



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) <b>Ward 1 Residents for Brianne</b>	2. OCF Identification Number <b>RECOTH246677</b>
Address <b>619 Lamont Street, NW</b>	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code <b>Washington, DC 20010</b>	

4. TYPE OF REPORT: **July 31st Report**

This REPORT contains activity for: **Not Applicable**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period <b>2/1/2024</b> through <b>7/31/2024</b>		
6. (a) Cash on Hand (January 31 Year End Report Only)		<b>\$ 0.00</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>\$ 41,138.00</b>	
(c) Total Receipts [from Line (16)]	<b>\$ 50,924.00</b>	<b>\$ 92,762.00</b>
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	<b>\$ 92,062.00</b>	
7. Total Expenditures (from Line 22)	<b>\$ 47,105.39</b>	<b>\$ 47,805.39</b>
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	<b>\$ 44,956.61</b>	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	<b>\$ 0.00</b>	<b>\$ 0.00</b>
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	<b>\$ 0.00</b>	<b>\$ 0.00</b>

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

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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**

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TYPE OR PRINT FULL NAME OF TREASURER

**ELECTRONICALLY CERTIFIED**

07/31/2024

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SIGNATURE OF TREASURER

DATE

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

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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.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

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

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NOTARY PUBLIC

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(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.

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TYPE OR PRINT FULL NAME OF TREASURER

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SIGNATURE OF TREASURER

DATE

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

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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: 2/1/2024 TO: 7/31/2024	
<b>I. RECEIPTS</b>	<b>COLUMN A TOTAL THIS PERIOD</b>	<b>COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE</b>
<b>11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 47,674.00	\$ 89,512.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 3,250.00	\$ 3,250.00 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)]	\$ 50,924.00	\$ 92,762.00 11(h)
<b>12. SALES AND COLLECTIONS (Schedule C)</b>	\$ 0.00	\$ 0.00 12
<b>13. LOANS</b>		
(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)
<b>14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)</b>	\$ 0.00	\$ 0.00 14
<b>15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)</b>	\$ 0.00	\$ 0.00 15
<b>16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]</b>	\$ 50,924.00	\$ 92,762.00 16
<b>II. EXPENDITURES</b>		
<b>17. OPERATING EXPENDITURES (Schedule B)</b>	\$ 46,905.39	\$ 46,905.39 17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)</b>	\$ 0.00	\$ 0.00 18
<b>19. LOAN REPAYMENTS:</b>		
(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)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 200.00	\$ 900.00 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)]	\$ 200.00	\$ 900.00 20(d)
<b>21. OTHER EXPENDITURES</b>		
(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)
<b>22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]</b>	\$ 47,105.39	\$ 47,805.39 22
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	41,138.00
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	50,924.00
<b>25. SUBTOTAL (add Lines 23 and 24)</b>	\$	92,062.00
<b>26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)</b>	\$	47,105.39
<b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)</b>	\$	44,956.61

## 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 <b>Gerarda Maiuri</b> <b>4668 Nathan W, Sterling Heights, MI 48310</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
2. Full Name, Mailing Address and Zip Code <b>Angela Allison</b> <b>1673 Park Rd NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Legislative Affairs</b> Name and Address of Employer <b>Federal Government</b> <b>1673 Park Rd NW, Washington, DC 20010</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
3. Full Name, Mailing Address and Zip Code <b>Patrick Regan</b> <b>1919 M St NW Ste 600, Washington, DC 20036</b>	<b>Contribution Type</b> <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) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>Regan Zambri Long PLLC</b> <b>1919 M St NW Ste 600, Washington, DC 20036</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
4. Full Name, Mailing Address and Zip Code <b>Paul Cornoni</b> <b>4818 Fort Sumner Dr, Bethesda, MD 20816</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Lawyer</b> Name and Address of Employer <b>Regan Zambri Long PLLC</b> <b>1919 M St NW Ste 600, Washington, DC 20036</b>		
Aggregate Year-To-date			<b>\$ 500.00</b>
5. Full Name, Mailing Address and Zip Code <b>Anastasios Manatos</b> <b>8523 W Howell Rd, Bethesda, MD 20817</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Head of Federal Affairs</b> Name and Address of Employer <b>Block</b> <b>8523 W Howell Rd, Bethesda, MD 20817</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>

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

Ward 1 Residents for Brianne

6. Full Name, Mailing Address and Zip Code <b>Keshini Ladduwahetty</b> 2939 Van Ness St NW Apt 220, Washington, DC 20008	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Name and Address of Employer <b>Self</b> 2939 Van Ness St NW Apt 220, Washington, DC 20008		
Aggregate Year-To-date		<b>\$ 50.00</b>	
7. Full Name, Mailing Address and Zip Code <b>Mike Gordon</b> 636 Dover Rd, Oceanside, NY 11572	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Owner</b> Name and Address of Employer <b>Risetek Global LLC.</b> 5623 55th Ave, Maspeth, NY 11378		
Aggregate Year-To-date		<b>\$ 500.00</b>	
8. Full Name, Mailing Address and Zip Code <b>Shana Glickfield</b> 810 O St NW, Washington, DC 20001	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Beekeeper Group</b> 810 O St NW, Washington, DC 20001		
Aggregate Year-To-date		<b>\$ 100.00</b>	
9. Full Name, Mailing Address and Zip Code <b>Gayle Lorenzi</b> 5408 Soledad Rd, La Jolla, CA 92037	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>RN</b> Name and Address of Employer <b>USCD</b> 9500 Gilman Dr, La Jolla, CA 92093		
Aggregate Year-To-date		<b>\$ 250.00</b>	
10. Full Name, Mailing Address and Zip Code <b>Tucker Jones</b> 2631 13th St NW, Washington, DC 20009	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/05/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Program Manager</b> Name and Address of Employer <b>International Republican Institute</b> 1225 Eye St NW Ste 800, Washington, DC 20005		

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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
11. Full Name, Mailing Address and Zip Code <b>Nisha Jain</b> <b>303 Riley St, Falls Church, VA 22046</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/05/2024</b>  Amount of Each Receipt This Period <b>\$ 250.00</b>
Contributor Type Individual		<b>Occupation Partner</b> Name and Address of Employer <b>GBAO</b> <b>1701 K St NW Ste 700, Washington, DC 20006</b>		
		Aggregate Year-To-date		
12. Full Name, Mailing Address and Zip Code <b>Andrew Kline</b> <b>1225 19th St NW, Washington, DC 20036</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/05/2024</b>  Amount of Each Receipt This Period <b>\$ 1.00</b>
Contributor Type Individual		<b>Occupation Attorney</b> Name and Address of Employer <b>The Veritas Law Firm</b> <b>1225 19th St NW, Washington, DC 20036</b>		
		Aggregate Year-To-date		
13. Full Name, Mailing Address and Zip Code <b>Emily Alfstad</b> <b>6575 Chanticleer Ct, Westerville, OH 43082</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/05/2024</b>  Amount of Each Receipt This Period <b>\$ 75.00</b>
Contributor Type Individual		<b>Occupation Pharmacist</b> Name and Address of Employer <b>UHG</b> <b>6575 Chanticleer Ct, Westerville, OH 43082</b>		
		Aggregate Year-To-date		
14. Full Name, Mailing Address and Zip Code <b>Shoshana Risman</b> <b>1757 Euclid St NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/05/2024</b>  Amount of Each Receipt This Period <b>\$ 18.00</b>
Contributor Type Individual		<b>Occupation Consultant</b> Name and Address of Employer <b>Shoshana Risman</b> <b>1757 Euclid St NW, Washington, DC 20009</b>		
		Aggregate Year-To-date		
15. Full Name, Mailing Address and Zip Code <b>Alik Schier</b> <b>1623 W Belmont Ave, Chicago, IL 60657</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/05/2024</b>  Amount of Each Receipt This Period <b>\$ 10.00</b>
Contributor Type Individual		<b>Occupation Not employed</b> Name and Address of Employer <b>Not employed</b> <b>1623 W Belmont Ave, Chicago, IL 60657</b>		
		Aggregate Year-To-date		

## 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		\$ 10.00
16. Full Name, Mailing Address and Zip Code <b>Michael Amster</b> <b>2001 Bishops Castle Dr, Olney, MD 20832</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/06/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Not employee  Name and Address of Employer <b>Not employed</b> <b>2001 Bishops Castle Dr, Olney, MD 20832</b>		
		Aggregate Year-To-date		\$ 50.00
17. Full Name, Mailing Address and Zip Code <b>James Campbell</b> <b>1807 California St NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/06/2024</b>  Amount of Each Receipt This Period  <b>\$ 25.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Wildfire Policy Specialist  Name and Address of Employer <b>Federation of American Scientists</b> <b>1807 California St NW, Washington, DC 20009</b>		
		Aggregate Year-To-date		\$ 25.00
18. Full Name, Mailing Address and Zip Code <b>Renana Fox</b> <b>853 19th St NE, Washington, DC 20002</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/06/2024</b>  Amount of Each Receipt This Period  <b>\$ 8.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Teacher  Name and Address of Employer <b>DCPS</b> <b>3101 16th St NW, Washington, DC 20010</b>		
		Aggregate Year-To-date		\$ 8.00
19. Full Name, Mailing Address and Zip Code <b>Beverly Dakin</b> <b>35 Plumb Hill Rd, Litchfield, CT 06759</b>		<b>Contribution Type</b> <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)  <b>03/07/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Retired  Name and Address of Employer <b>Retired</b>		
		Aggregate Year-To-date		\$ 100.00
20. Full Name, Mailing Address and Zip Code <b>Benjamin Davis</b> <b>2905 Woodland Dr NW, Washington, DC 20008</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/07/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Not employed  Name and Address of Employer <b>Not employed</b> <b>1029 Euclid St NW, Washington, DC 20001</b>		

## 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		<b>\$ 100.00</b>
21. Full Name, Mailing Address and Zip Code <b>James Turner</b> <b>1407 N Jackson St, Arlington, VA 22201</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/07/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Lawyer</b> Name and Address of Employer <b>Law Offices of James E. Turner</b> <b>1825 K St NW, Washington, DC 20006</b>		
		Aggregate Year-To-date		
22. Full Name, Mailing Address and Zip Code <b>Susan Burton</b> <b>1328 Ingraham St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/07/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Director</b> Name and Address of Employer <b>NACHC</b> <b>1328 Ingraham St NW, Washington, DC 20011</b>		
		Aggregate Year-To-date		
23. Full Name, Mailing Address and Zip Code <b>Camille Glover</b> <b>646 Morton St NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/07/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Government</b> <b>646 Morton St NW, Washington, DC 20010</b>		
		Aggregate Year-To-date		
24. Full Name, Mailing Address and Zip Code <b>Sean Holihan</b> <b>2030 8th St NW, Washington, DC 20001</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/08/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>State Legislative</b> Name and Address of Employer <b>Giffords</b> <b>2030 8th St NW, Washington, DC 20001</b>		
		Aggregate Year-To-date		
25. Full Name, Mailing Address and Zip Code <b>Susan Turnbull</b> <b>4838 Montgomery Ln, Bethesda, MD 20814</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/09/2024</b>  Amount of Each Receipt This Period  <b>\$ 36.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Editor</b> Name and Address of Employer <b>Turnbull Consulting Group</b> <b>4838 Montgomery Ln, Bethesda, MD 20814</b>		
		Aggregate Year-To-date		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 36.00
26. Full Name, Mailing Address and Zip Code <b>Kyle George</b> <b>6207 8th St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/09/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Sales Executive</b> Name and Address of Employer <b>Palo Alto Network</b> <b>6207 8th St NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		\$ 100.00
27. Full Name, Mailing Address and Zip Code <b>Mark Simpson</b> <b>701 Quincy St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/10/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Senior Director</b> Name and Address of Employer <b>Golden Triangle BID</b> <b>701 Quincy St NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		\$ 50.00
28. Full Name, Mailing Address and Zip Code <b>James Lopez</b> <b>2118 N Capitol St NW, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/10/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Communications</b> Name and Address of Employer <b>DHS OIG</b> <b>245 Murray Ln SW, Washington, DC 20528</b>			
		Aggregate Year-To-date		\$ 100.00
29. Full Name, Mailing Address and Zip Code <b>Regan Zambri Long PLLC</b> <b>1919 M St NW, Washington, DC 20036</b>	<b>Contribution Type</b> <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) <b>03/11/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Business	<b>Occupation</b>			
Business Type Limited Liability Company	Name and Address of Employer			
		Aggregate Year-To-date		\$ 500.00
30. Full Name, Mailing Address and Zip Code <b>James Taglieri</b> <b>4540 45th St NW, Washington, DC 20016</b>	<b>Contribution Type</b> <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) <b>03/11/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Cadeaux, Taglieri &amp; Notarius, PC</b> <b>1100 Connecticut Ave NW, Washington, DC 20036</b>			

## 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		<b>\$ 500.00</b>
<b>31. Full Name, Mailing Address and Zip Code</b> <b>Bruce Bereano</b> <b>720 N Holly Dr, Annapolis, MD 21409</b>		<b>Contribution Type</b> <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)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Lobbyist</b> <b>Name and Address of Employer</b> <b>Self</b> <b>191 Duke of Gloucester St, Annapolis, MD 21401</b>		
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>32. Full Name, Mailing Address and Zip Code</b> <b>Cadeaux, Taglieri &amp; Notarious PC</b> <b>1100 Connecticut Ave NW, Washington, DC 20036</b>		<b>Contribution Type</b> <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)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b> <b>Name and Address of Employer</b>		
<b>Business Type</b> Corporation				
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>33. Full Name, Mailing Address and Zip Code</b> <b>Dross Berman</b> <b>11140 Rockville Pike, Rockville, MD 20852</b>		<b>Contribution Type</b> <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)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b> <b>Name and Address of Employer</b>		
<b>Business Type</b> Corporation				
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>34. Full Name, Mailing Address and Zip Code</b> <b>Susan Schorr</b> <b>3817 Kanawha St NW, Washington, DC 20015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 200.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Not employed</b> <b>Name and Address of Employer</b> <b>Not employed</b> <b>3817 Kanawha St NW, Washington, DC 20015</b>		
		Aggregate Year-To-date		<b>\$ 200.00</b>
<b>35. Full Name, Mailing Address and Zip Code</b> <b>James Turner</b> <b>1236 Girard St NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Not employed</b> <b>Name and Address of Employer</b> <b>Not employed</b> <b>1236 Girard St NW, Washington, DC 20009</b>		

