-To-date	\$ 100.00	
50. Full Name, Mailing Address and Zip Code Tracy Loh 5356 43rd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Scholar Name and Address of Employer The Brooking Institution 5356 43rd St NW, Washington, DC 20015			
		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)

Ward 1 Residents for Brianne

51. Full Name, Mailing Address and Zip Code Amanda Fogle-Donmoyer 2038 18th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Team Lead Name and Address of Employer USG 555 12th St NW, Washington, DC 20004	Aggregate Year-To-date \$ 100.00	
52. Full Name, Mailing Address and Zip Code Elisabeth Golub 6123 3rd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer DCPS 659 G St NE, Washington, DC 20002	Aggregate Year-To-date \$ 25.00	
53. Full Name, Mailing Address and Zip Code Elan Bar 755 Newton Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Business Consultant Name and Address of Employer Muchas Gracia 5029 Connecticut Ave NW, Washington, DC 20008	Aggregate Year-To-date \$ 20.00	
54. Full Name, Mailing Address and Zip Code Larry Handerhan 533 U St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Deputy Assistant Secretary Name and Address of Employer Department of Health and Human Services 533 U St NW, Washington, DC 20001	Aggregate Year-To-date \$ 100.00	
55. Full Name, Mailing Address and Zip Code Julie Miller 2370 Champlain St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Mom Name and Address of Employer Self	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)

Ward 1 Residents for Brianne

56. Full Name, Mailing Address and Zip Code David Connerty-Marin 1345 K St SE Unit 303, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Communications Strategist Name and Address of Employer Council of DC 1350 Pennsylvania ave NW, Washington, DC 20004		
Aggregate Year-To-date		\$ 100.00	
57. Full Name, Mailing Address and Zip Code Jon Mandel 2900 Connecticut Ave NW Apt 226, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Bose Public Affairs Group 777 6th St NW Ste 506, Washington, DC 20001		
Aggregate Year-To-date		\$ 500.00	
58. Full Name, Mailing Address and Zip Code Callie Riley 2001 16th St NW Apt 602, 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) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Senior Program Officer Name and Address of Employer Charles and Lynn Schusterman Family Philanthropies 2001 16th St NW Apt 602, Washington, DC 20009		
Aggregate Year-To-date		\$ 100.00	
59. Full Name, Mailing Address and Zip Code Thomas Fazzini 3050 N Paulina St, Chicago, IL 60657	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Communications Director Name and Address of Employer Alliance for the Great Lakes 3050 N Paulina St, Chicago, IL 60657		
Aggregate Year-To-date		\$ 50.00	
60. Full Name, Mailing Address and Zip Code Jen Bristol 129 Varnum St NW # 4, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Senior Communications Director Name and Address of Employer Solar Energy Industries Association 129 Varnum St NW # 4, Washington, DC 20011		
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)

Ward 1 Residents for Brianne

61. Full Name, Mailing Address and Zip Code David Kruger 23018 Ardmore Park Dr, Saint Clair Shores, MI 48081	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation NURSE Name and Address of Employer HFH 23018 Ardmore Park Dr, Saint Clair Shores, MI 48081		
Aggregate Year-To-date		\$ 500.00	
62. Full Name, Mailing Address and Zip Code Thorn Pozin 3014 P St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation ATTNY Name and Address of Employer GMB LLP 3014 P St NW, Washington, DC 20007		
Aggregate Year-To-date		\$ 250.00	
63. Full Name, Mailing Address and Zip Code Tauyna Nesin 10411 Englishman Dr, North Bethesda, MD 20852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 36.00
Contributor Type Individual	Occupation Director Name and Address of Employer Wested 10411 Englishman Dr, North Bethesda, MD 20852		
Aggregate Year-To-date		\$ 36.00	
64. Full Name, Mailing Address and Zip Code Garty Decker 1533 Spring Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation COO Name and Address of Employer Green Finance Authority 1100 15th St NW, Washington, DC 20005		
Aggregate Year-To-date		\$ 100.00	
65. Full Name, Mailing Address and Zip Code Andrea K Nadeau 20942 Country Club Dr, Harper Woods, MI 48225	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Technology Consultant Name and Address of Employer Henry Ford Health 20942 Country Club Dr, Harper Woods, MI 48225		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 500.00
66. Full Name, Mailing Address and Zip Code Krissa Jeffers 619 Kenyon St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Accountant Name and Address of Employer Optoro 619 Kenyon St NW, Washington, DC 20010		
		Aggregate Year-To-date	\$ 25.00
67. Full Name, Mailing Address and Zip Code Adam Eiding 2448 Massachusetts Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008		
		Aggregate Year-To-date	\$ 50.00
68. Full Name, Mailing Address and Zip Code Neil Richardson 1873 Ingleside Ter NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Public servant Name and Address of Employer DC Appleseed 1873 Ingleside Ter NW, Washington, DC 20010		
		Aggregate Year-To-date	\$ 50.00
69. Full Name, Mailing Address and Zip Code Jesse B Rauch 1390 Kenyon St NW Apt 309, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Operations Manager Name and Address of Employer Prince's Trust USA 1390 Kenyon St NW, Washington, DC 20010		
		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)

