



**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) No Recall in WARD 6	2. OCF Identification Number RECCC6246674
Address 219 10TH Street, SE	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20003	

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 2/1/2024 through 7/31/2024		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 2,475.00	
(c) Total Receipts [from Line (16)]	\$ 3,132.64	\$ 5,607.64
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 5,607.64	
7. Total Expenditures (from Line 22)	\$ 3,345.95	\$ 3,345.95
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 2,261.69	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

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

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

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

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

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

NOTARY PUBLIC

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

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

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

Marcella Hilt

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

07/30/2024

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

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

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) No Recall in WARD 6	REPORT COVERING THE PERIOD FROM: 2/1/2024 TO: 7/31/2024	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 3,132.64	\$ 5,607.64 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Non Contribution Receipts (Schedule A-8)	\$ 0.00	\$ 0.00 11(g)
(h) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e), (f) and (g)]	\$ 3,132.64	\$ 5,607.64 11(h)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 3,132.64	\$ 5,607.64 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 3,345.95	\$ 3,345.95 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 3,345.95	\$ 3,345.95 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	2,475.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	3,132.64
25. SUBTOTAL (add Lines 23 and 24)	\$	5,607.64
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	3,345.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	2,261.69

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) No Recall in WARD 6			
1. Full Name, Mailing Address and Zip Code Michael Wray 743 Morton St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Business Development Name and Address of Employer CSS 2750 Prosperity Ave, Fairfax, VA 22031		
Aggregate Year-To-date			\$ 100.00
2. Full Name, Mailing Address and Zip Code Deborah Edge 909 Massachusetts Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date			\$ 25.00
3. Full Name, Mailing Address and Zip Code Lauren Khouri 2120 Vermont Ave NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Correla & Puth 1400 16th St NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 100.00
4. Full Name, Mailing Address and Zip Code Mary Ellen Golcheski 825 Kentucky Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation government relations assoc Name and Address of Employer Merchant McIntyre & Assoc 1634 I St NW STE 200, Washington, DC 20006		
Aggregate Year-To-date			\$ 50.00
5. Full Name, Mailing Address and Zip Code Marc Mayerson 633 D St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Mayerson Firm 633 D St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

6. Full Name, Mailing Address and Zip Code Michael Godec 1339 E Capitol St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant		
	Name and Address of Employer Advanced Resources 1339 E Capitol St SE, Washington, DC 20003		
	Aggregate Year-To-date		\$ 100.00
7. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation		
	Name and Address of Employer Not Employed		
	Aggregate Year-To-date		\$ 25.00
8. Full Name, Mailing Address and Zip Code Shanna Smith 1016 Independence Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation		
	Name and Address of Employer Not Employed		
	Aggregate Year-To-date		\$ 25.00
9. Full Name, Mailing Address and Zip Code David Hoextet 125 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation		
	Name and Address of Employer Not Employed		
	Aggregate Year-To-date		\$ 25.00
10. Full Name, Mailing Address and Zip Code Edna Temaner 1023 N Carolina Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation self employed		
	Name and Address of Employer HIT 1023 N Carolina Ave SE, Washington, DC 20003		
	Aggregate Year-To-date		\$ 75.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

11. Full Name, Mailing Address and Zip Code David Fathi 3726 Van Ness St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer ACLU 915 15th St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 50.00
12. Full Name, Mailing Address and Zip Code Charles Burger 405 6th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Coldwell Banker 405 6th St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 100.00
13. Full Name, Mailing Address and Zip Code Wallace Mlynied 227 8th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Georgetown Law 600 New Jersey Ave NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 200.00
14. Full Name, Mailing Address and Zip Code Elizabeth Quaid 642 6th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Music Teacher Name and Address of Employer Mr. Mike's Music Together 1025 G St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 25.00
15. Full Name, Mailing Address and Zip Code Edward Ryder 1377 K St SE Apt 2, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Dir of Finance Name and Address of Employer Alexandria Transit 3000 Business Center Dr, Alexandria, VA 22314		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

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

No Recall in WARD 6

16. Full Name, Mailing Address and Zip Code Donna Fletcher 214 5th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/17/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 25.00
17. Full Name, Mailing Address and Zip Code Kelly Hunt 4021 9th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/17/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Chief of Staff Name and Address of Employer Ward 4 Councilmember 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 100.00
18. Full Name, Mailing Address and Zip Code Katherine Landfield 5112 38th St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/17/2024	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Budget Advocate Name and Address of Employer Fair Budget Coalition 5112 38th St NW, Washington, DC 20016		
Aggregate Year-To-date			\$ 75.00
19. Full Name, Mailing Address and Zip Code Sauleh Amhad Siddi 3446 Connecticut Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/18/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Modeler Name and Address of Employer Federal Government 3446 Connecticut Ave NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 25.00
20. Full Name, Mailing Address and Zip Code Edward Wendel 148 13th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/19/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