## 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		<b>\$ 50.00</b>
<b>36. Full Name, Mailing Address and Zip Code</b> <b>Greg Akerman</b> <b>103 N 29th St, Richmond, VA 23223</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 150.00</b>
<b>Contributor Type</b> Individual		<b>Occupation Organizer</b> Name and Address of Employer <b>Baltimore/DC Building Trades Council</b> <b>5829 Allentown Rd, Camp Springs, MD 20746</b>		
		Aggregate Year-To-date		<b>\$ 150.00</b>
<b>37. Full Name, Mailing Address and Zip Code</b> <b>Denise Shelton</b> <b>400 Massachusetts Ave NW, Washington, DC 20001</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 250.00</b>
<b>Contributor Type</b> Individual		<b>Occupation Owner</b> Name and Address of Employer <b>CBI</b> <b>400 Massachusetts Ave NW, Washington, DC 20001</b>		
		Aggregate Year-To-date		<b>\$ 250.00</b>
<b>38. Full Name, Mailing Address and Zip Code</b> <b>Cohen, Stanley, Leighton &amp; Rodney, PC</b> <b>1730 Rhode Island Ave NW Ste 410, Washington, DC 20036</b>		<b>Contribution Type</b> <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)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Corporation				
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>39. Full Name, Mailing Address and Zip Code</b> <b>The Cochran Firm DC</b> <b>1666 K St NW Ste 1150, Washington, DC 20006</b>		<b>Contribution Type</b> <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)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Corporation				
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>40. Full Name, Mailing Address and Zip Code</b> <b>Chaikin, Sherman, Cammarata &amp; Siegel, PC</b> <b>1232 17th St NW, Washington, DC 20036</b>		<b>Contribution Type</b> <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)	<b>Date (month, day, year)</b> <b>03/11/2024</b>	<b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Business		<b>Occupation</b> Name and Address of Employer		
<b>Business Type</b> Corporation				

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

**Ward 1 Residents for Brianne**

	Aggregate Year-To-date		<b>\$ 500.00</b>
41. Full Name, Mailing Address and Zip Code <b>Bertram Law Group PLLC</b> <b>20 F St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <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) <b>03/11/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Business	<b>Occupation</b>		
<b>Business Type</b> Corporation	Name and Address of Employer		
	Aggregate Year-To-date		<b>\$ 500.00</b>
42. Full Name, Mailing Address and Zip Code <b>Yuri Beckelman</b> <b>3577 Warder St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/12/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Congressional Aide</b>		
	Name and Address of Employer <b>U.S. Congress</b> <b>3577 Warder St NW, Washington, DC 20010</b>		
	Aggregate Year-To-date		<b>\$ 250.00</b>
43. Full Name, Mailing Address and Zip Code <b>Antonio Harrison</b> <b>4140 17th St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/13/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Project Manager</b>		
	Name and Address of Employer <b>Greenscape Energy</b> <b>4600 Minnesota Ave NE, Washington, DC 20019</b>		
	Aggregate Year-To-date		<b>\$ 250.00</b>
44. Full Name, Mailing Address and Zip Code <b>Kendall Bryan</b> <b>4243 Lane Pl NE, Washington, DC 20019</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/13/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b>		
	Name and Address of Employer <b>Not employed</b> <b>4243 Lane Pl NE, Washington, DC 20019</b>		
	Aggregate Year-To-date		<b>\$ 25.00</b>
45. Full Name, Mailing Address and Zip Code <b>Renee Bovelie</b> <b>8201 16th St, Silver Spring, MD 20910</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/14/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Ophthalmologist</b>		
	Name and Address of Employer <b>Advanced Eyecare Medical Center, PA</b> <b>8201 16th St, Silver Spring, MD 20910</b>		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 100.00</b>
<b>46. Full Name, Mailing Address and Zip Code</b> <b>Brett Greene</b> <b>1330 Geranium St NW, Washington, DC 20012</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		<b>Date (month, day, year)</b> <b>03/14/2024</b>  <b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>President/CEO</b>		
		Name and Address of Employer <b>American Management Corporation</b> <b>1330 Geranium St NW, Washington, DC 20012</b>		
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>47. Full Name, Mailing Address and Zip Code</b> <b>Katrina Chin Loy</b> <b>1006 Taylor St NE, Washington, DC 20017</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		<b>Date (month, day, year)</b> <b>03/14/2024</b>  <b>Amount of Each Receipt This Period</b> <b>\$ 150.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Ophthalmology Surgeon</b>		
		Name and Address of Employer <b>Howard University</b> <b>1006 Taylor St NE, Washington, DC 20017</b>		
		Aggregate Year-To-date		<b>\$ 150.00</b>
<b>48. Full Name, Mailing Address and Zip Code</b> <b>John Deadwyler</b> <b>3706 22nd St NE, Washington, DC 20018</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		<b>Date (month, day, year)</b> <b>03/14/2024</b>  <b>Amount of Each Receipt This Period</b> <b>\$ 150.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Consultant</b>		
		Name and Address of Employer <b>Self-Employed</b> <b>3706 22nd St NE, Washington, DC 20018</b>		
		Aggregate Year-To-date		<b>\$ 300.00</b>
<b>49. Full Name, Mailing Address and Zip Code</b> <b>Eric Payne</b> <b>9809 Sheads Ct, Burke, VA 22015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		<b>Date (month, day, year)</b> <b>03/14/2024</b>  <b>Amount of Each Receipt This Period</b> <b>\$ 500.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Contracting Offical</b>		
		Name and Address of Employer <b>Prince George's County</b> <b>1400 McCormick Dr, Upper Marlboro, MD 20774</b>		
		Aggregate Year-To-date		<b>\$ 500.00</b>
<b>50. Full Name, Mailing Address and Zip Code</b> <b>John Deadwyler</b> <b>3706 22nd St NE, Washington, DC 20018</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		<b>Date (month, day, year)</b> <b>03/14/2024</b>  <b>Amount of Each Receipt This Period</b> <b>\$ 150.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Consultant</b>		
		Name and Address of Employer <b>Self-Employed</b> <b>3706 22nd St NE, Washington, DC 20018</b>		

## 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		<b>\$ 300.00</b>
51. Full Name, Mailing Address and Zip Code <b>Maryland Society of Eye Physicians &amp; Surgeons</b> <b>512 Cathedral St, Baltimore, MD 21201</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/14/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Business	Occupation			
Business Type Corporation	Name and Address of Employer			
		Aggregate Year-To-date		<b>\$ 500.00</b>
52. Full Name, Mailing Address and Zip Code <b>Saya Nagori</b> <b>12150 Annapolis Rd, Glenn Dale, MD 20769</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/14/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	Occupation <b>Eye Doctor</b>			
	Name and Address of Employer <b>VisionMD</b> <b>12150 Annapolis Rd, Glenn Dale, MD 20769</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
53. Full Name, Mailing Address and Zip Code <b>Peter Farrell</b> <b>5432 Merriam St, Bethesda, MD 20814</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/15/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	Occupation <b>Real Estate</b>			
	Name and Address of Employer <b>City Interests Development Partners LLC</b> <b>5335 Wisconsin Ave NW, Washington, DC 20015</b>			
		Aggregate Year-To-date		<b>\$ 250.00</b>
54. Full Name, Mailing Address and Zip Code <b>Beth Kurtz</b> <b>1451 Belmont St NW Apt 223, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/18/2024</b>	Amount of Each Receipt This Period <b>\$ 18.00</b>	
Contributor Type Individual	Occupation <b>Attorney</b>			
	Name and Address of Employer <b>DOJ</b> <b>1451 Belmont St NW, Washington, DC 20009</b>			
		Aggregate Year-To-date		<b>\$ 18.00</b>
55. Full Name, Mailing Address and Zip Code <b>Blaine Stum</b> <b>1711 Massachusetts Ave NW, Washington, DC 20036</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/18/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	Occupation <b>Legislative Policy</b>			
	Name and Address of Employer <b>DC Council</b> <b>1350 Pennsylvania Ave NW, Washington, DC 20004</b>			

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 100.00</b>
56. Full Name, Mailing Address and Zip Code <b>Dorothy Wade</b> <b>1116 Columbia Rd NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/18/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>1116 Columbia Rd NW, Washington, DC 20009</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
57. Full Name, Mailing Address and Zip Code <b>Kendall LaVine</b> <b>1339 E St SE Apt 306, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/21/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Nonprofit</b> Name and Address of Employer <b>Impact Justice</b> <b>1101 Connecticut Ave NW, Washington, DC 20036</b>			
		Aggregate Year-To-date		<b>\$ 25.00</b>
58. Full Name, Mailing Address and Zip Code <b>Andria McClellan</b> <b>531 Warren Cres, Norfolk, VA 23507</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/21/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Councilwoman</b> Name and Address of Employer <b>City of Norfolk</b> <b>810 Union St, Norfolk, VA 23510</b>			
		Aggregate Year-To-date		<b>\$ 250.00</b>
59. Full Name, Mailing Address and Zip Code <b>Allison Turner</b> <b>4214 Argyle Ter NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/22/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>4214 Argyle Ter NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
60. Full Name, Mailing Address and Zip Code <b>Emily Roderer</b> <b>152 Thomas St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/22/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>not employed</b> Name and Address of Employer <b>not employed</b> <b>152 Thomas St NW, Washington, DC 20001</b>			

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 50.00</b>
61. Full Name, Mailing Address and Zip Code <b>Beatriz Otero</b> <b>1729 Lanier Pl NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/22/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Gov Name and Address of Employer <b>MC</b> <b>101 Monroe St, Rockville, MD 20850</b>		
		Aggregate Year-To-date		
62. Full Name, Mailing Address and Zip Code <b>Thomas Wells</b> <b>311 4th St SE, Washington, DC 20003</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/22/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Not employed Name and Address of Employer <b>Not employed</b> <b>311 4th St SE, Washington, DC 20003</b>		
		Aggregate Year-To-date		
63. Full Name, Mailing Address and Zip Code <b>Jonathan Groner</b> <b>2415 Everton Rd, Baltimore, MD 21209</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/22/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Not employed Name and Address of Employer <b>Not employed</b> <b>2415 Everton Rd, Baltimore, MD 21209</b>		
		Aggregate Year-To-date		
64. Full Name, Mailing Address and Zip Code <b>Ryan Drysdale</b> <b>2032 Belmont Rd NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/22/2024</b>  Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Nonprofit Name and Address of Employer <b>Civic Nation</b> <b>1156 15th St NW, Washington, DC 20005</b>		
		Aggregate Year-To-date		
65. Full Name, Mailing Address and Zip Code <b>Susan Burton</b> <b>1328 Ingraham St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/22/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> Director Name and Address of Employer <b>NACHC</b> <b>1328 Ingraham St NW, Washington, DC 20011</b>		
		Aggregate Year-To-date		

## 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		<b>\$ 200.00</b>
66. Full Name, Mailing Address and Zip Code <b>Caitlin Rogger</b> <b>251 10th St NE, Washington, DC 20002</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/23/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Deputy Executive Director</b> Name and Address of Employer <b>Greater Greater Washington</b> <b>251 10th St NE, Washington, DC 20002</b>		
		Aggregate Year-To-date		
67. Full Name, Mailing Address and Zip Code <b>Eric Feldman</b> <b>2330 Blaine Dr, Chevy Chase, MD 20815</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/25/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Public Policy</b> Name and Address of Employer <b>General Motors</b> <b>25 Massachusetts Ave NW, Washington, DC 20001</b>		
		Aggregate Year-To-date		
68. Full Name, Mailing Address and Zip Code <b>Dena Feldman</b> <b>2330 Blaine Dr, Chevy Chase, MD 20815</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/25/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Public Policy</b> Name and Address of Employer <b>Meta</b> <b>2330 Blaine Dr, Chevy Chase, MD 20815</b>		
		Aggregate Year-To-date		
69. Full Name, Mailing Address and Zip Code <b>HIMs, Inc.</b> <b>2269 Chestnut St, San Francisco, CA 94123</b>		<b>Contribution Type</b> <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)  <b>03/25/2024</b>  Amount of Each Receipt This Period  <b>\$ 500.00</b>
Contributor Type Business		<b>Occupation</b>		
Business Type Corporation		Name and Address of Employer		
		Aggregate Year-To-date		<b>\$ 500.00</b>
70. Full Name, Mailing Address and Zip Code <b>Claude Bailey</b> <b>1815 E Beach Dr NW, Washington, DC 20012</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/26/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Venable LLP</b> <b>600 Massachusetts Ave NW, Washington, DC 20001</b>		

## 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		<b>\$ 100.00</b>
71. Full Name, Mailing Address and Zip Code <b>L Marcia Bernbaum</b> <b>4506 49th St NW, Washington, DC 20016</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/27/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>4506 49th St NW, Washington, DC 20016</b>		
		Aggregate Year-To-date		<b>\$ 100.00</b>
72. Full Name, Mailing Address and Zip Code <b>Shevaun Lewis</b> <b>1615 Kenyon St NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/27/2024</b>  Amount of Each Receipt This Period  <b>\$ 25.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Faculty</b> Name and Address of Employer <b>University of Maryland</b>		
		Aggregate Year-To-date		<b>\$ 25.00</b>
73. Full Name, Mailing Address and Zip Code <b>Chelsea Allinger</b> <b>1900 Lamont St NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/28/2024</b>  Amount of Each Receipt This Period  <b>\$ 150.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Executive Director</b> Name and Address of Employer <b>Greater Greater Washington</b> <b>80 M St SE Ste 100, Washington, DC 20003</b>		
		Aggregate Year-To-date		<b>\$ 150.00</b>
74. Full Name, Mailing Address and Zip Code <b>Adam Talbot</b> <b>2421 18th St NW Apt 201, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/29/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Writer</b> Name and Address of Employer <b>A.S. Talbot Strategies LLC</b> <b>2421 18th St NW Apt 201, Washington, DC 20009</b>		
		Aggregate Year-To-date		<b>\$ 100.00</b>
75. Full Name, Mailing Address and Zip Code <b>Getachew Zewdie</b> <b>1005 Fairmont St NW, Washington, DC 20001</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>03/29/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Habesha</b> Name and Address of Employer <b>Habesha</b> <b>1919 9th St NW, Washington, DC 20001</b>		