Ward 1 Residents for Brianne

70. Full Name, Mailing Address and Zip Code Meghan Hopkins 51 Church Hill Dr, Cranston, RI 02920	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Associate Attorney Name and Address of Employer Nixon Peabody LLP 51 Church Hill Dr, Cranston, RI 02920		
Aggregate Year-To-date		\$ 250.00	
71. Full Name, Mailing Address and Zip Code Daniel Hopkins 51 Church Hill Dr, Cranston, RI 02920	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer State of Rhode Island 150 S Main St, Providence, RI 02903		
Aggregate Year-To-date		\$ 250.00	
72. Full Name, Mailing Address and Zip Code Stephen Glaude 50 G St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Executive Name and Address of Employer CNHED 50 G St SW, Washington, DC 20024		
Aggregate Year-To-date		\$ 250.00	
73. Full Name, Mailing Address and Zip Code Valerie Baron 1428 Perry Pl Nw, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Nrde 1428 Perry Pl NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 50.00	
74. Full Name, Mailing Address and Zip Code Lynn French 1124 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) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer Hope and a Home 1236 Columbia Rd NW Lowr Level, Washington, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 500.00
75. Full Name, Mailing Address and Zip Code Santiago Lakatos 965 Florida Ave NW Apt 550, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Analyst Name and Address of Employer Graphika 900 19th St NW, Washington, DC 20006		
		Aggregate Year-To-date	\$ 50.00
76. Full Name, Mailing Address and Zip Code Timothy Tranchilla 766 Columbia Rd NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Diplomat Name and Address of Employer Us department of state 766 Columbia Rd NW, Washington, DC 20001		
		Aggregate Year-To-date	\$ 50.00
77. Full Name, Mailing Address and Zip Code Michelle R Loggins 3636 16th St NW apt B430, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Deputy Committee Direcotor Name and Address of Employer DC Council 1350 Pennsylvania Ave NW, Washington, DC 20004		
		Aggregate Year-To-date	\$ 100.00
78. Full Name, Mailing Address and Zip Code Marwan Rateb 29 Deatrick Dr, Gettysburg, PA 17325	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Amazon 360 Longstreet Dr, Gettysburg, PA 17325		
		Aggregate Year-To-date	\$ 250.00
79. Full Name, Mailing Address and Zip Code Christina Dakin 281 Martis Pl, Mahwah, NJ 07430	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 100.00
80. Full Name, Mailing Address and Zip Code Mary Cheh 4522 30th St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Law Professor Name and Address of Employer GW Law School 720 20th St NW, Washington, DC 20052		
		Aggregate Year-To-date	\$ 250.00
81. Full Name, Mailing Address and Zip Code Emily Zoller 344 Sussex Rd, Wood Ridge, NJ 07075	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Director, Grants Management Name and Address of Employer Smile Train 344 Sussex Rd, Wood Ridge, NJ 07075		
		Aggregate Year-To-date	\$ 25.00
82. Full Name, Mailing Address and Zip Code Christopher Shields 1445 Settlement Dr, Park City, UT 84098	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Vice President of Marketing Name and Address of Employer Double Wood Supplements 205 Elmwood Ave, Sharon Hill, PA 19079		
		Aggregate Year-To-date	\$ 100.00
83. Full Name, Mailing Address and Zip Code Christine Connerty-Marin 1345 K st SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Operations Manager Name and Address of Employer Agricity LLC 1345 K st SE, Washington, DC 20003		
		Aggregate Year-To-date	\$ 100.00
84. Full Name, Mailing Address and Zip Code Meredith MacKenzie 1607 Forest Glen Rd, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Managing Director Name and Address of Employer Roosevelt Institute 570 Lexington Ave Rm 501, New York, NY 10022		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 50.00
85. Full Name, Mailing Address and Zip Code Jonah Goodman 4217 4th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation UX Designer Name and Address of Employer Gartner 1201 Wilson Blvd, Arlington, VA 22209		
		Aggregate Year-To-date	\$ 100.00
86. Full Name, Mailing Address and Zip Code Andy Reynolds 1362 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Senior VP Name and Address of Employer Civix Strategy Group 1362 K St SE, Washington, DC 20003		
		Aggregate Year-To-date	\$ 500.00
87. Full Name, Mailing Address and Zip Code Matthew Furman 4709 Albemarle St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Ward 3 Councilmember Name and Address of Employer District of Columbia 1350 Pennsylvania Ave NW, Washington, DC 20004		
		Aggregate Year-To-date	\$ 250.00
88. Full Name, Mailing Address and Zip Code Joseph Sherwood 600 Water St SW Unit 9-14, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
		Aggregate Year-To-date	\$ 100.00
89. Full Name, Mailing Address and Zip Code Mary Piverger 364 Montgomery St Apt 2B, Brooklyn, NY 11225	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation EA Name and Address of Employer Banyan 101 Crawfords Corner Rd, Holmdel, NJ 07733		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 100.00	
90. Full Name, Mailing Address and Zip Code Joseph Gavrilovich 1414 SE Taylor St, Portland, OR 97214	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Dep Director Name and Address of Employer Habitat for Humanity 1478 NE Killingsworth St, Portland, OR 97211			
		Aggregate Year-To-date	\$ 100.00	
91. Full Name, Mailing Address and Zip Code Kim Kruger 27 Arcadia Dr, North Kingstown, RI 02852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Not Employed			
		Aggregate Year-To-date	\$ 50.00	
92. Full Name, Mailing Address and Zip Code Charles Feerick 6109 Fairlane Dr, Oakland, CA 94611	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Healthcare Name and Address of Employer Clarify 6109 Fairlane Dr, Oakland, CA 94611			
		Aggregate Year-To-date	\$ 100.00	
93. Full Name, Mailing Address and Zip Code Bryan Martin Firvida 510 Regent Pl NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 251.00	
Contributor Type Individual	Occupation Senior Manager Name and Address of Employer ArcheSys, Inc. 1152 15th St NW Ste 800, Washington, DC 20005			
		Aggregate Year-To-date	\$ 251.00	
94. Full Name, Mailing Address and Zip Code Jennifer Kuiper 644 Keefer Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Director Name and Address of Employer NACo 660 N Capitol St NW, Washington, DC 20001			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 250.00
95. Full Name, Mailing Address and Zip Code Matthew Malarkey 428 Hamilton St Nw, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Self Employed Name and Address of Employer Self 428 Hamilton St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 100.00
96. Full Name, Mailing Address and Zip Code Kat Scott 6800 Georgia Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Wiley Rein 6530 5th St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 250.00
97. Full Name, Mailing Address and Zip Code Jim Webb 4904 Arkansas Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Jim Webb Consulting LLC 4904 Arkansas Ave NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 250.00
98. Full Name, Mailing Address and Zip Code Isabella Heyden 2118 Kendall Ave Apt 2, Madison, WI 53726	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Not Employed			
		Aggregate Year-To-date		\$ 50.00
99. Full Name, Mailing Address and Zip Code Ashley Torres 214 East Dr, Hurley, NY 12443	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Commissioner Name and Address of Employer Ulster County board of elections 79 Hurley Ave Ste 112, Kingston, NY 12401			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 100.00
100. Full Name, Mailing Address and Zip Code James Jahnke 10035 Nadine Ave, Huntington Woods, MI 48070	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Communications Name and Address of Employer General dynamics land systems 38500 Mound Rd, Sterling Heights, MI 48310		
		Aggregate Year-To-date	\$ 100.00
101. Full Name, Mailing Address and Zip Code Leah Nadeau 661 Washington Rd, Grosse Pointe, MI 48230	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Artist Name and Address of Employer Self 12217 SE 270th Pl, Kent, WA 98030		
		Aggregate Year-To-date	\$ 500.00
102. Full Name, Mailing Address and Zip Code Rashida Brown 430 Irving St NW Apt 106, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Program Director Name and Address of Employer NACo 660 N Capitol St NW, Washington, DC 20001		
		Aggregate Year-To-date	\$ 50.00
103. Full Name, Mailing Address and Zip Code Bryce Jacobs 1833 Ontario Pl NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Educator Name and Address of Employer Self 1833 Ontario Pl NW, Washington, DC 20009		
		Aggregate Year-To-date	\$ 50.00
104. Full Name, Mailing Address and Zip Code Stefano Negri 1617 Tuckerman St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer Electrify DC 1617 Tuckerman St NW, Washington, DC 20011		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 100.00
105. Full Name, Mailing Address and Zip Code Elliott Becker 1010 Sigsbee Pl NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer n/a 1010 Sigsbee Pl NE, Washington, DC 20017		
		Aggregate Year-To-date	\$ 50.00
106. Full Name, Mailing Address and Zip Code Laura Wilkinson Behrens 1341 Newton St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer QinetiQ US 1800 Tysons Blvd Ste 750, McLean, VA 22102		
		Aggregate Year-To-date	\$ 25.00
107. Full Name, Mailing Address and Zip Code Craig Pascal 1211 S Eads St Apt 1510, Arlington, VA 22202	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
		Aggregate Year-To-date	\$ 100.00
108. Full Name, Mailing Address and Zip Code David Alpert 1769 Church St NW, Washington, DC 20036	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
		Aggregate Year-To-date	\$ 250.00
109. Full Name, Mailing Address and Zip Code Warren Williams 3701 Village Park Dr, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Real Estate Developer Name and Address of Employer The Warrenton Group 4315 50th St NW Ste 100, Washington, DC 20016		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 500.00
110. Full Name, Mailing Address and Zip Code Jason Bargnes 1313 Rhode Island Ave NW Apt C, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Consulting Name and Address of Employer Purple Strategies 810 Slaters Ln, Alexandria, VA 22314			
		Aggregate Year-To-date		\$ 100.00
111. Full Name, Mailing Address and Zip Code Matthias Paustian 1720 UPSHUR ST NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Economist Name and Address of Employer FRB 20th and Constitution Ave NW, Washington, DC 20551			
		Aggregate Year-To-date		\$ 50.00
112. Full Name, Mailing Address and Zip Code Jenilee Keefe Singer 8036 Ellingson Dr, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Policy/Attorney Name and Address of Employer SCSP-AP 1550 Crystal Dr, Arlington, VA 22202			
		Aggregate Year-To-date		\$ 50.00
113. Full Name, Mailing Address and Zip Code Vicky Triponey 1213 Palustrine Ct, Charleston, SC 29414	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Not employed			
		Aggregate Year-To-date		\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