21. Full Name, Mailing Address and Zip Code Lee Storrow 1401 Pennsylvania Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/19/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 25.00	
22. Full Name, Mailing Address and Zip Code Skip Strobel 120 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/19/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 25.00	
23. Full Name, Mailing Address and Zip Code Katherine Arrington 511 4th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/19/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Supervisory Librarian Name and Address of Employer Blues DC FEP 511 4th St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 50.00	
24. Full Name, Mailing Address and Zip Code J. Peter Byrne 641 E St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/20/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Georgetown 641 E St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 100.00	
25. Full Name, Mailing Address and Zip Code Michael Merino 3606 Cleveland Ave, New Orleans, LA 70119	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/20/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 100.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

26. Full Name, Mailing Address and Zip Code Marc Mayerson 633 D St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/20/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Mayerson Firm 633 D St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 200.00	
27. Full Name, Mailing Address and Zip Code Sandra Moscoso 109 13th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/20/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 109 13th St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 100.00	
28. Full Name, Mailing Address and Zip Code Mintwood Strategies 2448 Massachusetts Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input checked="" type="checkbox"/> In Kind (Specify) Domain registration & protection	Date (month, day, year) 02/21/2024	Amount of Each Receipt This Period \$ 84.64
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 84.64	
29. Full Name, Mailing Address and Zip Code Michael Licht 1237 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not employed		
Aggregate Year-To-date		\$ 25.00	
30. Full Name, Mailing Address and Zip Code Anne Strauss 617 Upshur St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/28/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Labor Representative Name and Address of Employer National Nurses United 617 Upshur St NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 50.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

31. Full Name, Mailing Address and Zip Code Deborah Steiner 1050 New Jersey Ave NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Self 1050 New Jersey Ave NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 25.00	
32. Full Name, Mailing Address and Zip Code Janet Bacon 87 14th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 25.00	
33. Full Name, Mailing Address and Zip Code Skip Strobel 120 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 40.00	
34. Full Name, Mailing Address and Zip Code Rachel Kottler 503 Seward Sq SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/05/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer Sage Communications 503 Seward Sq SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 50.00	
35. Full Name, Mailing Address and Zip Code Kevin White 521 14th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Managing Director Name and Address of Employer National Housing Trust 521 14th St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 50.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

36. Full Name, Mailing Address and Zip Code Maria B Coppola 110 4th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/12/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer		
	Name and Address of Employer FTC 110 4th St SE, Washington, DC 20003		
	Aggregate Year-To-date		\$ 100.00
37. Full Name, Mailing Address and Zip Code Penny Cat 601 Pennsylvania Ave NW, Washington, DC 20004	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/14/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation		
	Name and Address of Employer Not Employed		
	Aggregate Year-To-date		\$ 10.00
38. Full Name, Mailing Address and Zip Code Allison McGill 1398 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/16/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Founder		
	Name and Address of Employer Lazarus 1398 K St SE, Washington, DC 20003		
	Aggregate Year-To-date		\$ 10.00
39. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation		
	Name and Address of Employer Not Employed		
	Aggregate Year-To-date		\$ 50.00
40. Full Name, Mailing Address and Zip Code Edward Wendel 148 13th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/16/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation		
	Name and Address of Employer Not Employed		
	Aggregate Year-To-date		\$ 125.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

41. Full Name, Mailing Address and Zip Code Matthew Nocella 4308 Georgia Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/26/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Communications Name and Address of Employer Ed Forward DC 4308 Georgia Ave NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 25.00	
42. Full Name, Mailing Address and Zip Code Nicholas Cheng 1444 E St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/30/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Analyst Name and Address of Employer Dept. of Defense 1444 E St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 25.00	
43. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/30/2024	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 85.00	
44. Full Name, Mailing Address and Zip Code Mandia Deskins 5739 Blaine St NE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/03/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Advocacy Name and Address of Employer NAACP 5739 Blaine St NE, Washington, DC 20019		
Aggregate Year-To-date		\$ 25.00	
45. Full Name, Mailing Address and Zip Code Skip Strobel 120 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/05/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 45.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

46. Full Name, Mailing Address and Zip Code Ed Lazere 3579 13th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/11/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Public Policy Analyst Name and Address of Employer UPO 3579 13th St NW, Washington, DC 20010	Aggregate Year-To-date \$ 100.00	
47. Full Name, Mailing Address and Zip Code Allison McGill 1398 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/14/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Founder Name and Address of Employer Lazarus 1398 K St SE, Washington, DC 20003	Aggregate Year-To-date \$ 20.00	
48. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed	Aggregate Year-To-date \$ 110.00	
49. Full Name, Mailing Address and Zip Code Nathan Schuur 245 16th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer SEC 100 F St NE, Washington, DC 20549	Aggregate Year-To-date \$ 25.00	
50. Full Name, Mailing Address and Zip Code Samuel Huxley 315 13th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/24/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer One on One Remainder 315 13th St NE, Washington, DC 20002	Aggregate Year-To-date \$ 50.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