## 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		<b>\$ 50.00</b>
76. Full Name, Mailing Address and Zip Code <b>Sheila Reid</b> <b>1203 Columbia Rd NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/29/2024</b>  Amount of Each Receipt This Period <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Real Estate Broker</b> Name and Address of Employer <b>Avanti Real Estate Services</b> <b>3421 14th St NW, Washington, DC 20010</b>		
		Aggregate Year-To-date		
77. Full Name, Mailing Address and Zip Code <b>Rachel Kronowitz</b> <b>3307 Rittenhouse St NW, Washington, DC 20015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/29/2024</b>  Amount of Each Receipt This Period <b>\$ 250.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>3307 Rittenhouse St NW, Washington, DC 20015</b>		
		Aggregate Year-To-date		
78. Full Name, Mailing Address and Zip Code <b>Mario DiFranco</b> <b>10 2nd St, Annapolis, MD 21401</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/30/2024</b>  Amount of Each Receipt This Period <b>\$ 250.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Accountant</b> Name and Address of Employer <b>Difranco Services LLC</b> <b>10 2nd St, Annapolis, MD 21401</b>		
		Aggregate Year-To-date		
79. Full Name, Mailing Address and Zip Code <b>Yonas Ambaw</b> <b>6014 Kestner Cir, Alexandria, VA 22315</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/30/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>6014 Kestner Cir, Alexandria, VA 22315</b>		
		Aggregate Year-To-date		
80. Full Name, Mailing Address and Zip Code <b>Dereje Teshome</b> <b>8021 Samuel Wallis St, Lorton, VA 22079</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>03/31/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Self employed</b> Name and Address of Employer <b>Self employed</b> <b>8021 Samuel Wallis St, Lorton, VA 22079</b>		
		Aggregate Year-To-date		

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

Ward 1 Residents for Brianne

	Aggregate Year-To-date		<b>\$ 100.00</b>
81. Full Name, Mailing Address and Zip Code <b>Mark Simon</b> <b>1852 Monroe St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/31/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>		
	Aggregate Year-To-date		<b>\$ 100.00</b>
82. Full Name, Mailing Address and Zip Code <b>Christopher Hornig</b> <b>3103 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/31/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Klein Hornig LLP</b> <b>1325 G St NW, Washington, DC 20005</b>		
	Aggregate Year-To-date		<b>\$ 250.00</b>
83. Full Name, Mailing Address and Zip Code <b>Beth Gansky</b> <b>3609 Michelle Way, Baltimore, MD 21208</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>03/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Leadership Coach</b> Name and Address of Employer <b>Beth Gansky</b> <b>3609 Michelle Way, Baltimore, MD 21208</b>		
	Aggregate Year-To-date		<b>\$ 50.00</b>
84. Full Name, Mailing Address and Zip Code <b>Henok Tsehaye</b> <b>5937 Clames Dr, Alexandria, VA 22310</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/01/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Regional Airports Manager</b> Name and Address of Employer <b>USP Parking</b> <b>1208 9th St NW, Washington, DC 20001</b>		
	Aggregate Year-To-date		<b>\$ 50.00</b>
85. Full Name, Mailing Address and Zip Code <b>Ayelech Merin</b> <b>6634 24th Pl, Hyattsville, MD 20782</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/01/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Manager</b> Name and Address of Employer <b>USP Parking</b> <b>1208 9th St NW, Washington, DC 20001</b>		

## 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		<b>\$ 250.00</b>
86. Full Name, Mailing Address and Zip Code <b>Sam Novey</b> <b>2911 Guilford Ave, Baltimore, MD 21218</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/01/2024</b>  Amount of Each Receipt This Period <b>\$ 18.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Professor</b> Name and Address of Employer <b>Self</b> <b>2911 Guilford Ave, Baltimore, MD 21218</b>		
		Aggregate Year-To-date		
				<b>\$ 18.00</b>
87. Full Name, Mailing Address and Zip Code <b>Amanda Wilson</b> <b>4021 9th St NW Apt 402, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/02/2024</b>  Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Writer</b> Name and Address of Employer <b>REQ Digital Agency</b> <b>4021 9th St NW, Washington, DC 20011</b>		
		Aggregate Year-To-date		
				<b>\$ 25.00</b>
88. Full Name, Mailing Address and Zip Code <b>Losang Rabgey</b> <b>1414 Belmont St NW Apt 213, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/02/2024</b>  Amount of Each Receipt This Period <b>\$ 15.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Cofounder</b> Name and Address of Employer <b>Malchik</b> <b>1414 Belmont St NW Apt 213, Washington, DC 20009</b>		
		Aggregate Year-To-date		
				<b>\$ 15.00</b>
89. Full Name, Mailing Address and Zip Code <b>Sam Rosen-Amy</b> <b>321 6th St SE, Washington, DC 20003</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/02/2024</b>  Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Research Manager</b> Name and Address of Employer <b>Council of the District of Columbia</b> <b>1350 Pennsylvania Ave NW, Washington, DC 20004</b>		
		Aggregate Year-To-date		
				<b>\$ 500.00</b>

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

Ward 1 Residents for Brianne

90. Full Name, Mailing Address and Zip Code <b>Eileen R Appelbaum</b> <b>2125 14th St NW Apt 307, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/02/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Economist</b> Name and Address of Employer <b>CEPR</b> <b>115 E Rounfort Rd Apt 18, Philadelphia, PA 19119</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
91. Full Name, Mailing Address and Zip Code <b>Tania Jackson</b> <b>3128 Sherman Ave NW Apt 8, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self</b> <b>3128 Sherman Ave NW, Washington, DC 20010</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
92. Full Name, Mailing Address and Zip Code <b>Aaron Myers</b> <b>3349 18th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Artist</b> Name and Address of Employer <b>Self</b> <b>3349 18th St NW, Washington, DC 20010</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
93. Full Name, Mailing Address and Zip Code <b>Austin McDonald</b> <b>1477 Florida Ave NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retail Manager</b> Name and Address of Employer <b>FPB</b> <b>1477 Florida Ave NW, Washington, DC 20009</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
94. Full Name, Mailing Address and Zip Code <b>Glenn Ruffin</b> <b>1000 U St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/03/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Unemployed</b> Name and Address of Employer <b>Unemployed</b> <b>1000 U St NW, Washington, DC 20001</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>

## 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**

95. Full Name, Mailing Address and Zip Code <b>Anne Cauman</b> <b>4405 38th St NW, Washington, DC 20016</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/04/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Unemployed</b> Name and Address of Employer <b>Unemployed</b> <b>4405 38th St NW, Washington, DC 20016</b>		
Aggregate Year-To-date		<b>\$ 25.00</b>	
96. Full Name, Mailing Address and Zip Code <b>Rashida Brown</b> <b>430 Irving St NW Apt 106, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/04/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Program Director</b> Name and Address of Employer <b>NACo</b> <b>660 N Capitol St NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
97. Full Name, Mailing Address and Zip Code <b>David Arnold</b> <b>3326 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/04/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Unemployed</b> Name and Address of Employer <b>Unemployed</b> <b>3326 19th St NW, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 25.00</b>	
98. Full Name, Mailing Address and Zip Code <b>Christopher Wallen</b> <b>2000 17th St NW Apt 3, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/04/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>1055 Thomas Jefferson St NW Ste 650, Washington, DC 20007</b>		
Aggregate Year-To-date		<b>\$ 25.00</b>	
99. Full Name, Mailing Address and Zip Code <b>Tamara Vatnick</b> <b>1317 Shepherd St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/04/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Data Analyst</b> Name and Address of Employer <b>WMATA</b> <b>300 7th St SW, Washington, DC 20024</b>		

## 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
100. Full Name, Mailing Address and Zip Code <b>Pat Ratkowski</b> <b>5 Crestview Ct, Rockville, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/04/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation Not employed</b> Name and Address of Employer <b>Not employed</b> <b>5 Crestview Ct, Rockville, MD 20854</b>			
		Aggregate Year-To-date		\$ 25.00
101. Full Name, Mailing Address and Zip Code <b>Elizabeth Geisler</b> <b>1407 Greywall Ln, Wynnewood, PA 19096</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/05/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Nonprofit</b> Name and Address of Employer <b>Enterprise Community Partners</b> <b>10 G St NE, Washington, DC 20002</b>			
		Aggregate Year-To-date		\$ 50.00
102. Full Name, Mailing Address and Zip Code <b>Marquis Mccants</b> <b>PO Box 18204, Baltimore, MD 21227</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/05/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Director</b> Name and Address of Employer <b>US Government</b> <b>813 Rhyolite Ct, Glen Burnie, MD 21060</b>			
		Aggregate Year-To-date		\$ 50.00
103. Full Name, Mailing Address and Zip Code <b>Jake Faleschini</b> <b>2301 Champlain St NW Apt T12, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/06/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation Legal Policy</b> Name and Address of Employer <b>Alliance for Justice</b> <b>11 DuPont Cir NW Fl 5, Washington, DC 20036</b>			
		Aggregate Year-To-date		\$ 25.00
104. Full Name, Mailing Address and Zip Code <b>Victoria Leonard</b> <b>9207 Mintwood St, Silver Spring, MD 20901</b>	<b>Contribution Type</b> <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) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b> <b>9207 Mintwood St, Silver Spring, MD 20901</b>			

## 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		<b>\$ 150.00</b>
105. Full Name, Mailing Address and Zip Code <b>Katherine Mitchell</b> <b>1324 E St SE Unit 304, Washington, DC 20003</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Council of the District of Columbia</b> <b>1350 Pennsylvania Ave NW, Washington, DC 20004</b>		
		Aggregate Year-To-date		<b>\$ 100.00</b>
106. Full Name, Mailing Address and Zip Code <b>Everett Lott</b> <b>3053 Chestnut St NW, Washington, DC 20015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Director</b> Name and Address of Employer <b>DC Government</b> <b>250 M St SE, Washington, DC 20003</b>		
		Aggregate Year-To-date		<b>\$ 25.00</b>
107. Full Name, Mailing Address and Zip Code <b>David Meni</b> <b>609 Newton Pl NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Legislative Director</b> Name and Address of Employer <b>Council of the District of Columbia</b> <b>609 Newton Pl NW, Washington, DC 20010</b>		
		Aggregate Year-To-date		<b>\$ 50.00</b>
108. Full Name, Mailing Address and Zip Code <b>Ryan O'Leary</b> <b>1665 Lamont St NW Apt 6B, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Strategic Researcher</b> Name and Address of Employer <b>International Union of Bricklayers and Allied Craftworkers</b> <b>620 F St NW, Washington, DC 20004</b>		
		Aggregate Year-To-date		<b>\$ 50.00</b>
109. Full Name, Mailing Address and Zip Code <b>Aparna Raj</b> <b>1519 Park Rd NW Apt 102, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 27.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Communications Manager</b> Name and Address of Employer <b>Local Progress</b> <b>2656 15th St NW Apt 302, Washington, DC 20009</b>		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		\$ 27.00
110. Full Name, Mailing Address and Zip Code <b>Vanessa Lopez</b> <b>3221 Connecticut Ave NW Apt 201,</b> <b>Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 15.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Field Director</b> Name and Address of Employer <b>Elissa for DC</b> <b>3221 Connecticut Ave NW, Washington, DC 20008</b>			
		Aggregate Year-To-date		\$ 15.00
111. Full Name, Mailing Address and Zip Code <b>Kathryn Ries</b> <b>1831 Kilbourne Pl NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>1831 Kilbourne Pl NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		\$ 50.00
112. Full Name, Mailing Address and Zip Code <b>Catherine Plume</b> <b>1211 Decatur St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>BlueGreenPlume, LLC</b> <b>1211 Decatur St NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		\$ 50.00
113. Full Name, Mailing Address and Zip Code <b>Lara Levison</b> <b>919 Constitution Ave NE, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/07/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Senior Director, Federal Policy</b> Name and Address of Employer <b>Oceana, Inc.</b> <b>1350 Connecticut Ave NW, Washington, DC 20036</b>			
		Aggregate Year-To-date		\$ 250.00
114. Full Name, Mailing Address and Zip Code <b>Elinor Hart</b> <b>1651 Hobart St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <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) <b>04/08/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>			

## 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
115. Full Name, Mailing Address and Zip Code <b>Warner Session</b> 1811 12th St NW, Washington, DC 20009	<b>Contribution Type</b> <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) <b>04/08/2024</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>	
Contributor Type Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>Session Law Firm</b> 1200 New Hampshire Ave NW, Washington, DC 20036			
		Aggregate Year-To-date		\$ 200.00
116. Full Name, Mailing Address and Zip Code <b>David Fathi</b> 3726 Van Ness St NW, Washington, DC 20016	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/08/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> Lawyer Name and Address of Employer ACLU 915 15th St NW Ste 700, Washington, DC 20005			
		Aggregate Year-To-date		\$ 50.00
117. Full Name, Mailing Address and Zip Code <b>Jean Stewart</b> 1915 Kalorama Rd NW Apt 612, Washington, DC 20009	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/09/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> Not employed Name and Address of Employer Not employed 1915 Kalorama Rd NW Apt 612, Washington, DC 20009			
		Aggregate Year-To-date		\$ 50.00
118. Full Name, Mailing Address and Zip Code <b>Geoffrey Landers-Nolan</b> 311 Chadham Ct, Bellefonte, PA 16823	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/10/2024</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>	
Contributor Type Individual	<b>Occupation</b> Counselor Name and Address of Employer Forward Path Counseling 253 Easterly Pkwy, State College, PA 16801			
		Aggregate Year-To-date		\$ 10.00