114. Full Name, Mailing Address and Zip Code Kim Scott 12702 Sullivan Ct, Beltsville, MD 20705	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
115. Full Name, Mailing Address and Zip Code Jose Ricardo Romero 130 M St NE Apt 1219, 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) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Senior Support Specialist Name and Address of Employer Wilmerhale 1875 Pennsylvania Ave NW, Washington, DC 20006		
Aggregate Year-To-date		\$ 25.00	
116. Full Name, Mailing Address and Zip Code Will Perkins 4319 3rd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Committee Director Name and Address of Employer Council of DC 717 14th St NW, Washington, DC 20005		
Aggregate Year-To-date		\$ 100.00	
117. Full Name, Mailing Address and Zip Code Kenneth Ames 3411 17th St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 18.00
Contributor Type Individual	Occupation Director of Outreach Name and Address of Employer Fireside21 409 7th St NW Ste 400, Washington, DC 20004		
Aggregate Year-To-date		\$ 18.00	
118. Full Name, Mailing Address and Zip Code Brian Doory 5411 Saint Albans Way, Baltimore, MD 21212	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Managing Director Name and Address of Employer Firehouse Strategies 1501 M St NW Ste 1100, Washington, DC 20005		
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)

Ward 1 Residents for Brianne

119. Full Name, Mailing Address and Zip Code Jesse Achtenberg 4224 4th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Filmmaker Name and Address of Employer The Nature Conservancy 4224 4th St NW, Washington, DC 20011	Aggregate Year-To-date \$ 40.00	
120. Full Name, Mailing Address and Zip Code Jacob Bennett 2707 Adams Mill Rd NW Apt 403, 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) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Advertising Name and Address of Employer M+R 2707 Adams Mill Rd NW Apt 403, Washington, DC 20009	Aggregate Year-To-date \$ 25.00	
121. Full Name, Mailing Address and Zip Code Jordi Hutchinson 635 5th 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) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer Everybody Wins DC 1420 New York Ave NW, Washington, DC 20005	Aggregate Year-To-date \$ 100.00	
122. Full Name, Mailing Address and Zip Code Robert Ward 2930 MACOMB ST NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Uptown Strategies 2930 Macomb St NW, Washington, DC 20008	Aggregate Year-To-date \$ 250.00	
123. Full Name, Mailing Address and Zip Code Charles Allen 635 5th 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) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Councilmember Name and Address of Employer DC Council 1350 Pennsylvania Ave NW, Washington, DC 20004		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 100.00
124. Full Name, Mailing Address and Zip Code Brian Footer 2112 8th St NW Apt 507, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Health Care Consultant Name and Address of Employer KLMG 2112 8th St NW Apt 507, Washington, DC 20001			
		Aggregate Year-To-date		\$ 100.00
125. Full Name, Mailing Address and Zip Code Anne Dammarell 2853 Ontario Rd NW Apt 602, 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) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Not employed			
		Aggregate Year-To-date		\$ 50.00
126. Full Name, Mailing Address and Zip Code Elanor Starmer 3538 Warder St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Program Officer Name and Address of Employer Wyss Foundation 3538 Warder St NW, Washington, DC 20010			
		Aggregate Year-To-date		\$ 100.00
127. Full Name, Mailing Address and Zip Code Andrew Campanella 17301 Biscayne Blvd Apt 1509, North Miami Beach, FL 33160	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Executive Name and Address of Employer NSCAF 18117 Biscayne Blvd PMB 2509, Aventura, FL 33160			
		Aggregate Year-To-date		\$ 500.00
128. Full Name, Mailing Address and Zip Code Hannah Garelick 8916 Fairview Rd, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 18.00	
Contributor Type Individual	Occupation Health Policy Name and Address of Employer Nonprofit 1841 Columbia Rd NW, Washington, DC 20009			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 18.00
129. Full Name, Mailing Address and Zip Code Stuart Kurlander 700 New Hampshire Ave NW Apt 108, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Latham & Watkins 555 11th St NW Ste 1000, Washington, DC 20004			
		Aggregate Year-To-date		\$ 100.00
130. Full Name, Mailing Address and Zip Code Kory Stuer 2013 New Hampshire Ave 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) 03/02/2024	Amount of Each Receipt This Period \$ 5.00	
Contributor Type Individual	Occupation Nonprofit Name and Address of Employer American College of Physicians 25 Massachusetts Ave NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 5.00
131. Full Name, Mailing Address and Zip Code Ruth Silverman 104 Taplow Rd, Baltimore, MD 21212	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Not Employed			
		Aggregate Year-To-date		\$ 100.00
132. Full Name, Mailing Address and Zip Code Alice Frumin 241 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation CRM Developer Name and Address of Employer Agh strategies 5509 Colorado Ave NW, Washington, DC 20011			
		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)