51. Full Name, Mailing Address and Zip Code William Black 1220 Independence Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/27/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 200.00	
52. Full Name, Mailing Address and Zip Code William Black 1220 Independence Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/27/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 200.00	
53. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 135.00	
54. Full Name, Mailing Address and Zip Code Skip Strobel 120 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/05/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 50.00	
55. Full Name, Mailing Address and Zip Code Allison McGill 1398 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/14/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Founder Name and Address of Employer Lazarus 1398 K St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 30.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

56. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 160.00	
57. Full Name, Mailing Address and Zip Code Hayden Higgins 1710 E Denny Way, Seattle, WA 98122	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/24/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Comm Manager, Finance Name and Address of Employer World Resources Institute 10 G St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 10.00	
58. Full Name, Mailing Address and Zip Code Sharat Ganapati 12559 NW Hartford St, Portland, OR 97229	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Georgetown U 3715 W St NW, Washington, DC 20007		
Aggregate Year-To-date		\$ 25.00	
59. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2024	Amount of Each Receipt This Period \$ 6.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 166.00	
60. Full Name, Mailing Address and Zip Code Skip Strobel 120 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/05/2024	Amount of Each Receipt This Period \$ 3.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date		\$ 53.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

61. Full Name, Mailing Address and Zip Code Allison McGill 1398 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/14/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Founder		
Name and Address of Employer Lazarus 1398 K St SE, Washington, DC 20003			
Aggregate Year-To-date			\$ 40.00
62. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation		
Name and Address of Employer Not Employed			
Aggregate Year-To-date			\$ 191.00
63. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/01/2024	Amount of Each Receipt This Period \$ 6.00
Contributor Type Individual	Occupation		
Name and Address of Employer Not Employed			
Aggregate Year-To-date			\$ 197.00
64. Full Name, Mailing Address and Zip Code Skip Strobel 120 12th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/05/2024	Amount of Each Receipt This Period \$ 3.00
Contributor Type Individual	Occupation		
Name and Address of Employer Not Employed			
Aggregate Year-To-date			\$ 56.00
65. Full Name, Mailing Address and Zip Code Allison McGill 1398 K St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/14/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Founder		
Name and Address of Employer Lazarus 1398 K St SE, Washington, DC 20003			
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

No Recall in WARD 6

66. Full Name, Mailing Address and Zip Code Elizabeth Agle 777 C St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 222.00

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TOTAL This Period (Aggregate of all Receipt pages)	\$ 3,132.64
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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

No Recall in WARD 6

1. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 02/18/2024	Amount of Each Expenditure This Period \$ 144.30
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 02/25/2024	Amount of Each Expenditure This Period \$ 28.70
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/03/2024	Amount of Each Expenditure This Period \$ 3.96
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Gibson Print 5659 South Laburnum Ave, Henrico, VA 23231	Purpose of Expenditure Campaign Materials	Date (month, day, year) 03/04/2024	Amount of Each Expenditure This Period \$ 2,725.68
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Staples 3301 Jefferson Davis Highway, Alexandria, VA 22305	Purpose of Expenditure Campaign Materials	Date (month, day, year) 03/10/2024	Amount of Each Expenditure This Period \$ 75.20
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/10/2024	Amount of Each Expenditure This Period \$ 4.56
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/31/2024	Amount of Each Expenditure This Period \$ 3.37
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/07/2024	Amount of Each Expenditure This Period \$ 1.19
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/14/2024	Amount of Each Expenditure This Period \$ 4.35
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Marcella Hilt 219 10 St SE, Washington, DC 20003	Purpose of Expenditure Campaign Materials	Date (month, day, year) 04/17/2024	Amount of Each Expenditure This Period \$ 335.31
Occupation	Name and Address of Employer Retired		
11. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/21/2024	Amount of Each Expenditure This Period \$ 0.99
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/28/2024	Amount of Each Expenditure This Period \$ 10.87
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/05/2024	Amount of Each Expenditure This Period \$ 1.19
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/19/2024	Amount of Each Expenditure This Period \$ 1.39
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 05/26/2024	Amount of Each Expenditure This Period \$ 0.40
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/02/2024	Amount of Each Expenditure This Period \$ 1.23
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/09/2024	Amount of Each Expenditure This Period \$ 0.12
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/16/2024	Amount of Each Expenditure This Period \$ 1.39
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/07/2024	Amount of Each Expenditure This Period \$ 0.36
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/14/2024	Amount of Each Expenditure This Period \$ 0.40
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code Act Blue 366 Summer St, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/21/2024	Amount of Each Expenditure This Period \$ 0.99
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 3,345.95