## 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 <b>Tania Jackson</b> <b>3128 Sherman Ave NW Apt 8, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self</b> <b>3128 Sherman Ave NW, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 150.00</b>	
120. Full Name, Mailing Address and Zip Code <b>Ed Lazere</b> <b>3579 13th St NW Unit 6, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Public Policy Analyst</b> Name and Address of Employer <b>UPO</b> <b>3579 13th St NW Unit 6, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
121. Full Name, Mailing Address and Zip Code <b>Matthew Nocella</b> <b>4308 Georgia Ave NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/12/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Communications</b> Name and Address of Employer <b>Ed Forward DC</b> <b>4308 Georgia Ave NW, Washington, DC 20011</b>		
Aggregate Year-To-date		<b>\$ 50.00</b>	
122. Full Name, Mailing Address and Zip Code <b>Katrina Chin Loy</b> <b>1006 Taylor St NE, Washington, DC 20017</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/14/2024</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Ophthalmology Surgeon</b> Name and Address of Employer <b>Howard University</b> <b>1006 Taylor St NE, Washington, DC 20017</b>		
Aggregate Year-To-date		<b>\$ 300.00</b>	
123. Full Name, Mailing Address and Zip Code <b>Julia Stevenson</b> <b>2955 Albemarle St NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/15/2024</b>	Amount of Each Receipt This Period <b>\$ 20.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>2955 Albemarle St NW, Washington, DC 20008</b>		
Aggregate Year-To-date		<b>\$ 20.00</b>	

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

Ward 1 Residents for Brianne

124. Full Name, Mailing Address and Zip Code <b>Frank Smith</b> <b>4300 Argyle Ter NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/17/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Museum Director</b> Name and Address of Employer <b>African American Civil War Museum</b> <b>1925 Vermont Ave NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
125. Full Name, Mailing Address and Zip Code <b>Geraldine Thompson Mayes</b> <b>1319 Wallach Pl NW, Washington, DC 20009</b>	<b>Contribution Type</b> <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) <b>04/18/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
126. Full Name, Mailing Address and Zip Code <b>Carlton Tucker</b> <b>1000 Euclid St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <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) <b>04/18/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Property Manager</b> Name and Address of Employer <b>Develoment Corporation of Columbia Heights</b> <b>2604 Georgia Ave NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
127. Full Name, Mailing Address and Zip Code <b>Malaika Smith</b> <b>12317 Thompson Rd, Bowie, MD 20720</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/18/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Teacher</b> Name and Address of Employer <b>Prince George's County Public Schools</b> <b>6001 Good Luck Rd, Riverdale, MD 20737</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
128. Full Name, Mailing Address and Zip Code <b>Shelore Williams Esq</b> <b>3215 13th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/18/2024</b>	Amount of Each Receipt This Period <b>\$ 400.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Self</b> <b>1450 Mercantile Ln Ste 155, Upper Marlboro, MD 20774</b>		

## 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		\$ 400.00
129. Full Name, Mailing Address and Zip Code <b>Divine Shine</b> <b>723 T St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <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) <b>04/18/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation	<b>Occupation</b> Name and Address of Employer			
		Aggregate Year-To-date		\$ 100.00
130. Full Name, Mailing Address and Zip Code <b>Robert Ward</b> <b>2930 MACOMB ST NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/19/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Uptown Strategies</b> <b>2930 Macomb St NW, Washington, DC 20008</b>			
		Aggregate Year-To-date		\$ 250.00
131. Full Name, Mailing Address and Zip Code <b>William Emmet</b> <b>38 Kingston Ave, Newport, RI 02840</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/19/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>1755 Park Rd NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		\$ 50.00
132. Full Name, Mailing Address and Zip Code <b>Vicurtis Hinton</b> <b>550 N St SW, Washington, DC 20024</b>	<b>Contribution Type</b> <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) <b>04/20/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		\$ 50.00
133. Full Name, Mailing Address and Zip Code <b>Marsha Blanton</b> <b>6167 Sligo Mill Rd NE, Washington, DC 20011</b>	<b>Contribution Type</b> <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) <b>04/20/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Adjunct Professor</b> Name and Address of Employer <b>George Washington University</b> <b>2715 K st NW, Washington, DC 20052</b>			

## 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
134. Full Name, Mailing Address and Zip Code <b>BBB LLC</b> <b>6167 Sligo Mill Rd NE, Washington, DC 20011</b>		<b>Contribution Type</b> <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) <b>04/20/2024</b>  Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Business  <b>Business Type</b> Corporation		<b>Occupation</b> Name and Address of Employer		
		Aggregate Year-To-date		\$ 50.00
135. Full Name, Mailing Address and Zip Code <b>Loic Pritchett</b> <b>3201 19th St NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/20/2024</b>  Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Realtor</b> Name and Address of Employer <b>TTR Sothebys</b> <b>1515 14th St NW, Washington, DC 20005</b>		
		Aggregate Year-To-date		\$ 25.00
136. Full Name, Mailing Address and Zip Code <b>Janice Adams</b> <b>700 7th St SW Apt 506, Washington, DC 20024</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/20/2024</b>  Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Owner</b> Name and Address of Employer <b>JMA Solutions</b> <b>700 7th St SW Apt 506, Washington, DC 20024</b>		
		Aggregate Year-To-date		\$ 250.00
137. Full Name, Mailing Address and Zip Code <b>Lupi Quinteros-Grady</b> <b>9604 53rd Ave, College Park, MD 20740</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/23/2024</b>  Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>President &amp; CEO</b> Name and Address of Employer <b>Latin American Youth Center</b> <b>9604 53rd Ave, College Park, MD 20740</b>		
		Aggregate Year-To-date		\$ 50.00
138. Full Name, Mailing Address and Zip Code <b>Tom Israel</b> <b>3420 16th St NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>04/23/2024</b>  Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Director</b> Name and Address of Employer <b>NEA</b> <b>3420 16th St NW Apt 402, Washington, DC 20010</b>		

## 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		<b>\$ 50.00</b>
139. Full Name, Mailing Address and Zip Code <b>Matthew Holden</b> <b>1906 17th St NW # A, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/23/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Analyst</b> Name and Address of Employer <b>DC Government</b> <b>2100 Clarendon Blvd, Arlington, VA 22201</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
140. Full Name, Mailing Address and Zip Code <b>Jessica Worthington</b> <b>3302 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/24/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Klein Hornig</b> <b>1325 G St NW Ste 770, Washington, DC 20005</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
141. Full Name, Mailing Address and Zip Code <b>Bernard Demczuk</b> <b>918 French St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <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) <b>04/25/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
142. Full Name, Mailing Address and Zip Code <b>Marian McConnell</b> <b>1669 Columbia Rd NW Apt 110, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/25/2024</b>	Amount of Each Receipt This Period <b>\$ 195.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>policy analyst</b> Name and Address of Employer <b>Americans for Financial Reform</b> <b>1615 L St NW Ste 450, Washington, DC 20036</b>			
		Aggregate Year-To-date		<b>\$ 195.00</b>
143. Full Name, Mailing Address and Zip Code <b>Patricia Westwater</b> <b>1819 Ingleside Ter NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/26/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Video Producer</b> Name and Address of Employer <b>Self</b> <b>1819 Ingleside Ter NW, Washington, DC 20010</b>			

## 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		<b>\$ 100.00</b>
144. Full Name, Mailing Address and Zip Code <b>Steven Nadeau</b> <b>839 Lochmoor Blvd, Grosse Pointe, MI 48236</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/27/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Attorney</b> Name and Address of Employer <b>Honiman LLP</b> <b>660 Woodward Ave Ste 2290, Detroit, MI 48226</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
145. Full Name, Mailing Address and Zip Code <b>Jonathan Stewart</b> <b>1641 Monroe St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/27/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Software Engineer</b> Name and Address of Employer <b>Aon</b> <b>1641 Monroe St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
146. Full Name, Mailing Address and Zip Code <b>Merle Coe III</b> <b>3116 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
147. Full Name, Mailing Address and Zip Code <b>Ann Caspari</b> <b>1721 Kenyon St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Early Childhood Education Specialist</b> Name and Address of Employer <b>National Air and Space Museum</b> <b>600 Independence Ave SW, Washington, DC 20597</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
148. Full Name, Mailing Address and Zip Code <b>Christoper Jarman</b> <b>3101 18th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b>			

## 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
149. Full Name, Mailing Address and Zip Code <b>Leo Sanchez</b> <b>3328 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		\$ 50.00
150. Full Name, Mailing Address and Zip Code <b>Carolyn Kari</b> <b>1719 Hobart St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		\$ 50.00
151. Full Name, Mailing Address and Zip Code <b>Mark Simon</b> <b>1852 Monroe St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		\$ 600.00
152. Full Name, Mailing Address and Zip Code <b>Craig Far</b> <b>3116 16th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>	
Contributor Type Individual	<b>Occupation Education Trainer</b> Name and Address of Employer <b>Berlitz Inc.</b> <b>1500 K St NW, Washington, DC 20005</b>			
		Aggregate Year-To-date		\$ 150.00
153. Full Name, Mailing Address and Zip Code <b>Wendy Shue</b> <b>839 Lochmoor Blvd, Grosse Pointe, MI 48236</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Not Employed</b> Name and Address of Employer <b>Not Employed</b>			

## 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		<b>\$ 500.00</b>
154. Full Name, Mailing Address and Zip Code <b>Elissa Parker</b> <b>3207 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>3207 19th St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 125.00</b>
155. Full Name, Mailing Address and Zip Code <b>Donald Salzman</b> <b>3114 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Lawyer</b> Name and Address of Employer <b>Skadden</b> <b>3114 19th St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 250.00</b>
156. Full Name, Mailing Address and Zip Code <b>Matthew Brandeburg</b> <b>1615 Kenyon St NW Apt 22, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Director</b> Name and Address of Employer <b>Data Machines Corp</b> <b>1615 Kenyon St NW Apt 22, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
157. Full Name, Mailing Address and Zip Code <b>Heidi Johnson</b> <b>3220 17th St NW Apt 107, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Financial HealthNetwork</b> <b>3220 17th St NW Apt 107, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
158. Full Name, Mailing Address and Zip Code <b>Katherine Garrett</b> <b>3114 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>3114 19th St NW, Washington, DC 20010</b>			

## 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		<b>\$ 250.00</b>
159. Full Name, Mailing Address and Zip Code <b>Elissa Parker</b> <b>3207 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>3207 19th St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 125.00</b>
160. Full Name, Mailing Address and Zip Code <b>Payton Chung</b> <b>560 N St SW, Washington, DC 20024</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Self employed</b> Name and Address of Employer <b>Self</b> <b>560 N St SW, Washington, DC 20024</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
161. Full Name, Mailing Address and Zip Code <b>Arthuro Griffiths</b> <b>1907 Kenyon St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <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) <b>04/28/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Retired</b> Name and Address of Employer <b>Retired</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
162. Full Name, Mailing Address and Zip Code <b>Judy Byron</b> <b>1910 Park Rd NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/29/2024</b>	Amount of Each Receipt This Period <b>\$ 300.00</b>	
Contributor Type Individual	<b>Occupation Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>1910 Park Rd NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 300.00</b>
163. Full Name, Mailing Address and Zip Code <b>Victoria Wassmer</b> <b>1623 Hobart St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/29/2024</b>	Amount of Each Receipt This Period <b>\$ 40.00</b>	
Contributor Type Individual	<b>Occupation CFO</b> Name and Address of Employer <b>DOT</b> <b>1623 Hobart St NW, Washington, DC 20009</b>			

## 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		\$ 40.00
164. Full Name, Mailing Address and Zip Code <b>Mary Proctor</b> <b>324 G St SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>04/29/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> Not Employed Name and Address of Employer Not Employed <b>324 G St SE, Washington, DC 20003</b>			
		Aggregate Year-To-date		\$ 100.00
165. Full Name, Mailing Address and Zip Code <b>Robin Sandenburgh</b> <b>1651 Newton St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/01/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> Not Employed Name and Address of Employer Not Employed <b>1651 Newton St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		\$ 50.00
166. Full Name, Mailing Address and Zip Code <b>Geoffrey Landers-Nolan</b> <b>311 Chadham Ct, Bellefonte, PA 16823</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/02/2024</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>	
Contributor Type Individual	<b>Occupation</b> Counselor Name and Address of Employer <b>Forward Path Counseling</b> <b>253 Easterly Pkwy, State College, PA 16801</b>			
		Aggregate Year-To-date		\$ 20.00
167. Full Name, Mailing Address and Zip Code <b>Warner Session</b> <b>1811 12th St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <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) <b>05/03/2024</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>	
Contributor Type Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>Session Law Firm</b> <b>1200 New Hampshire Ave NW, Washington, DC 20036</b>			
		Aggregate Year-To-date		\$ 350.00

## 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

168. Full Name, Mailing Address and Zip Code <b>Mike Litt</b> <b>12 7th St SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/03/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consumer Advocate</b> Name and Address of Employer <b>US PIRG</b> <b>12 7th St SE, Washington, DC 20003</b>		
Aggregate Year-To-date			<b>\$ 25.00</b>
169. Full Name, Mailing Address and Zip Code <b>David Marlin</b> <b>2101 Connecticut Ave NW # NW-34, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>not employed</b> Name and Address of Employer <b>not employed</b> <b>2101 Connecticut Ave NW # NW-34, Washington, DC 20008</b>		
Aggregate Year-To-date			<b>\$ 50.00</b>
170. Full Name, Mailing Address and Zip Code <b>Aaron Myers</b> <b>3349 18th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Artist</b> Name and Address of Employer <b>Self</b> <b>3349 18th St NW, Washington, DC 20010</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
171. Full Name, Mailing Address and Zip Code <b>Paul Levy</b> <b>1698 Lanier Pl NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/03/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Lawyer</b> Name and Address of Employer <b>Public Citizen</b> <b>1600 20th St NW, Washington, DC 20009</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
172. Full Name, Mailing Address and Zip Code <b>Eric Magwood</b> <b>217 P St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/03/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Self</b> Name and Address of Employer <b>Self</b> <b>217 P St NW, Washington, DC 20001</b>		