Ward 1 Residents for Brianne

133. Full Name, Mailing Address and Zip Code Kristen Lucas 1609 Allison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Nonprofit Operations Name and Address of Employer ProInspire 3118 Washington Blvd # 101256, Arlington, VA 22210		
Aggregate Year-To-date			\$ 100.00
134. Full Name, Mailing Address and Zip Code John Zottoli 3025 Ontario Rd NW Apt 504, 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) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Contractor Name and Address of Employer Self employed 3025 Ontario Rd NW Apt 504, Washington, DC 20009		
Aggregate Year-To-date			\$ 50.00
135. Full Name, Mailing Address and Zip Code Keith Goodman 3932 NE 11th Ave, Portland, OR 97212	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 3932 NE 11th Ave, Portland, OR 97212		
Aggregate Year-To-date			\$ 50.00
136. Full Name, Mailing Address and Zip Code Michelle Feit 502 Loudon Ct, Silver Spring, MD 20901	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Director of Cong. Relations Name and Address of Employer National Partnership for Women & Families 1875 Connecticut Ave NW Ste 605, Washington, DC 20009		
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)

Ward 1 Residents for Brianne

137. Full Name, Mailing Address and Zip Code Cheryl Cort 1438 Florida Ave 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) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Policy Director Name and Address of Employer Coalition for Smarter Growth 1438 Florida Ave NW, Washington, DC 20009		
Aggregate Year-To-date		\$ 50.00	
138. Full Name, Mailing Address and Zip Code Geoffrey Landers-Nolan 311 Chadham Ct, Bellefonte, PA 16823	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Counselor Name and Address of Employer Forward Path Counseling 253 Easterly Pkwy, State College, PA 16801		
Aggregate Year-To-date		\$ 10.00	
139. Full Name, Mailing Address and Zip Code Lara Ho 1443 Chapin St NW Unit 204, 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) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Healthcare Name and Address of Employer DuPont Clinic 1443 Chapin St NW Unit 204, Washington, DC 20009		
Aggregate Year-To-date		\$ 25.00	
140. Full Name, Mailing Address and Zip Code Jason Bargnes 1322 15th St NW Apt B3, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consulting Name and Address of Employer Purple Strategies 810 Slaters Ln, Alexandria, VA 22314		
Aggregate Year-To-date		\$ 100.00	
141. Full Name, Mailing Address and Zip Code Ruth Wattenberg 4129 Harrison St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self employed Name and Address of Employer Self 4129 Harrison St NW, Washington, DC 20015		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 100.00
142. Full Name, Mailing Address and Zip Code Lena Frumin 4709 Albemarle St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation not employed Name and Address of Employer not employed 4709 Albemarle St NW, Washington, DC 20016		
		Aggregate Year-To-date	\$ 100.00
143. Full Name, Mailing Address and Zip Code Christine Broderick 411A E Howell Ave, Alexandria, VA 22301	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Engagement Officer Name and Address of Employer PCORI 1333 New Hampshire Ave NW, Washington, DC 20036		
		Aggregate Year-To-date	\$ 200.00
144. Full Name, Mailing Address and Zip Code Keith Krivitzky 325 Bath Ave Apt 8, Long Branch, NJ 07740	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 675 Ocean Ave Apt 6N, Long Branch, NJ 07740		
		Aggregate Year-To-date	\$ 100.00
145. Full Name, Mailing Address and Zip Code Radim Dragomaca 1200 N Nash St Apt 253, Arlington, VA 22209	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation VP Name and Address of Employer Whistleblower Aid 1200 N Nash St Apt 253, Arlington, VA 22209		
		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)

Ward 1 Residents for Brianne

146. Full Name, Mailing Address and Zip Code Peter Orveti 3526 11th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Editor Name and Address of Employer Self employed 3526 11th St NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 25.00	
147. Full Name, Mailing Address and Zip Code Dyana Forester 1118 45th Pl SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Adminstrative Name and Address of Employer Calibre 1118 45th Pl SE, Washington, DC 20019		
Aggregate Year-To-date		\$ 50.00	
148. Full Name, Mailing Address and Zip Code Rachel Kronowitz 3307 Rittenhouse St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3307 Rittenhouse St NW, Washington, DC 20015		
Aggregate Year-To-date		\$ 250.00	
149. Full Name, Mailing Address and Zip Code Belinda Childs 11010 W 16th St N, Wichita, KS 67212	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Aprn Name and Address of Employer Great Plains Diabetes 11010 W 16th St N, Wichita, KS 67212		
Aggregate Year-To-date		\$ 100.00	
150. Full Name, Mailing Address and Zip Code Gregory Mccarthy 1334 Riggs ST NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Executive Name and Address of Employer Washington Nationals 1500 S Capitol St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 200.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

151. Full Name, Mailing Address and Zip Code Timothy Rechten 704 Brier St, Kenilworth, IL 60043	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Fundraiser Name and Address of Employer Hazleton Betty Ford 704 Brier St, Kenilworth, IL 60043		
Aggregate Year-To-date		\$ 50.00	
152. Full Name, Mailing Address and Zip Code David Marlin 2101 Connecticut Ave NW # NW-34, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation not employed Name and Address of Employer not employed 2101 Connecticut Ave NW # NW-34, Washington, DC 20008		
Aggregate Year-To-date		\$ 100.00	
153. Full Name, Mailing Address and Zip Code Kathryn Tilley 809 Otis Pl NW Apt 2, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer PotomacWave Consulting, Inc. 1725 Duke St Ste 320, Alexandria, VA 22314		
Aggregate Year-To-date		\$ 250.00	
154. Full Name, Mailing Address and Zip Code Gail Montplaisir 1454 Belmont St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Self Employed Name and Address of Employer Self 1341 H St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 250.00	
155. Full Name, Mailing Address and Zip Code Jason Ziedenberg 780 Irving St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Researcher Name and Address of Employer DC Justice Lab 1200 U St NW, Washington, DC 20009		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 100.00
156. Full Name, Mailing Address and Zip Code Robert White 1601 Holly St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input checked="" type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Councilmember Name and Address of Employer Council of the District of Columbia 1601 Holly St NW, Washington, DC 20012		
		Aggregate Year-To-date	\$ 100.00
157. Full Name, Mailing Address and Zip Code Ahmad Abu Khalaf 33 N St NE Apt 1109, 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) 03/02/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Senior research analyst Name and Address of Employer ECP 10 G St NE, Washington, DC 20002		
		Aggregate Year-To-date	\$ 51.00
158. Full Name, Mailing Address and Zip Code Daniel Passon 1514 Newton St NW Apt 302, Washington, DC 20010-3133	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed 1514 Newton St NW Apt 302, Washington, DC 20010		
		Aggregate Year-To-date	\$ 25.00
159. Full Name, Mailing Address and Zip Code Timothy ODonnell 8 Holden Ct, Marlton, NJ 08053	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Murphy Sanchez 309 Fellowship Rd, Mount Laurel, NJ 08054		
		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)