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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
173. Full Name, Mailing Address and Zip Code <b>Susan Brooks</b> <b>64 U St NW # 1, Washington, DC 20001</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>05/06/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Chief Innovation Officer</b> Name and Address of Employer <b>RCM of Washington</b> <b>64 U St NW # 1, Washington, DC 20001</b>		
		Aggregate Year-To-date		
174. Full Name, Mailing Address and Zip Code <b>Amy Brooks</b> <b>298 Haywire Ln, Grafton, WV 26354</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>05/06/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> Name and Address of Employer <b>RCM of Washington</b> <b>298 Haywire Ln, Grafton, WV 26354</b>		
		Aggregate Year-To-date		
175. Full Name, Mailing Address and Zip Code <b>Frederick Covington</b> <b>2715 Matapeake Dr, Upper Marlboro, MD 20774</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>05/06/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>CEO</b> Name and Address of Employer <b>Ihoma Healthcare</b> <b>1629 K St NW Ste 300, Washington, DC 20006</b>		
		Aggregate Year-To-date		
176. Full Name, Mailing Address and Zip Code <b>Tania Jackson</b> <b>3128 Sherman Ave NW Apt 8, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>05/07/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self</b> <b>3128 Sherman Ave NW, Washington, DC 20010</b>		
		Aggregate Year-To-date		
				\$ 200.00

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

Ward 1 Residents for Brianne

177. Full Name, Mailing Address and Zip Code <b>Stephen Vetzner</b> <b>4514 Connecticut Ave NW Apt 309,</b> <b>Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/08/2024</b>	Amount of Each Receipt This Period <b>\$ 27.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not Employed Name and Address of Employer <b>Not Employed</b> <b>4514 Connecticut Ave NW Apt 309, Washington, DC 20008</b>		
Aggregate Year-To-date		<b>\$ 27.00</b>	
178. Full Name, Mailing Address and Zip Code <b>Danielle Darby</b> <b>64 U St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/08/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> HealthCare / IDD Name and Address of Employer <b>RCM of Washington</b> <b>64 New York Ave NE, Washington, DC 20002</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
179. Full Name, Mailing Address and Zip Code <b>Constance Reese</b> <b>11314 Wycombe Park Ln, Glenn Dale, MD 20769</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/08/2024</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Program Director Name and Address of Employer <b>Community Multi-Services Inc.</b> <b>8401 Colesville Rd, Silver Spring, MD 20910</b>		
Aggregate Year-To-date		<b>\$ 200.00</b>	
180. Full Name, Mailing Address and Zip Code <b>Terrance King</b> <b>3400 Martin Luther King Jr Ave SE,</b> <b>Washington, DC 20032</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/09/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> CEO Name and Address of Employer <b>NCC</b> <b>3400 Martin Luther King Jr Ave SE, Washington, DC 20032</b>		
Aggregate Year-To-date		<b>\$ 50.00</b>	

## 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

181. Full Name, Mailing Address and Zip Code <b>Jaime Fearer</b> <b>1218 Oates St NE, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/10/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Asst. Dir. of Planning Name and Address of Employer <b>City of Greenbelt</b> <b>25 Crescent Rd, Greenbelt, MD 20770</b>		
Aggregate Year-To-date		<b>\$ 50.00</b>	
182. Full Name, Mailing Address and Zip Code <b>Eduardo Ferrer</b> <b>1013 Evarts St NE, Washington, DC 20018</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/10/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Lawyer Name and Address of Employer <b>Georgetown University</b> <b>600 New Jersey Ave NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
183. Full Name, Mailing Address and Zip Code <b>Surafel Shiferaw</b> <b>8025 13th St, Silver Spring, MD 20910</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/10/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Media Advisor Name and Address of Employer <b>Djphatsu Media and Communications LLC</b> <b>8025 13th St, Silver Spring, MD 20910</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
184. Full Name, Mailing Address and Zip Code <b>Roz Overstreet Gonzalez</b> <b>1215 Clifton St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/10/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>DC Public Defender Service</b> <b>633 3rd St NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
185. Full Name, Mailing Address and Zip Code <b>Katrina Chin Loy</b> <b>1006 Taylor St NE, Washington, DC 20017</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/14/2024</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Ophthalmology Surgeon Name and Address of Employer <b>Howard University</b> <b>1006 Taylor St NE, Washington, DC 20017</b>		
Aggregate Year-To-date		<b>\$ 450.00</b>	

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

Ward 1 Residents for Brianne

186. Full Name, Mailing Address and Zip Code <b>Harold King</b> 1796 Buckhead Ln NE, Atlanta, GA 30324	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/14/2024</b>	Amount of Each Receipt This Period <b>\$ 350.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> CEO Name and Address of Employer <b>Project ReDirect</b> 8555 16th St Ste 700, Silver Spring, MD 20910		
Aggregate Year-To-date		<b>\$ 350.00</b>	
187. Full Name, Mailing Address and Zip Code <b>Thomas Glassie</b> 1835 California St NW, Washington, DC 20009	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/15/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Attorney Name and Address of Employer <b>Self</b> 1835 California St NW, Washington, DC 20009		
Aggregate Year-To-date		<b>\$ 500.00</b>	
188. Full Name, Mailing Address and Zip Code <b>Mankelkelot Tesem</b> 1900 Grey Castle Way, Silver Spring, MD 20903	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/16/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not Employed Name and Address of Employer <b>Not Employed</b> 1900 Grey Castle Way, Silver Spring, MD 20903		
Aggregate Year-To-date		<b>\$ 50.00</b>	
189. Full Name, Mailing Address and Zip Code <b>Helen Kassa</b> 1336 U St NW, Washington, DC 20009	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/22/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Owner Name and Address of Employer <b>Hide Up</b> 1336 U St NW, Washington, DC 20009		
Aggregate Year-To-date		<b>\$ 250.00</b>	
190. Full Name, Mailing Address and Zip Code <b>Karen Cunningham</b> 1390 Kenyon St NW Apt 328, Washington, DC 20010	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/22/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Executive Director Name and Address of Employer <b>Capitol Hill Group Ministry</b> 415 2nd St NE Fl 3, Washington, DC 20002		
Aggregate Year-To-date		<b>\$ 50.00</b>	

## 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

191. Full Name, Mailing Address and Zip Code <b>Jeanie Lazarov</b> <b>6150 Shadywood Rd, Elkridge, MD 21075</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/23/2024</b>	Amount of Each Receipt This Period <b>\$ 18.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date			<b>\$ 18.00</b>
192. Full Name, Mailing Address and Zip Code <b>Martha Lynch</b> <b>9207 Three Oaks Dr, Silver Spring, MD 20901</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/23/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date			<b>\$ 500.00</b>
193. Full Name, Mailing Address and Zip Code <b>Precious Myers-Brown</b> <b>145 Fleet St PMB 235, Oxon Hill, MD 20745</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/23/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Owner Name and Address of Employer <b>Vista Supports, LLC</b> <b>853 New Jersey Ave SE, Washington, DC 20003</b>		
Aggregate Year-To-date			<b>\$ 250.00</b>
194. Full Name, Mailing Address and Zip Code <b>Henry Krokosky</b> <b>3524 W Grand Meadows Dr, Appleton, WI 54914</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/27/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not Employed Name and Address of Employer Not Employed <b>3524 W Grand Meadows Dr, Appleton, WI 54914</b>		
Aggregate Year-To-date			<b>\$ 100.00</b>
195. Full Name, Mailing Address and Zip Code <b>Thomas Kahn</b> <b>4821 Foxhall Cres NW, Washington, DC 20007</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/29/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date			<b>\$ 250.00</b>

## 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

196. Full Name, Mailing Address and Zip Code <b>Richard Silber</b> <b>3562 Alton Pl NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/29/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Adventure Travel</b> Name and Address of Employer <b>International Mountain Trekking</b> <b>3562 Alton Pl NW, Washington, DC 20008</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
197. Full Name, Mailing Address and Zip Code <b>Barbara Goldberg Goldman</b> <b>10030 Carmelita Dr, Potomac, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>05/30/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Owner</b> Name and Address of Employer <b>Regal</b> <b>133 Rollins Ave, Rockville, MD 20852</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
198. Full Name, Mailing Address and Zip Code <b>Geoffrey Landers-Nolan</b> <b>311 Chadham Ct, Bellefonte, PA 16823</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/02/2024</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Counselor</b> Name and Address of Employer <b>Forward Path Counseling</b> <b>253 Easterly Pkwy, State College, PA 16801</b>		
Aggregate Year-To-date		<b>\$ 30.00</b>	
199. Full Name, Mailing Address and Zip Code <b>Tania Jackson</b> <b>3128 Sherman Ave NW Apt 8, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self</b> <b>3128 Sherman Ave NW, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 250.00</b>	
200. Full Name, Mailing Address and Zip Code <b>Aaron Myers</b> <b>3349 18th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Artist</b> Name and Address of Employer <b>Self</b> <b>3349 18th St NW, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 150.00</b>	

## 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

201. Full Name, Mailing Address and Zip Code <b>Steven Sheffey</b> <b>2700 Woodley Rd NW Unit 604, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>SRS Consulting LLC</b> <b>2700 Woodley Rd NW Unit 604, Washington, DC 20008</b>		
Aggregate Year-To-date		<b>\$ 50.00</b>	
202. Full Name, Mailing Address and Zip Code <b>David Harris</b> <b>3065 Porter St NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/03/2024</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Owner</b> Name and Address of Employer <b>David Harris</b> <b>3065 Porter St NW, Washington, DC 20008</b>		
Aggregate Year-To-date		<b>\$ 200.00</b>	
203. Full Name, Mailing Address and Zip Code <b>Kerry Pearson</b> <b>700 New Hampshire Ave NW, Washington, DC 20037</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/09/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Development Services</b> Name and Address of Employer <b>Self</b> <b>700 New Hampshire Ave NW, Washington, DC 20037</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
204. Full Name, Mailing Address and Zip Code <b>Heather Foote</b> <b>2707 Adams Mill Rd NW Apt 307, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/10/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Transportation Policy Consultant</b> Name and Address of Employer <b>Varies</b> <b>2707 Adams Mill Rd NW Apt 307, Washington, DC 20009</b>		
Aggregate Year-To-date		<b>\$ 50.00</b>	

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

Ward 1 Residents for Brianne

205. Full Name, Mailing Address and Zip Code <b>Alberto Ramos</b> <b>1801 Clydesdale Pl NW Apt 721, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/10/2024</b>	Amount of Each Receipt This Period <b>\$ 35.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Graphic Designer</b> Name and Address of Employer <b>Self</b> <b>1801 Clydesdale Pl NW Apt 721, Washington, DC 20009</b>		
Aggregate Year-To-date		<b>\$ 35.00</b>	
206. Full Name, Mailing Address and Zip Code <b>Maria Gomez</b> <b>1628 Hobart St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/12/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
207. Full Name, Mailing Address and Zip Code <b>Alexandra Dodds</b> <b>1520 Buchanan St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/12/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Digital Strategist</b> Name and Address of Employer <b>Self Employed</b> <b>1520 Buchanan St NW, Washington, DC 20011</b>		
Aggregate Year-To-date		<b>\$ 25.00</b>	
208. Full Name, Mailing Address and Zip Code <b>Joel Cohn</b> <b>3001 Veazey Ter NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/12/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>DC Government</b> <b>2000 14th St NW, Washington, DC 20009</b>		
Aggregate Year-To-date		<b>\$ 250.00</b>	
209. Full Name, Mailing Address and Zip Code <b>Kevin Ballie</b> <b>1622 26th Pl SE Unit 2, Washington, DC 20020</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/12/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Organizing Director</b> Name and Address of Employer <b>DC Action</b> <b>1156 15th st NW Ste 700, Washington, DC 20005</b>		

## 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		<b>\$ 25.00</b>
210. Full Name, Mailing Address and Zip Code <b>Jayme Epstein</b> <b>2743 Woodley Pl NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/12/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Volunteer Coordinator</b> Name and Address of Employer <b>Justice Arts Coalition</b> <b>2743 Woodley Pl NW, Washington, DC 20008</b>		
	Aggregate Year-To-date		<b>\$ 25.00</b>
211. Full Name, Mailing Address and Zip Code <b>William Lightfood</b> <b>1609 Kalmia Rd NW, Washington, DC 20012</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/13/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b>		
	Aggregate Year-To-date		<b>\$ 500.00</b>
212. Full Name, Mailing Address and Zip Code <b>John Scullion</b> <b>41 Quincy Pl NW Apt 2, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/16/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Researcher</b> Name and Address of Employer <b>DSCC</b> <b>120 Maryland Ave NE, Washington, DC 20002</b>		
	Aggregate Year-To-date		<b>\$ 100.00</b>
213. Full Name, Mailing Address and Zip Code <b>Sheila Reid</b> <b>1203 Columbia Rd NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/17/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Real Estate Broker</b> Name and Address of Employer <b>Avanti Real Estate Services</b> <b>3421 14th St NW, Washington, DC 20010</b>		
	Aggregate Year-To-date		<b>\$ 100.00</b>
214. Full Name, Mailing Address and Zip Code <b>Tim Cohen</b> <b>2753 Woodley Pl NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/17/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Exeuctive</b> Name and Address of Employer <b>Hillel; The Foundation for Campus Jewish Life</b> <b>800 8th St NW, Washington, DC 20001</b>		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 100.00</b>
215. Full Name, Mailing Address and Zip Code <b>David Marlin</b> <b>2101 Connecticut Ave NW # NW-34,</b> <b>Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/17/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation not employed</b> Name and Address of Employer <b>not employed</b> <b>2101 Connecticut Ave NW # NW-34, Washington,</b> <b>DC 20008</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
216. Full Name, Mailing Address and Zip Code <b>Renana Fox</b> <b>1105 Queen St NE Apt 1, Washington, DC</b> <b>20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2024</b>	Amount of Each Receipt This Period <b>\$ 18.00</b>	
Contributor Type Individual	<b>Occupation Teacher</b> Name and Address of Employer <b>DCPS</b> <b>1105 queen st NE, Washington, DC 20002</b>			
		Aggregate Year-To-date		<b>\$ 18.00</b>
217. Full Name, Mailing Address and Zip Code <b>Mark Simpson</b> <b>701 Quincy St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/18/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Senior Director</b> Name and Address of Employer <b>Golden Triangle BID</b> <b>701 Quincy St NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
218. Full Name, Mailing Address and Zip Code <b>Alexandra Wyatt</b> <b>1406 Lawrence St NE, Washington, DC 20017</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/19/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Policy and Regulatory Manager</b> Name and Address of Employer <b>GRID Alternatives</b> <b>1711 Ocean St, Oceano, CA 93445</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>

## 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

219. Full Name, Mailing Address and Zip Code <b>Sasha Gaye Angus</b> <b>1269 Delafield Pl NE, Washington, DC 20017</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2024</b>	Amount of Each Receipt This Period <b>\$ 300.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> CEO Name and Address of Employer <b>Manna Inc.</b> <b>1269 Delafield Pl NE, Washington, DC 20017</b>		
Aggregate Year-To-date		<b>\$ 300.00</b>	
220. Full Name, Mailing Address and Zip Code <b>Darrel Droblich</b> <b>9700 Oakdale Dr, Rockville, MD 20850</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/21/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Nonprofit Leader Name and Address of Employer <b>Jubilee Housing</b> <b>9700 Oakdale Dr, Rockville, MD 20850</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
221. Full Name, Mailing Address and Zip Code <b>Luther Barden</b> <b>1748 Hobart St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/24/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Professor Name and Address of Employer <b>Howard University</b> <b>525 Bryant St NW, Washington, DC 20059</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
222. Full Name, Mailing Address and Zip Code <b>Patricio Zambrano</b> <b>1745 Irving St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/24/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Strategist Name and Address of Employer <b>Palantir</b> <b>1025 Thomas Jefferson St NW, Washington, DC 20007</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
223. Full Name, Mailing Address and Zip Code <b>Joseph LeMensae</b> <b>5545 41st St NW, Washington, DC 20015</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/25/2024</b>	Amount of Each Receipt This Period <b>\$ 35.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> Banker Name and Address of Employer <b>United Bank</b> <b>1700 K St NW Ste 750, Washington, DC 20006</b>		

## 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		\$ 35.00
224. Full Name, Mailing Address and Zip Code <b>T Michael Kerr</b> <b>529 Cedar St NW, Washington, DC 20012</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>06/27/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation Not Employed</b> Name and Address of Employer <b>Not Employed</b>			
		Aggregate Year-To-date		\$ 250.00
225. Full Name, Mailing Address and Zip Code <b>James Rich</b> <b>2 Wisconsin Cir Ste 1050, Chevy Chase, MD 20815</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/01/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Property Management</b> Name and Address of Employer <b>Zuckerman Gravely Mgt.</b> <b>2 Wisconsin Cir Ste 1050, Chevy Chase, MD 20815</b>			
		Aggregate Year-To-date		\$ 500.00
226. Full Name, Mailing Address and Zip Code <b>Geoffrey Landers-Nolan</b> <b>311 Chadham Ct, Bellefonte, PA 16823</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/02/2024</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>	
Contributor Type Individual	<b>Occupation Counselor</b> Name and Address of Employer <b>Forward Path Counseling</b> <b>253 Easterly Pkwy, State College, PA 16801</b>			
		Aggregate Year-To-date		\$ 40.00
227. Full Name, Mailing Address and Zip Code <b>Amy Mauro</b> <b>122 Kentucky Ave SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/02/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Consultant</b> Name and Address of Employer <b>Self</b> <b>122 Kentucky Ave SE, Washington, DC 20003</b>			
		Aggregate Year-To-date		\$ 50.00
228. Full Name, Mailing Address and Zip Code <b>John Settles</b> <b>1674 Tamarack St NW, Washington, DC 20012</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/02/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Consultant</b> Name and Address of Employer <b>Housing Affordability Solutions</b> <b>1674 Tamarack St NW, Washington, DC 20012</b>			

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 100.00</b>
229. Full Name, Mailing Address and Zip Code <b>Kate Farrar</b> <b>253 Ridgewood Rd, West Hartford, CT 06107</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/02/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Legislator</b> Name and Address of Employer <b>CT General Assembly</b> <b>253 Ridgewood Rd, West Hartford, CT 06107</b>		
		Aggregate Year-To-date		<b>\$ 50.00</b>
230. Full Name, Mailing Address and Zip Code <b>Aaron Myers</b> <b>3349 18th St NW, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Artist</b> Name and Address of Employer <b>Self</b> <b>3349 18th St NW, Washington, DC 20010</b>		
		Aggregate Year-To-date		<b>\$ 200.00</b>
231. Full Name, Mailing Address and Zip Code <b>Matthew Mayers</b> <b>1833 Ontario Pl NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/03/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Manager</b> Name and Address of Employer <b>PowerSwitch Action</b> <b>1833 Ontario Pl NW, Washington, DC 20009</b>		
		Aggregate Year-To-date		<b>\$ 50.00</b>
232. Full Name, Mailing Address and Zip Code <b>Stuart Karaffa</b> <b>2656 15th St NW Apt 302, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/03/2024</b>	Amount of Each Receipt This Period <b>\$ 27.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Analyst</b> Name and Address of Employer <b>IBT</b> <b>25 Louisiana Ave NW, Washington, DC 20001</b>		
		Aggregate Year-To-date		<b>\$ 27.00</b>
233. Full Name, Mailing Address and Zip Code <b>Tania Jackson</b> <b>3128 Sherman Ave NW Apt 8, Washington, DC 20010</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/05/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>Self</b> <b>3128 Sherman Ave NW, Washington, DC 20010</b>		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 300.00</b>
234. Full Name, Mailing Address and Zip Code <b>Caroline Kenney</b> <b>1305 D St SE, Washington, DC 20003</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/05/2024</b>  Amount of Each Receipt This Period  <b>\$ 200.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Real Estate Developer</b> Name and Address of Employer <b>Urban Atlantic</b> <b>7735 Old Georgetown Rd, Bethesda, MD 20814</b>		
		Aggregate Year-To-date		
235. Full Name, Mailing Address and Zip Code <b>Yoni Bock</b> <b>4916 Belt Rd NW, Washington, DC 20016</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/10/2024</b>  Amount of Each Receipt This Period  <b>\$ 500.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Humanitarian Advisor</b> Name and Address of Employer <b>Project HOPE</b> <b>4916 Belt Rd NW, Washington, DC 20016</b>		
		Aggregate Year-To-date		
236. Full Name, Mailing Address and Zip Code <b>Kevin Ballie</b> <b>1622 26th Pl SE Unit 2, Washington, DC 20020</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/10/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Organizing Director</b> Name and Address of Employer <b>DC Action</b> <b>1156 15th st NW Ste 700, Washington, DC 20005</b>		
		Aggregate Year-To-date		
237. Full Name, Mailing Address and Zip Code <b>Kathleen Golinski</b> <b>12655 Meadow Vista Dr, Lowell, MI 49331</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/10/2024</b>  Amount of Each Receipt This Period  <b>\$ 500.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>12655 Meadow Vista Dr, Lowell, MI 49331</b>		
		Aggregate Year-To-date		
238. Full Name, Mailing Address and Zip Code <b>Mark Histed</b> <b>1733 Harvard St NW, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/10/2024</b>  Amount of Each Receipt This Period  <b>\$ 500.00</b>
Contributor Type Individual		<b>Occupation</b> <b>Investigator</b> Name and Address of Employer <b>HHS</b> <b>3 Covent Dr, Bethesda, MD 20892</b>		
		Aggregate Year-To-date		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 500.00</b>
239. Full Name, Mailing Address and Zip Code <b>Elizabeth Furgurson</b> <b>624 Lamont St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>NGO</b> Name and Address of Employer <b>ASH</b> <b>624 Lamont St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
240. Full Name, Mailing Address and Zip Code <b>Mark Stern</b> <b>2118 N Capitol St NW, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Journalist</b> Name and Address of Employer <b>Slate</b> <b>2118 N Capitol St NW, Washington, DC 20002</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
241. Full Name, Mailing Address and Zip Code <b>Kelly Hunt</b> <b>4021 9th St NW Apt 509, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Chief of Staff</b> Name and Address of Employer <b>Office of Ward 4 Councilmember Janeese Lewis George</b> <b>1350 Pennsylvania Ave NW, Washington, DC 20004</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
242. Full Name, Mailing Address and Zip Code <b>Dahlia Sokolov</b> <b>2006 Kingle Rd NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Legislative</b> Name and Address of Employer <b>U.S. House of Representatives</b> <b>394 Ford House Office Building, Washington, DC 20515</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>

## 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

243. Full Name, Mailing Address and Zip Code <b>Miriam Szubin</b> <b>1716 Florida Ave NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Program Director</b> Name and Address of Employer <b>Edlavitch DCJCC</b> <b>1529 16th St NW, Washington, DC 20036</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
244. Full Name, Mailing Address and Zip Code <b>Patricia Westwater</b> <b>1819 Ingleside Ter NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Video Producer</b> Name and Address of Employer <b>Self</b> <b>1819 Ingleside Ter NW, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 200.00</b>	
245. Full Name, Mailing Address and Zip Code <b>David Marlin</b> <b>2101 Connecticut Ave NW # NW-34, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>not employed</b> Name and Address of Employer <b>not employed</b> <b>2101 Connecticut Ave NW # NW-34, Washington, DC 20008</b>		
Aggregate Year-To-date		<b>\$ 150.00</b>	
246. Full Name, Mailing Address and Zip Code <b>Judy Byron</b> <b>1910 Park Rd NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 150.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>1910 Park Rd NW, Washington, DC 20010</b>		
Aggregate Year-To-date		<b>\$ 450.00</b>	
247. Full Name, Mailing Address and Zip Code <b>Lisa Rucker</b> <b>1446 Belmont St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/11/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Manager</b> Name and Address of Employer <b>L&amp;C Pest Management</b> <b>1446 Belmont St NW, Washington, DC 20009</b>		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 50.00</b>
248. Full Name, Mailing Address and Zip Code <b>Dena Roth</b> <b>1827 Lamont St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/12/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Attorney</b> Name and Address of Employer <b>The Boeing Company</b> <b>929 Long Bridge Dr, Arlington, VA 22202</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
249. Full Name, Mailing Address and Zip Code <b>Nicole Hanrahan</b> <b>1004 D St SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/16/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Executive Director</b> Name and Address of Employer <b>LAYC Career Academy</b> <b>3224 16th St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
250. Full Name, Mailing Address and Zip Code <b>Lori Kaplan</b> <b>1741 Irving St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/17/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Not employed</b> Name and Address of Employer <b>Not employed</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
251. Full Name, Mailing Address and Zip Code <b>Janene Jackson</b> <b>2114 Rand Pl NE, Washington, DC 20002</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/17/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Attorney</b> Name and Address of Employer <b>Holland &amp; Knight</b> <b>800 17th St NW, Washington, DC 20006</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
252. Full Name, Mailing Address and Zip Code <b>Sheila Reid</b> <b>1203 Columbia Rd NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/17/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Real Estate Broker</b> Name and Address of Employer <b>Avanti Real Estate Services</b> <b>3421 14th St NW, Washington, DC 20010</b>			

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 150.00</b>
253. Full Name, Mailing Address and Zip Code <b>Maria Gomez</b> <b>1628 Hobart St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/18/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b>			
		Aggregate Year-To-date		<b>\$ 600.00</b>
254. Full Name, Mailing Address and Zip Code <b>Judith Weitz</b> <b>3130 19th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/18/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
255. Full Name, Mailing Address and Zip Code <b>Daniel Lewis</b> <b>3307 Rittenhouse St NW, Washington, DC 20015</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/19/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Project Manager</b> Name and Address of Employer <b>DNCC</b> <b>2400 16th St NW Apt 224, Washington, DC 20009</b>			
		Aggregate Year-To-date		<b>\$ 500.00</b>
256. Full Name, Mailing Address and Zip Code <b>David Grosso</b> <b>21 W Hughes St, Baltimore, MD 21230</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/19/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>ArentFox</b> <b>1717 K St NW, Washington, DC 20006</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
257. Full Name, Mailing Address and Zip Code <b>Emily Star</b> <b>4300 Kansas Ave NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/21/2024</b>	Amount of Each Receipt This Period <b>\$ 10.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Therapist</b> Name and Address of Employer <b>Bethesda Therapy</b> <b>4300 Kansas Ave NW, Washington, DC 20011</b>			