Ward 1 Residents for Brianne

160. Full Name, Mailing Address and Zip Code Adam Pulver 1729 Irving St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Public Citizen 1600 20th St NW, Washington, DC 20009		
Aggregate Year-To-date		\$ 20.00	
161. Full Name, Mailing Address and Zip Code Allison Barr 1550 7th St NW Apt 521, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation COO Name and Address of Employer ELSF 1550 7th St NW Apt 628, Washington, DC 20001		
Aggregate Year-To-date		\$ 15.00	
162. Full Name, Mailing Address and Zip Code Christine Beebe 1205 Pacific Hwy, San Diego, CA 92101	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation not employed Name and Address of Employer not employed 1205 Pacific Hwy, San Diego, CA 92101		
Aggregate Year-To-date		\$ 50.00	
163. Full Name, Mailing Address and Zip Code Meghan Moorhouse 1904 Claremont Ave, Norfolk, VA 23507	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation College Advisor Name and Address of Employer Meghan Moorhouse 1904 Claremont Ave, Norfolk, VA 23507		
Aggregate Year-To-date		\$ 100.00	
164. Full Name, Mailing Address and Zip Code Joanna Blotner 626 S St NW Apt 101, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lobbyist Name and Address of Employer DC Action 626 S St NW, Washington, DC 20001		
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)

Ward 1 Residents for Brianne

165. Full Name, Mailing Address and Zip Code Dave Stroup 713 Lamont St NW Unit 420, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lecturer Name and Address of Employer Howard University 2400 6th St NW, Washington, DC 20059	Aggregate Year-To-date \$ 500.00	
166. Full Name, Mailing Address and Zip Code Sekou Biddle 7605 13th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer UNCF 1805 7th St NW, Washington, DC 20001	Aggregate Year-To-date \$ 100.00	
167. Full Name, Mailing Address and Zip Code Peggy Upmeyer 600 Washington Rd, Grosse Pointe, MI 48230	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation retired Name and Address of Employer retired	Aggregate Year-To-date \$ 100.00	
168. Full Name, Mailing Address and Zip Code Rebecca Reina 406 U St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Host Name and Address of Employer All Purpose Pizzeria 1250 9th St NW, Washington, DC 20001	Aggregate Year-To-date \$ 50.00	
169. Full Name, Mailing Address and Zip Code Alex Dodds 1520 Buchanan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Digital Strategist Name and Address of Employer Self Employed 1520 Buchanan St NW, Washington, DC 20011	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)

Ward 1 Residents for Brianne

170. Full Name, Mailing Address and Zip Code Mindy Moretti 2630 Adams Mill Rd NW Unit 208, 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) 03/03/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Writer/Editor Name and Address of Employer National Association of Election Officials 21946 Royal Montreal Dr Ste 100, Katy, TX 77450		
Aggregate Year-To-date		\$ 51.00	
171. Full Name, Mailing Address and Zip Code Hena Schommer 609 Jefferson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Applied Materials 609 Jefferson St NE, Washington, DC 20011		
Aggregate Year-To-date		\$ 250.00	
172. Full Name, Mailing Address and Zip Code Arrington Dixon 2401 Shannon Pl 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) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Businessman Name and Address of Employer ADAInc 2401 Shannon Pl SE, Washington, DC 20020		
Aggregate Year-To-date		\$ 50.00	
173. Full Name, Mailing Address and Zip Code Sejal Makim 202 Elm St SW, Vienna, VA 22180	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Finance Name and Address of Employer Cambrex 202 Elm St SW, Vienna, VA 22180		
Aggregate Year-To-date		\$ 50.00	
174. Full Name, Mailing Address and Zip Code Lauren Barsanti 202 M St, Boston, MA 02127	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Hospital Admin Name and Address of Employer MGH 202 M St, Boston, MA 02127		
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)

Ward 1 Residents for Brianne

175. Full Name, Mailing Address and Zip Code Tania Jackson 3128 Sherman Ave NW Apt 8, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 3128 Sherman Ave NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 50.00	
176. Full Name, Mailing Address and Zip Code Josiah Stevenson 1240 3rd 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) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Senior Analyst Name and Address of Employer Capital Bank NA 1240 3rd St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 250.00	
177. Full Name, Mailing Address and Zip Code Katharine Landfield 5112 38th St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Advocate Name and Address of Employer Fair Budget Coalition 5112 38th St NW, Washington, DC 20016		
Aggregate Year-To-date		\$ 100.00	
178. Full Name, Mailing Address and Zip Code Aviva Simonte 5611 Cedar Ridge Dr, Ann Arbor, MI 48103	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Marketing Name and Address of Employer Corcept 5611 Cedar Ridge Dr, Ann Arbor, MI 48103		
Aggregate Year-To-date		\$ 100.00	
179. Full Name, Mailing Address and Zip Code Jay Haddock 509 H St SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Carlos Rosario 509 H St SW, Washington, DC 20024		
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)

Ward 1 Residents for Brianne

180. Full Name, Mailing Address and Zip Code Donna Peterson 9085 Alverno Ave, Inver Grove Heights, MN 55077	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation retired Name and Address of Employer retired		
Aggregate Year-To-date		\$ 250.00	
181. Full Name, Mailing Address and Zip Code Sally Greenberg 5354 42nd Pl NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation CEO Name and Address of Employer NCL 624 Lamont St NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 100.00	
182. Full Name, Mailing Address and Zip Code Patrick Boynton 1401 S St NW Apt 501, 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) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Venable LLP 1401 S St NW Apt 501, Washington, DC 20009		
Aggregate Year-To-date		\$ 50.00	
183. Full Name, Mailing Address and Zip Code Don Squires 1546 Hemlock St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation not employed Name and Address of Employer not employed		
Aggregate Year-To-date		\$ 100.00	
184. Full Name, Mailing Address and Zip Code Aaron K Myers 3349 18th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Artist Name and Address of Employer Self 3349 18th St NW, Washington, DC 20010		
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)

Ward 1 Residents for Brianne

185. Full Name, Mailing Address and Zip Code Laura Marks 1005 1st 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) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation AVP Name and Address of Employer American University 4400 Massachusetts Ave NW, Washington, DC 20016		
Aggregate Year-To-date		\$ 100.00	
186. Full Name, Mailing Address and Zip Code Elizabeth Furgurson 624 Lamont St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation NGO Name and Address of Employer ASH 624 Lamont St NW, Washington, DC 20010		
Aggregate Year-To-date		\$ 100.00	
187. Full Name, Mailing Address and Zip Code Keith Ivey 3801 Connecticut Ave NW Apt 425, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 3801 Connecticut Ave NW Apt 425, Washington, DC 20008		
Aggregate Year-To-date		\$ 100.00	
188. Full Name, Mailing Address and Zip Code Claudia Schlossberg 3305 18th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Castle Hill Consulting LLC Name and Address of Employer Consultant 3305 18th St NW, Washington, DC 20010		
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)