## 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		\$ 10.00
258. Full Name, Mailing Address and Zip Code <b>Zachary Knowles</b> <b>627 Harvard St NW, Washington, DC 20001</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/21/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation Fundraiser</b> Name and Address of Employer <b>Center for American Progress</b> <b>627 Harvard St NW, Washington, DC 20001</b>		
		Aggregate Year-To-date		
259. Full Name, Mailing Address and Zip Code <b>Renana Fox</b> <b>2517 Mozart Pl NW Apt 210, Washington, DC 20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/21/2024</b>  Amount of Each Receipt This Period  <b>\$ 18.00</b>
Contributor Type Individual		<b>Occupation Teacher</b> Name and Address of Employer <b>DCPS</b> <b>1105 queen st NE, Washington, DC 20002</b>		
		Aggregate Year-To-date		
260. Full Name, Mailing Address and Zip Code <b>Debby Shore</b> <b>3408 Patterson St NW, Washington, DC 20015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/27/2024</b>  Amount of Each Receipt This Period  <b>\$ 200.00</b>
Contributor Type Individual		<b>Occupation Social Service</b> Name and Address of Employer <b>Sasha Bruce Youthwork</b> <b>741 8th St SE, Washington, DC 20003</b>		
		Aggregate Year-To-date		
261. Full Name, Mailing Address and Zip Code <b>Mike Manatos</b> <b>8532 W Howell Rd, Bethesda, MD 20817</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/29/2024</b>  Amount of Each Receipt This Period  <b>\$ 250.00</b>
Contributor Type Individual		<b>Occupation Lobbyist</b> Name and Address of Employer <b>Manatos &amp; Manatos</b> <b>1100 New Hampshire Ave NW, Washington, DC 20037</b>		
		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

262. Full Name, Mailing Address and Zip Code <b>Jon Bouker</b> <b>6220 33rd St NW, Washington, DC 20015</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Lawyer</b> Name and Address of Employer <b>ArentFox Schiff LLP</b> <b>6220 33rd St NW, Washington, DC 20015</b>		
Aggregate Year-To-date		<b>\$ 250.00</b>	
263. Full Name, Mailing Address and Zip Code <b>Ana Harvey</b> <b>1600 Spring Gate Dr Unit 2116, Mc Lean, VA 22102</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Consultant</b> Name and Address of Employer <b>HarveyHudson Group LLC</b> <b>1600 Spring Gate Dr Unit 2116, Mc Lean, VA 22102</b>		
Aggregate Year-To-date		<b>\$ 250.00</b>	
264. Full Name, Mailing Address and Zip Code <b>Kim Alfonso</b> <b>1401 Blair Mill Rd, Silver Spring, MD 20910</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>CEO</b> Name and Address of Employer <b>Results One</b> <b>2010 Spruce Dr NW, Washington, DC 20012</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
265. Full Name, Mailing Address and Zip Code <b>Mark Lewis</b> <b>3307 Rittenhouse St NW, Washington, DC 20015</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Retired</b> Name and Address of Employer <b>Retired</b> <b>3307 Rittenhouse St NW, Washington, DC 20015</b>		
Aggregate Year-To-date		<b>\$ 500.00</b>	
266. Full Name, Mailing Address and Zip Code <b>Susannah Wellford</b> <b>6515 Callander Dr, Bethesda, MD 20817</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>CEO</b> Name and Address of Employer <b>Running Start</b> <b>6515 Callander Dr, Bethesda, MD 20817</b>		
Aggregate Year-To-date		<b>\$ 250.00</b>	

## 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 <b>Marc Israel</b> <b>5007 Butternut Dr, Rockville, MD 20853</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Rabbi</b> Name and Address of Employer <b>Tikvat Israel Congregation</b> <b>2200 Baltimore Rd, Rockville, MD 20851</b>		
Aggregate Year-To-date		<b>\$ 25.00</b>	
268. Full Name, Mailing Address and Zip Code <b>Stacy Burnette</b> <b>4506 New Hampshire Ave NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Comcast</b> <b>4506 New Hampshire Ave NW, Washington, DC 20011</b>		
Aggregate Year-To-date		<b>\$ 50.00</b>	
269. Full Name, Mailing Address and Zip Code <b>Stacie Banks</b> <b>1026 U St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Owner</b> Name and Address of Employer <b>Lee's Flowers</b> <b>1026 U St NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 100.00</b>	
270. Full Name, Mailing Address and Zip Code <b>Sekou Biddle</b> <b>7605 13th St NW, Washington, DC 20012</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Executive Director</b> Name and Address of Employer <b>UNCF</b> <b>1805 7th St NW, Washington, DC 20001</b>		
Aggregate Year-To-date		<b>\$ 250.00</b>	
271. Full Name, Mailing Address and Zip Code <b>Donald McGaugh</b> <b>813 Notre Dame St, Grosse Pointe, MI 48230</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>
<b>Contributor Type</b> Individual	<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>813 Notre Dame St, Grosse Pointe, MI 48230</b>		

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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
272. Full Name, Mailing Address and Zip Code <b>Jeanie Lazerov</b> <b>6150 Shadywood Rd, Elkridge, MD 21075</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Not Employed</b> Name and Address of Employer <b>Not Employed</b>			
		Aggregate Year-To-date		\$ 68.00
273. Full Name, Mailing Address and Zip Code <b>Luz Martinez</b> <b>1001 4th St SW Apt 636, Washington, DC 20024</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Chief of Staff</b> Name and Address of Employer <b>OAG</b> <b>400 6th St NW, Washington, DC 20001</b>			
		Aggregate Year-To-date		\$ 50.00
274. Full Name, Mailing Address and Zip Code <b>Edwin Sorto</b> <b>4015 Utah Ave, Brentwood, MD 20722</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Educator</b> Name and Address of Employer <b>KIPP DC</b> <b>4015 Utah Ave, Brentwood, MD 20722</b>			
		Aggregate Year-To-date		\$ 100.00
275. Full Name, Mailing Address and Zip Code <b>Timothy Gerson</b> <b>1612 V St NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation VP and Chief Strategy Officer</b> Name and Address of Employer <b>NCRP</b> <b>1900 L St NW Ste 825, Washington, DC 20036</b>			
		Aggregate Year-To-date		\$ 50.00
276. Full Name, Mailing Address and Zip Code <b>Rebecca Geller</b> <b>8013 Chippenham Ct, Fairfax Station, VA 22039</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Attorney</b> Name and Address of Employer <b>The Geller Law Group</b> <b>4000 Legato Rd Ste 1100, Fairfax, VA 22033</b>			

## 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		<b>\$ 500.00</b>
277. Full Name, Mailing Address and Zip Code <b>Sally Norby</b> <b>12201 SW 29th Ave, Portland, OR 97219</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/29/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>12201 SW 29th Ave, Portland, OR 97219</b>		
		Aggregate Year-To-date		<b>\$ 50.00</b>
278. Full Name, Mailing Address and Zip Code <b>Roger Clark</b> <b>1415 Montague St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/29/2024</b>  Amount of Each Receipt This Period  <b>\$ 400.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Squire Patton Boggs</b> <b>2550 M St NW, Washington, DC 20037</b>		
		Aggregate Year-To-date		<b>\$ 400.00</b>
279. Full Name, Mailing Address and Zip Code <b>Mark Buscaino</b> <b>124 Hamilton Ave, Silver Spring, MD 20901</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/30/2024</b>  Amount of Each Receipt This Period  <b>\$ 250.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Forester</b> Name and Address of Employer <b>Casey Trees</b> <b>124 Hamilton Ave, Silver Spring, MD 20901</b>		
		Aggregate Year-To-date		<b>\$ 250.00</b>
280. Full Name, Mailing Address and Zip Code <b>Janeese George</b> <b>6207 8th St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/30/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Legislator</b> Name and Address of Employer <b>DC Council</b> <b>6207 8th St NW, Washington, DC 20011</b>		
		Aggregate Year-To-date		<b>\$ 50.00</b>
281. Full Name, Mailing Address and Zip Code <b>Mary Proctor</b> <b>324 G St SE, Washington, DC 20003</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/30/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Not Employed</b> Name and Address of Employer <b>Not Employed</b> <b>324 G St SE, Washington, DC 20003</b>		

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

Ward 1 Residents for Brianne

		Aggregate Year-To-date		<b>\$ 150.00</b>
282. Full Name, Mailing Address and Zip Code <b>Susan Sutorka</b> <b>1304 Beaconsfield Ave, Grosse Pointe, MI 48230</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/30/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Senior Specialist for Strategic Initiatives</b> Name and Address of Employer <b>UM</b> <b>3003 S State St, Ann Arbor, MI 48109</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
283. Full Name, Mailing Address and Zip Code <b>Natalie Avery</b> <b>1838 Monroe St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/30/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Non profit exec</b> Name and Address of Employer <b>Friendship heights alliance</b> <b>1838 Monroe St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
284. Full Name, Mailing Address and Zip Code <b>Lauren Biel</b> <b>7309 Delfield St, Chevy Chase, MD 20815</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/30/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Not employed</b> Name and Address of Employer <b>Not employed</b> <b>7309 Delfield St, Chevy Chase, MD 20815</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
285. Full Name, Mailing Address and Zip Code <b>Bryan Fisher</b> <b>3751 Blackstone Dr Unit 2B, Park City, UT 84098</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/30/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Communications</b> Name and Address of Employer <b>UnitedHealth Group</b> <b>3751 Blackstone Dr Unit 2B, Park City, UT 84098</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
286. Full Name, Mailing Address and Zip Code <b>Emma Pinter</b> <b>10755 Tennyson Way, Westminster, CO 80031</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/30/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Commissioner</b> Name and Address of Employer <b>Adams County</b> <b>10755 Tennyson Way, Westminster, CO 80031</b>			

## 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
287. Full Name, Mailing Address and Zip Code <b>Marla Tanenbaum</b> <b>2000 Tower Oaks Blvd Fl 8, Rockville, MD</b> <b>20852</b>		<b>Contribution Type</b> <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) <b>07/30/2024</b>  Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Co-owner</b>		
		Name and Address of Employer <b>Washington Nationals</b> <b>1500 S Capitol St SE, Washington, DC 20003</b>		
		Aggregate Year-To-date		\$ 250.00
288. Full Name, Mailing Address and Zip Code <b>Callie Riley</b> <b>2001 16th St NW Apt 602, Washington, DC</b> <b>20009</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>07/30/2024</b>  Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Managing Director</b>		
		Name and Address of Employer <b>Cambiar Education</b> <b>2001 16th St NW Apt 602, Washington, DC 20009</b>		
		Aggregate Year-To-date		\$ 50.00
289. Full Name, Mailing Address and Zip Code <b>Kat Scott</b> <b>6800 Georgia Ave NW, Washington, DC 20012</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>07/31/2024</b>  Amount of Each Receipt This Period <b>\$ 100.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Attorney</b>		
		Name and Address of Employer <b>Wiley Rein</b> <b>6530 5th St NW, Washington, DC 20012</b>		
		Aggregate Year-To-date		\$ 100.00
290. Full Name, Mailing Address and Zip Code <b>Shira Stutman</b> <b>3818 Ingomar St NW, Washington, DC 20015</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>07/31/2024</b>  Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Rabbi</b>		
		Name and Address of Employer <b>Mixed Multitudes</b> <b>3818 Ingomar St NW, Washington, DC 20015</b>		
		Aggregate Year-To-date		\$ 500.00
291. Full Name, Mailing Address and Zip Code <b>Emily Lamia</b> <b>3932 NE 11th Ave, Portland, OR 97212</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) <b>07/31/2024</b>  Amount of Each Receipt This Period <b>\$ 50.00</b>
<b>Contributor Type</b> Individual		<b>Occupation</b> <b>Coach</b>		
		Name and Address of Employer <b>Self</b> <b>3932 NE 11th Ave, Portland, OR 97212</b>		

## 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
292. Full Name, Mailing Address and Zip Code <b>David Meadows</b> <b>305 K St SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> Not employed Name and Address of Employer <b>Not employed</b> <b>305 K St SE, Washington, DC 20003</b>			
		Aggregate Year-To-date		\$ 50.00
293. Full Name, Mailing Address and Zip Code <b>Kenn Sharpe</b> <b>102 Oakford Ave, Edgewater, MD 21037</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 200.00</b>	
Contributor Type Individual	<b>Occupation</b> Not employed Name and Address of Employer <b>Not employed</b> <b>102 Oakford Ave, Edgewater, MD 21037</b>			
		Aggregate Year-To-date		\$ 200.00
294. Full Name, Mailing Address and Zip Code <b>Daniel Turner</b> <b>4214 Argyle Ter NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation</b> CEO Name and Address of Employer <b>TCG</b> <b>7348 Georgia Ave NW, Washington, DC 20012</b>			
		Aggregate Year-To-date		\$ 500.00
295. Full Name, Mailing Address and Zip Code <b>Norman Glasgow</b> <b>10513 Alloway Dr, Potomac, MD 20854</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> Not employed Name and Address of Employer <b>Not employed</b> <b>10513 Alloway Dr, Potomac, MD 20854</b>			
		Aggregate Year-To-date		\$ 100.00
296. Full Name, Mailing Address and Zip Code <b>Sara Gibson</b> <b>1719 Lanier Pl NW, Washington, DC 20009</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> CEO Name and Address of Employer <b>20 Degrees</b> <b>1791 Lanier Pl NW, Washington, DC 20009</b>			

## 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		<b>\$ 250.00</b>
297. Full Name, Mailing Address and Zip Code <b>Herb Miller</b> <b>1108 Southard St, Key West, FL 33040</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/31/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation Not employed</b> Name and Address of Employer <b>Not employed</b> <b>1108 Southard St, Key West, FL 33040</b>		
		Aggregate Year-To-date		
298. Full Name, Mailing Address and Zip Code <b>Maureen Dwyer</b> <b>3111 Bellevue Ave, Hyattsville, MD 20785</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/31/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation Executive Director</b> Name and Address of Employer <b>Sitar Arts Center</b> <b>3111 Bellevue Ave, Hyattsville, MD 20785</b>		
		Aggregate Year-To-date		
299. Full Name, Mailing Address and Zip Code <b>Susan Burton</b> <b>1328 Ingraham St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/31/2024</b>  Amount of Each Receipt This Period  <b>\$ 50.00</b>
Contributor Type Individual		<b>Occupation Director</b> Name and Address of Employer <b>NACHC</b> <b>1328 Ingraham St NW, Washington, DC 20011</b>		
		Aggregate Year-To-date		
300. Full Name, Mailing Address and Zip Code <b>Michelle Sterntal</b> <b>1374 Taylor St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/31/2024</b>  Amount of Each Receipt This Period  <b>\$ 100.00</b>
Contributor Type Individual		<b>Occupation Director of Government Affairs</b> Name and Address of Employer <b>Community Catalyst</b> <b>1374 Taylor St NW, Washington, DC 20011</b>		
		Aggregate Year-To-date		
301. Full Name, Mailing Address and Zip Code <b>Emily Naden</b> <b>717 Upshur St NW, Washington, DC 20011</b>		<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year)  <b>07/31/2024</b>  Amount of Each Receipt This Period  <b>\$ 25.00</b>
Contributor Type Individual		<b>Occupation Government</b> Name and Address of Employer <b>House of Representatives</b> <b>1501 Longworth Hob, Washington, DC 20515</b>		
		Aggregate Year-To-date		