Ward 1 Residents for Brianne

189. Full Name, Mailing Address and Zip Code Valerie Meuleners 1178 Bandy Run Rd, Herndon, VA 20170	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Legal Name and Address of Employer Cisco 1178 Bandy Run Rd, Herndon, VA 20170		
Aggregate Year-To-date			\$ 100.00
190. Full Name, Mailing Address and Zip Code Charlotte Gregory 601 Henry Clay Ave, New Orleans, LA 70118	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer MPCSS 601 Henry Clay Ave, New Orleans, LA 70118		
Aggregate Year-To-date			\$ 50.00
191. Full Name, Mailing Address and Zip Code Morgan Lavan 1419 Clifton St NW Apt 305, 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) 03/03/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Federal Government 1419 Clifton St NW, Washington, DC 20009		
Aggregate Year-To-date			\$ 10.00
192. Full Name, Mailing Address and Zip Code Rebecca Goodstein 5335 5th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Patagonia 5335 5th St NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 50.00
193. Full Name, Mailing Address and Zip Code Sarah Garfinkel 105 Victorian Oaks Dr, Durham, NC 27713	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer West End Strategy Team 105 Victorian Oaks Dr, Durham, NC 27713		
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)

Ward 1 Residents for Brianne

194. Full Name, Mailing Address and Zip Code Andria Thomas 1531 Massachusetts Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Chief Product Officer Name and Address of Employer Finklocker 1600 Capital One Dr, Mc Lean, VA 22102		
Aggregate Year-To-date		\$ 50.00	
195. Full Name, Mailing Address and Zip Code Beatriz Otero 1769 Lanier Pl NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation SA Name and Address of Employer MCG 101 Monroe St, Rockville, MD 20850		
Aggregate Year-To-date		\$ 50.00	
196. Full Name, Mailing Address and Zip Code Ian Paregol 4080 Roxmill Ct, Glenwood, MD 21738	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Executive Name and Address of Employer Self 4080 Roxmill Ct, Glenwood, MD 21738		
Aggregate Year-To-date		\$ 100.00	
197. Full Name, Mailing Address and Zip Code Marc Friend 611 18th 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) 03/03/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Congressional Relations Name and Address of Employer The Peace Corps 1275 1st St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 10.00	
198. Full Name, Mailing Address and Zip Code Jerome Paige 1691 Tamarack St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Economist Name and Address of Employer Jerome S. Page and Associates 1691 Tamarack St NW, Washington, DC 20012		
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)

Ward 1 Residents for Brianne

199. Full Name, Mailing Address and Zip Code Nandini Pillai 2223 Perry St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Public Health Name and Address of Employer RTI International 701 13th St NW, Washington, DC 20005	Aggregate Year-To-date \$ 50.00	
200. Full Name, Mailing Address and Zip Code Karl Protil 16231 Whitehaven Rd, Silver Spring, MD 20906	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer ShulmanRogers PC 16231 Whitehaven Rd, Silver Spring, MD 20906	Aggregate Year-To-date \$ 500.00	
201. Full Name, Mailing Address and Zip Code Andreas Wiede 3507 17th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Software Engineer Name and Address of Employer Affirm 650 California St, San Francisco, CA 94108	Aggregate Year-To-date \$ 25.00	
202. Full Name, Mailing Address and Zip Code David Bernay 6011 San Paublo Ct, Austin, TX 78749	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation University Admin Name and Address of Employer St. Edward's University 6011 San Paublo Ct, Austin, TX 78749	Aggregate Year-To-date \$ 50.00	
203. Full Name, Mailing Address and Zip Code David Kusnet 4129 Harrison St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Writer Name and Address of Employer APCO 4129 Harrison St NW, Washington, DC 20015	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)

Ward 1 Residents for Brianne

204. Full Name, Mailing Address and Zip Code Zachary Israel 717 Gallatin St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Consulting Name and Address of Employer The Ferguson Group LLC 1901 Pennsylvania Ave NW Ste 700, Washington, DC 20006		
Aggregate Year-To-date		\$ 51.00	
205. Full Name, Mailing Address and Zip Code Lisa Rucker 1446 Belmont St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self Name and Address of Employer Self 1446 Belmont St NW, Washington, DC 20009		
Aggregate Year-To-date		\$ 100.00	
206. Full Name, Mailing Address and Zip Code Jesse Rabinowitz 2412 17th St NW Unit C03, 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) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Communications Director Name and Address of Employer National Homelessness Law Center 1400 16th St NW, Washington, DC 20036		
Aggregate Year-To-date		\$ 50.00	
207. Full Name, Mailing Address and Zip Code Barbara Weiss 817 Bonifant St, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Analyst Name and Address of Employer Government 817 Bonifant St, Silver Spring, MD 20910		
Aggregate Year-To-date		\$ 20.00	
208. Full Name, Mailing Address and Zip Code Leslie Sargent 743 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation School Counselor Name and Address of Employer DCPS 743 Varnum St NW, Washington, DC 20011		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 25.00
209. Full Name, Mailing Address and Zip Code Sarah Saylor 9440 Evan Miller Trl, Olmsted Twp, OH 44138	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Contractor Name and Address of Employer Self 9440 Evan Miller Trl, Olmsted Falls, OH 44138		
		Aggregate Year-To-date	\$ 50.00
210. Full Name, Mailing Address and Zip Code Nazgol Ghandnoosh 1735 11th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Researcher Name and Address of Employer The Sentencing Project 1308 Clifton St NW Apt 516, Washington, DC 20009		
		Aggregate Year-To-date	\$ 50.00
211. Full Name, Mailing Address and Zip Code Christine Stone 437 Grant St Fl 14, Pittsburgh, PA 15219	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Community Volunteer/Mother Name and Address of Employer None 437 Grant St Fl 14, Pittsburgh, PA 15219		
		Aggregate Year-To-date	\$ 100.00
212. Full Name, Mailing Address and Zip Code Stacy Burnette 1312 Rittenhouse St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Comcast 4506 New Hampshire Ave NW, Washington, DC 20011		
		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)

Ward 1 Residents for Brianne

213. Full Name, Mailing Address and Zip Code Julie Lawson 6548 Eastern Ave NE, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Program Analyst Name and Address of Employer DC Gov 1200 1st St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 50.00	
214. Full Name, Mailing Address and Zip Code Kevin Ballie 1620 29th St SE Apt 203, 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) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Manager Name and Address of Employer NARAL Pro-Choice America 1156 15th St NW Ste 700, Washington, DC 20005		
Aggregate Year-To-date		\$ 50.00	
215. Full Name, Mailing Address and Zip Code Jeremy Sherman 1309 Park Rd NW Apt 1, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 49.00
Contributor Type Individual	Occupation Director Name and Address of Employer ADL 1309 Park Rd NW Apt 1, Washington, DC 20010		
Aggregate Year-To-date		\$ 49.00	
216. Full Name, Mailing Address and Zip Code Mikel Weidman 756 Lamont St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer DC Public Defender Service 633 3rd St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 50.00	
217. Full Name, Mailing Address and Zip Code Michael Sager 903 Ramsey St, Alexandria, VA 22301	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self Name and Address of Employer Self 903 Ramsey St, Alexandria, VA 22301		
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)

Ward 1 Residents for Brianne

218. Full Name, Mailing Address and Zip Code Michael Whelan 30 Langdon St Apt 7, Cambridge, MA 02138	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation not employed Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 50.00
219. Full Name, Mailing Address and Zip Code Nanci Bolton 90 Kercheval Ave, Grosse Pointe, MI 48236	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Bolton Johnston 90 Kercheval Ave, Grosse Pointe, MI 48236		
Aggregate Year-To-date			\$ 50.00
220. Full Name, Mailing Address and Zip Code Allison Kokkoros 4750 41st St NW Apt 302, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Education Name and Address of Employer Carolos Rosario 4750 41st St NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 250.00
221. Full Name, Mailing Address and Zip Code Robin Sandenburgh 1651 Newton St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 100.00
222. Full Name, Mailing Address and Zip Code Geraldine Thompson Mayes 1319 Wallach Pl NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed		
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)

Ward 1 Residents for Brianne

223. Full Name, Mailing Address and Zip Code Roger Clark 1415 Montague St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney		
	Name and Address of Employer Squire Patton Boggs 2550 M St NW, Washington, DC 20037		
Aggregate Year-To-date			\$ 100.00
224. Full Name, Mailing Address and Zip Code Emily Roderer 152 Thomas St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation not employed		
	Name and Address of Employer not employed		
Aggregate Year-To-date			\$ 25.00
225. Full Name, Mailing Address and Zip Code Rehana Mohammed 1528 T St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Manager		
	Name and Address of Employer USAC 700 12th St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 50.00
226. Full Name, Mailing Address and Zip Code Avigail Goldgraber 1099 22nd St NW Apt 802, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Consultant		
	Name and Address of Employer Accenture 800 N Glebe Rd, Arlington, VA 22203		
Aggregate Year-To-date			\$ 500.00
227. Full Name, Mailing Address and Zip Code Jacob Bournazian 1425 4th St SW Apt A808, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Realtor		
	Name and Address of Employer Self 1425 4th St SW Apt A808, Washington, DC 20024		
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)

Ward 1 Residents for Brianne

228. Full Name, Mailing Address and Zip Code Philip H Mendelson 1239 E St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Council Chairman		
Name and Address of Employer DC Council 1350 Pennsylvania Ave NW, Washington, DC 20004			
Aggregate Year-To-date			\$ 250.00
229. Full Name, Mailing Address and Zip Code Sharon Barr 15322 Manor Village Ln, Rockville, MD 20853	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation not employed		
Name and Address of Employer not employed			
Aggregate Year-To-date			\$ 100.00
230. Full Name, Mailing Address and Zip Code Ari Geller 1435 Chapin St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Strategic Communications		
Name and Address of Employer Self 1435 Chapin St NW, Washington, DC 20009			
Aggregate Year-To-date			\$ 50.00
231. Full Name, Mailing Address and Zip Code Lori Zurvalec 670 Washington Rd, Grosse Pointe, MI 48230	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation not employed		
Name and Address of Employer not employed			
Aggregate Year-To-date			\$ 50.00
232. Full Name, Mailing Address and Zip Code Parker McCarthy 4818 9th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Real Estate		
Name and Address of Employer Self 4818 9th St NW, Washington, DC 20011			
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

233. Full Name, Mailing Address and Zip Code Kevin Stogner 2001 12th St NW Apt 204, 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) 03/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Potomac Law Group 1717 Pennsylvania Ave NW Ste 1025, Washington, DC 20006		
Aggregate Year-To-date		\$ 100.00	
234. Full Name, Mailing Address and Zip Code Shannon E Straw 1123 N Marion St, Oak Park, IL 60302	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Communications Consultant Name and Address of Employer West End Strategy Team 1123 N Marion St, Oak Park, IL 60302		
Aggregate Year-To-date		\$ 50.00	
235. Full Name, Mailing Address and Zip Code Amy Austin 2031 Rosemount Ave NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Theatre Washington 641 D St NW, Washington, DC 20004		
Aggregate Year-To-date		\$ 50.00	
236. Full Name, Mailing Address and Zip Code Rachel Usdan 5411 Albemarle Ave, Pittsburgh, PA 15217	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Nonprofit Name and Address of Employer Peace for DC 2030 Q St NW, Washington, DC 20009		
Aggregate Year-To-date		\$ 50.00	
237. Full Name, Mailing Address and Zip Code Monika Nemeth 3652 Alton Pl NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Project Mangaer Name and Address of Employer Peraton 12975 Worldgate Dr, Herndon, VA 20170		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 50.00
238. Full Name, Mailing Address and Zip Code Joelle Novey 7981 Eastern Ave, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Nonprofit Director Name and Address of Employer Interfaith Council of Metropolitan Washington 7981 Eastern Ave, Silver Spring, MD 20910		
		Aggregate Year-To-date	\$ 25.00
239. Full Name, Mailing Address and Zip Code Rashad Young 6326 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation University Administrator Name and Address of Employer Howard University 2400 6th St NW, Washington, DC 20059		
		Aggregate Year-To-date	\$ 250.00
240. Full Name, Mailing Address and Zip Code Kyle Groetzinger 1825 7th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Communications Manager Name and Address of Employer National Parks Conservation Association 777 6th St NW, Washington, DC 20001		
		Aggregate Year-To-date	\$ 25.00
241. Full Name, Mailing Address and Zip Code Ben Somberg 4107 5th St NW Apt 1, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Publicist Name and Address of Employer American Council for an Energy-Efficient Economy 529 14th St NW Ste 600, Washington, DC 20045		
		Aggregate Year-To-date	\$ 200.00
242. Full Name, Mailing Address and Zip Code Chelsea Schein 626 Kennebec Ave, Takoma Park, MD 20912	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Researcher Name and Address of Employer Veris Insights 1201 Connecticut Ave NW, Washington, DC 20036		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 25.00
243. Full Name, Mailing Address and Zip Code Ben Williams 1308 W St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer Capital City 100 Peabody St NW, Washington, DC 20011		
		Aggregate Year-To-date	\$ 25.00
244. Full Name, Mailing Address and Zip Code Stephen Lanning 1736 Columbia Rd NW Apt 101, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed		
		Aggregate Year-To-date	\$ 50.00
245. Full Name, Mailing Address and Zip Code Ryan O'Leary 1665 Lamont St NW Apt 6B, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Strategic Researcher Name and Address of Employer International Union of Bricklayers and Allied Craftworkers 620 F St NW, Washington, DC 20004		
		Aggregate Year-To-date	\$ 50.00
246. Full Name, Mailing Address and Zip Code Elissa Silverman 692 4th 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) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Government Name and Address of Employer Maryland Department of Labor		
		Aggregate Year-To-date	\$ 100.00
247. Full Name, Mailing Address and Zip Code W Jean Homza 26 Seaton Pl NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Community Liaison Name and Address of Employer 9:30 Club 815 V St NW, Washington, DC 20001		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date	\$ 150.00
248. Full Name, Mailing Address and Zip Code Aaron Keyak 1099 22nd St NW Apt 802, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Government Name and Address of Employer US State Department 2201 C St NW, Washington, DC 20520		
		Aggregate Year-To-date	\$ 500.00
249. Full Name, Mailing Address and Zip Code Yael Nagar 1510 Park Rd NW Apt 3, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 36.00
Contributor Type Individual	Occupation Regional Portfolio Manager Name and Address of Employer USADF 1400 I St NW Ste 1000, Washington, DC 20005		
		Aggregate Year-To-date	\$ 36.00
250. Full Name, Mailing Address and Zip Code Alexa August 8000 Crianza Pl Apt 133, Vienna, VA 22182	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self Employed 9841 Washingtonian Blvd Ste 200, Gaithersburg, MD 20878		
		Aggregate Year-To-date	\$ 50.00
251. Full Name, Mailing Address and Zip Code James Knight 5713 Sherier Pl NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Jubilee Housing 1631 Euclid St NW # P-5, Washington, DC 20009		
		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)