## 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
302. Full Name, Mailing Address and Zip Code <b>Rebecca Ennen</b> <b>1336 Taylor St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>	
Contributor Type Individual	<b>Occupation Fundraiser</b> Name and Address of Employer <b>Movement Voter PAC</b> <b>1336 Taylor St NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		\$ 500.00
303. Full Name, Mailing Address and Zip Code <b>Grace Dickerson</b> <b>3418 17th St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation Educational Advocate</b> Name and Address of Employer <b>Sinai House</b> <b>3100 Military Rd NW, Washington, DC 20015</b>			
		Aggregate Year-To-date		\$ 100.00
304. Full Name, Mailing Address and Zip Code <b>Tim Cohen</b> <b>2753 Woodley Pl NW, Washington, DC 20008</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation Exeuctive</b> Name and Address of Employer <b>Hillel; The Foundation for Campus Jewish Life</b> <b>800 8th St NW, Washington, DC 20001</b>			
		Aggregate Year-To-date		\$ 150.00
305. Full Name, Mailing Address and Zip Code <b>Lesley Muldoon</b> <b>1229 Kenyon St NW, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation Education Management</b> Name and Address of Employer <b>U.S. Department of Education</b> <b>1229 Kenyon St NW, Washington, DC 20010</b>			
		Aggregate Year-To-date		\$ 25.00
306. Full Name, Mailing Address and Zip Code <b>Calvin Smith</b> <b>11325 Classical Ln, Silver Spring, MD 20901</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation Community Relations</b> Name and Address of Employer <b>Elon Capital Partners</b> <b>11325 Classical Ln, Silver Spring, MD 20901</b>			

## 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		<b>\$ 250.00</b>
307. Full Name, Mailing Address and Zip Code <b>Jeffrey Stauffer</b> <b>4257 Westview Dr, Stewartstown, PA 17363</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Not employed</b> Name and Address of Employer <b>Not employed</b> <b>4257 Westview Dr, Stewartstown, PA 17363</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
308. Full Name, Mailing Address and Zip Code <b>Donald Squires</b> <b>1546 Hemlock St NW, Washington, DC 20012</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>US Government</b> <b>1546 Hemlock St NW, Washington, DC 20012</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
309. Full Name, Mailing Address and Zip Code <b>Alexandros Taliadoros</b> <b>929 Florida Ave NW Apt 5003, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Digital Director</b> Name and Address of Employer <b>DC Government</b> <b>400 6th St NW, Washington, DC 20001</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
310. Full Name, Mailing Address and Zip Code <b>Katie Schenk</b> <b>7905 Orchid St NW, Washington, DC 20012</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Public Health</b> Name and Address of Employer <b>Government</b> <b>7905 Orchid St NW, Washington, DC 20012</b>			
		Aggregate Year-To-date		<b>\$ 100.00</b>
311. Full Name, Mailing Address and Zip Code <b>Eric Magwood</b> <b>217 P St NW, Washington, DC 20001</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Self</b> Name and Address of Employer <b>Self</b> <b>217 P St NW, Washington, DC 20001</b>			

## 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		<b>\$ 500.00</b>
312. Full Name, Mailing Address and Zip Code <b>Breanna Bledsoe</b> <b>3513 Stella Blue Dr, Hyattsville, MD 20782</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Lawyer</b> Name and Address of Employer <b>Amazon</b> <b>3513 Stella Blue Dr, Hyattsville, MD 20782</b>			
		Aggregate Year-To-date		<b>\$ 250.00</b>
313. Full Name, Mailing Address and Zip Code <b>Haninah Levine</b> <b>717 Upshur St NW, Washington, DC 20011</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 25.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Attorney</b> Name and Address of Employer <b>Federal Government</b> <b>717 Upshur St NW, Washington, DC 20011</b>			
		Aggregate Year-To-date		<b>\$ 25.00</b>
314. Full Name, Mailing Address and Zip Code <b>Kathryn Tilley</b> <b>809 Otis Pl NW Apt 2, Washington, DC 20010</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Program Manager</b> Name and Address of Employer <b>PotomacWave Consulting, Inc.</b> <b>1725 Duke St Ste 320, Alexandria, VA 22314</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
315. Full Name, Mailing Address and Zip Code <b>Erik Salmi</b> <b>2907 Mills Ave NE, Washington, DC 20018</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 50.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Communications</b> Name and Address of Employer <b>DC Council</b> <b>1350 Pennsylvania Ave NW, Washington, DC 20004</b>			
		Aggregate Year-To-date		<b>\$ 50.00</b>
316. Full Name, Mailing Address and Zip Code <b>Christine Connerty-Marin</b> <b>1345 K st SE, Washington, DC 20003</b>	<b>Contribution Type</b> <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) <b>07/31/2024</b>	Amount of Each Receipt This Period <b>\$ 100.00</b>	
Contributor Type Individual	<b>Occupation</b> <b>Operations Manager</b> Name and Address of Employer <b>Agricity LLC</b> <b>1345 K st SE, Washington, DC 20003</b>			

### Ward 1 Residents for Brianne

	Aggregate Year-To-date	\$ 100.00
TOTAL This Period (Aggregate of all Receipt pages)		\$ 47,674.00

## ITEMIZED RECEIPTS FROM POLITICAL PARTY 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 <b>DC Legal</b> <b>1919 M St NW, Washington, DC 20036</b>	<b>Contribution Type</b> <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) <b>03/11/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Other;#PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
2. Full Name, Mailing Address and Zip Code <b>IUPAT Political Action Together Legislative</b> <b>Fiber City Center, Baltimore, MD 21076</b>	<b>Contribution Type</b> <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) <b>03/11/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Other;#PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
3. Full Name, Mailing Address and Zip Code <b>Baltimore Washington Construction</b> <b>11951 Freedom Dr Ste 310, Reston, VA 20190</b>	<b>Contribution Type</b> <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) <b>03/11/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Other;#PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>
4. Full Name, Mailing Address and Zip Code <b>DC Latino Caucus PAC</b> <b>1884 Columbia Rd NW Apt 714, Washington, DC 20009</b>	<b>Contribution Type</b> <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) <b>03/30/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Democratic			
Aggregate Year-To-date			<b>\$ 500.00</b>
5. Full Name, Mailing Address and Zip Code <b>Penny Gross for Supervisor Campaign</b> <b>PO Box 4665, Falls Church, VA 22044</b>	<b>Contribution Type</b> <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) <b>04/27/2024</b>	Amount of Each Receipt This Period <b>\$ 250.00</b>
<b>Contributor Type</b> Democratic			
Aggregate Year-To-date			<b>\$ 250.00</b>
6. Full Name, Mailing Address and Zip Code <b>Greater VA Carpenters PAC</b> <b>10238 Sycamore Dr, Ashland, VA 23005</b>	<b>Contribution Type</b> <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) <b>04/29/2024</b>	Amount of Each Receipt This Period <b>\$ 500.00</b>
<b>Contributor Type</b> Other;#PAC			
Aggregate Year-To-date			<b>\$ 500.00</b>

ITEMIZED RECEIPTS FROM POLITICAL PARTY COMMITTEES

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

Ward 1 Residents for Brianne

7. Full Name, Mailing Address and Zip Code IATSE Local 22 The Stagehands Union PO Box 92820, Washington, DC 20090	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) 06/21/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Other;#PAC			
	Aggregate Year-To-date		\$ 500.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 3,250.00

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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 <b>Checksforless.com</b> <b>200 Riverside Industrial Parkway,</b> <b>Portland, ME 04103</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>03/21/2024</b>	Amount of Each Expenditure This Period <b>\$ 47.95</b>
<b>Occupation</b>	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>366 Summer Street, somerville, MA</b> <b>02144</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>03/31/2024</b>	Amount of Each Expenditure This Period <b>\$ 2,028.39</b>
<b>Occupation</b>	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code <b>Tryst Catering</b> <b>2001 Fairview Ave NE, Washington,</b> <b>DC 20002</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>04/03/2024</b>	Amount of Each Expenditure This Period <b>\$ 783.34</b>
<b>Occupation</b>	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code <b>Michael Coscia</b> <b>PO Box 15084, Washington, DC 20003</b>	Purpose of Expenditure <b>Printing</b>	Date (month, day, year) <b>04/12/2024</b>	Amount of Each Expenditure This Period <b>\$ 5,279.86</b>
<b>Occupation</b>	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code <b>Tryst Catering</b> <b>2001 Fairview Ave NE, Washington,</b> <b>DC 20002</b>	Purpose of Expenditure <b>Catering/Refreshments</b>	Date (month, day, year) <b>04/12/2024</b>	Amount of Each Expenditure This Period <b>\$ 1,098.34</b>
<b>Occupation</b>	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>366 Summer Street, somerville, MA</b> <b>02144</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>04/28/2024</b>	Amount of Each Expenditure This Period <b>\$ 283.62</b>
<b>Occupation</b>	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code <b>Verdugo Strategies LLC</b> <b>PO Box 15084, Washington, DC 20003</b>	Purpose of Expenditure <b>Consultant</b>	Date (month, day, year) <b>05/01/2024</b>	Amount of Each Expenditure This Period <b>\$ 15,000.00</b>
<b>Occupation</b>	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code <b>Brianne Nadeau</b> <b>619 Lamont St NW, Washington, DC</b> <b>20010</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>05/11/2024</b>	Amount of Each Expenditure This Period  <b>\$ 505.43</b>
<b>Occupation</b>	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code <b>Ravenna Strategies</b> <b>1473 NW 83rd St, Seattle, WA 98117</b>	Purpose of Expenditure <b>Advertising</b>	Date (month, day, year) <b>05/11/2024</b>	Amount of Each Expenditure This Period  <b>\$ 3,000.00</b>
<b>Occupation</b>	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>366 Summer Street, somerville, MA</b> <b>02144</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>05/26/2024</b>	Amount of Each Expenditure This Period  <b>\$ 162.83</b>
<b>Occupation</b>	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code <b>Michael Coscia</b> <b>PO Box 15084, Washington, DC 20003</b>	Purpose of Expenditure <b>Printing</b>	Date (month, day, year) <b>05/28/2024</b>	Amount of Each Expenditure This Period  <b>\$ 484.08</b>
<b>Occupation</b>	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code <b>Richard Richardson</b> <b>6006 Arbutus Lane, Clinton, MD</b> <b>20735</b>	Purpose of Expenditure <b>Consultant</b>	Date (month, day, year) <b>06/24/2024</b>	Amount of Each Expenditure This Period  <b>\$ 2,600.00</b>
<b>Occupation</b>	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>366 Summer Street, somerville, MA</b> <b>02144</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>06/30/2024</b>	Amount of Each Expenditure This Period  <b>\$ 147.15</b>
<b>Occupation</b>	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code <b>Verdugo Strategies LLC</b> <b>PO Box 15084, Washington, DC 20003</b>	Purpose of Expenditure <b>Consultant</b>	Date (month, day, year) <b>07/01/2024</b>	Amount of Each Expenditure This Period  <b>\$ 15,000.00</b>
<b>Occupation</b>	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code <b>Michael Coscia</b> <b>PO Box 15084, Washington, DC 20003</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>07/12/2024</b>	Amount of Each Expenditure This Period  <b>\$ 135.15</b>
<b>Occupation</b>	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code <b>Industrial Bank</b> <b>2000 11th St NW, Washington, DC</b> <b>20001</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>07/15/2024</b>	Amount of Each Expenditure This Period  <b>\$ 25.00</b>
<b>Occupation</b>	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code <b>Industrial Bank</b> <b>2000 11th St NW, Washington, DC</b> <b>20001</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>07/15/2024</b>	Amount of Each Expenditure This Period  <b>\$ 25.00</b>
<b>Occupation</b>	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code <b>Brianne Nadeau</b> <b>619 Lamont St NW, Washington, DC</b> <b>20010</b>	Purpose of Expenditure <b>Computer and Web Expenses</b>	Date (month, day, year) <b>07/28/2024</b>	Amount of Each Expenditure This Period  <b>\$ 31.80</b>
<b>Occupation</b>	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code <b>ActBlue</b> <b>366 Summer Street, somerville, MA</b> <b>02144</b>	Purpose of Expenditure <b>Bank Fees</b>	Date (month, day, year) <b>07/28/2024</b>	Amount of Each Expenditure This Period  <b>\$ 155.45</b>
<b>Occupation</b>	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code <b>Brianne Nadeau</b> <b>619 Lamont St NW, Washington, DC</b> <b>20010</b>	Purpose of Expenditure <b>Postage</b>	Date (month, day, year) <b>07/29/2024</b>	Amount of Each Expenditure This Period  <b>\$ 112.00</b>
<b>Occupation</b>	Name and Address of Employer		
<b>TOTAL This Period (Aggregate of all expenditure pages)</b>			<b>\$ 46,905.39</b>

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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	Amount of Each
Maria Gomez		(month, day,	Expenditure This Period
1628 Hobart St NW, Washington, DC		year)	
20009		07/20/2024	\$ 100.00
Contributor Type			
Individual			

2. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date	Amount of Each
Mark Simon		(month, day,	Expenditure This Period
1852 Monroe St NW, Washington, DC		year)	
20010		07/31/2024	\$ 100.00
Contributor Type			
Individual			

TOTAL This Period (Aggregate of all expenditure pages)

\$ 200.00