Ward 1 Residents for Brianne

252. Full Name, Mailing Address and Zip Code Kate McGloon 6005 Cromwell Dr, Bethesda, MD 20816	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 25.00	
253. Full Name, Mailing Address and Zip Code William McCarthy 54 Sandy Valley Rd, Marstons Mills, MA 02648	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Nonprofit Leader Name and Address of Employer AppleTree Institute for Education Innovation 1801 Mississippi Ave SE, Washington, DC 20020		
Aggregate Year-To-date		\$ 50.00	
254. Full Name, Mailing Address and Zip Code Daniel Maurer 1308 Clifton St NW Apt 118, 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) 03/04/2024	Amount of Each Receipt This Period \$ 36.00
Contributor Type Individual	Occupation Director of Government Affairs Name and Address of Employer Communications Workers of American 501 3rd St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 36.00	
255. Full Name, Mailing Address and Zip Code Jill Lewis 2712 Webster Ave S, Minneapolis, MN 55416	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Communicatinos Name and Address of Employer U.S. Bank 800 Nicollet Mall, Minneapolis, MN 55402		
Aggregate Year-To-date		\$ 25.00	
256. Full Name, Mailing Address and Zip Code Rachel Feinstein 1216 D St SE Apt 3, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director of DC Gov't and Community Relat Name and Address of Employer Jewish Community Relations Council of Greater Washington 6101 Executive Blvd Ste 300, Rockville, MD 20852		
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)

Ward 1 Residents for Brianne

257. Full Name, Mailing Address and Zip Code Alan Ronkin 8866 Woodland Dr, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation NonProfit		
Name and Address of Employer AJC 1156 15th St NW Fl 11, Washington, DC 20005			
Aggregate Year-To-date			\$ 50.00
258. Full Name, Mailing Address and Zip Code Levonnia Jeanne Mobley 3725 17th St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed		
Name and Address of Employer Not Employed 3725 17th St NE, Washington, DC 20018			
Aggregate Year-To-date			\$ 50.00
259. Full Name, Mailing Address and Zip Code Eli Dickinson 4118 Garrison St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation CTO		
Name and Address of Employer industrydive 4118 Garrison St NW, Washington, DC 20016			
Aggregate Year-To-date			\$ 100.00
260. Full Name, Mailing Address and Zip Code Jim Nolan 502 Orlando Ave, State College, PA 16803	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not employed		
Name and Address of Employer Not employed 502 Orlando Ave, State College, PA 16803			
Aggregate Year-To-date			\$ 25.00
261. Full Name, Mailing Address and Zip Code Vikram Swaruup 1258 Columbia Rd NW Unit 1, 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) 03/04/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Executive Director		
Name and Address of Employer Legal Aid DC 1331 H St NW Ste 350, Washington, DC 20005			
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)

Ward 1 Residents for Brianne

262. Full Name, Mailing Address and Zip Code Melinda McLellan 100 Windwood Pointe, Saint Clair Shores, MI 48080	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not employed Name and Address of Employer Not employed 100 Windwood Pointe, Saint Clair Shores, MI 48080		
Aggregate Year-To-date		\$ 50.00	
263. Full Name, Mailing Address and Zip Code Lindsay Pollack 5018 12th St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Senior Operations Manager Name and Address of Employer Chemonics International 1275 New Jersey Ave SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 50.00	
264. Full Name, Mailing Address and Zip Code Jacob Feinspan 10928 Horde St, Silver Spring, MD 20902	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Director Name and Address of Employer Jews United for Justice 10928 Horde St, Silver Spring, MD 20902		
Aggregate Year-To-date		\$ 50.00	
265. Full Name, Mailing Address and Zip Code Caroline O'Shea 415 W 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) 03/04/2024	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation nonprofit manager Name and Address of Employer National Committee for Responsive Philanthropy 1900 L St NW Ste 825, Washington, DC 20036		
Aggregate Year-To-date		\$ 20.00	
266. Full Name, Mailing Address and Zip Code David Haynes 3301 N Albemarle St, Arlington, VA 22207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer The Cochran Firm 1666 K St NW Ste 1150, Washington, DC 20006		
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)

Ward 1 Residents for Brianne

267. Full Name, Mailing Address and Zip Code Victoria Leonard 9207 Mintwood St, Silver Spring, MD 20901	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Strategic Consultant Name and Address of Employer Self 9207 Mintwood St, Silver Spring, MD 20901		
Aggregate Year-To-date			\$ 100.00
268. Full Name, Mailing Address and Zip Code Allison Fisher 2910 Georgia Ave NW Apt C03, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Campaigner Name and Address of Employer Oxfam America 1101 17th St NW Ste 1300, Washington, DC 20036		
Aggregate Year-To-date			\$ 100.00
269. Full Name, Mailing Address and Zip Code Jason Bargnes 1322 15th St NW Apt B3, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 101.00
Contributor Type Individual	Occupation Consulting Name and Address of Employer Purple Strategies 810 Slaters Ln, Alexandria, VA 22314		
Aggregate Year-To-date			\$ 201.00
270. Full Name, Mailing Address and Zip Code Beth Blacklow 4912 3rd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Educator Name and Address of Employer Montgomery County Public Schools 4912 3rd St NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 30.00
271. Full Name, Mailing Address and Zip Code Timothy Book 255 N Washington St Apt 649, Rockville, MD 20850	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Data Scientist Name and Address of Employer General Assembly, Inc. 255 N Washington St Apt 649, Rockville, MD 20850		
Aggregate Year-To-date			\$ 50.00

TOTAL This Period (Aggregate of all Receipt pages)

\$ 41,838.00

REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

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

Ward 1 Residents for Brianne

1. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
Jason Bargnes 1322 15th St NW Apt B3, Washington, DC 20005		03/04/2024	\$ 100.00
Contributor Type Individual			
2. Full Name, Mailing Address and Zip Code Jason Bargnes 1313 Rhode Island Ave NW Apt C, Washington, DC 20005		03/04/2024	\$ 100.00
Contributor Type Individual			
3. Full Name, Mailing Address and Zip Code David Haynes 3301 N Albemarle St, Arlington, VA 22207		03/04/2024	\$ 500.00
Contributor Type Individual			

TOTAL This Period (Aggregate of all expenditure pages)

\$ 700.00