



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) The Committee to Recall Brianne Nadeau	2. OCF Identification Number RECOTH246676
Address 2471 18th Street, F1 2	3. Is this report an Amendment? (Yes or No) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
City, State and Zip Code Washington, DC 20009	

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	\$ 14,488.89	
(c) Total Receipts [from Line (16)]	\$ 13,216.00	\$ 28,227.20
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 27,704.89	
7. Total Expenditures (from Line 22)	\$ 14,961.21	\$ 15,523.52
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 12,743.68	
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.

Mr. Elliot Howe

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

08/12/2024

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) The Committee to Recall Brianne Nadeau	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)	\$ 13,216.00	\$ 28,227.20 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)]	\$ 13,216.00	\$ 28,227.20 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]	\$ 13,216.00	\$ 28,227.20 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 13,436.21	\$ 13,991.52 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 1,525.00	\$ 1,532.00 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)]	\$ 1,525.00	\$ 1,532.00 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)]	\$ 14,961.21	\$ 15,523.52 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	14,488.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	13,216.00
25. SUBTOTAL (add Lines 23 and 24)	\$	27,704.89
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	14,961.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	12,743.68

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)

The Committee to Recall Brianne Nadeau

1. Full Name, Mailing Address and Zip Code Ari Zimmerman 1912 3rd St NE Apt 6, 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) 03/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Policy Director Name and Address of Employer BHfS		
Aggregate Year-To-date			\$ 50.00
2. Full Name, Mailing Address and Zip Code Nicholas Bannon 34 Q St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Soccer Coach Name and Address of Employer DC Eleven Football Club		
Aggregate Year-To-date			\$ 10.00
3. Full Name, Mailing Address and Zip Code Solomon Cobb 2611 Randolph St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation None Name and Address of Employer None		
Aggregate Year-To-date			\$ 5.00
4. Full Name, Mailing Address and Zip Code Derrick Chowyuk 4720 Southern Ave SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Insurance Producer Name and Address of Employer State Farm Insurance		
Aggregate Year-To-date			\$ 50.00
5. Full Name, Mailing Address and Zip Code Benjamin Sislen 1700 Lanier Pl NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self employed		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

6. Full Name, Mailing Address and Zip Code Stephen Kranz 593 Juan Anasco Dr, Longboat Key, FL 34228	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer McDermott Will & Emery		
Aggregate Year-To-date			\$ 500.00
7. Full Name, Mailing Address and Zip Code George Iverson 923 S St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Legislative Director Name and Address of Employer US House of Representatives		
Aggregate Year-To-date			\$ 50.00
8. Full Name, Mailing Address and Zip Code Parker Novak 965 Florida Ave NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Deputy Government Relations Director Name and Address of Employer USGLC		
Aggregate Year-To-date			\$ 25.00
9. Full Name, Mailing Address and Zip Code JOHARI A MOORE 2725 Connecticut Ave NW Apt 605, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer USNRC		
Aggregate Year-To-date			\$ 100.00
10. Full Name, Mailing Address and Zip Code Nicholas Mattera 3167 18th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/03/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

11. Full Name, Mailing Address and Zip Code Kshitij Patkar 2726 Ordway St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Government Employee Name and Address of Employer DHHS		
Aggregate Year-To-date			\$ 10.00
12. Full Name, Mailing Address and Zip Code Ishwar Chhikara 1414 Belmont St NW Apt 305, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Development Name and Address of Employer WB		
Aggregate Year-To-date			\$ 100.00
13. Full Name, Mailing Address and Zip Code Andrew Florance 3542 Newark St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/04/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation CEO Name and Address of Employer CoStar Group		
Aggregate Year-To-date			\$ 250.00
14. Full Name, Mailing Address and Zip Code Joseph Galli 4411 Cathedral Ave NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/05/2024	Amount of Each Receipt This Period \$ 125.00
Contributor Type Individual	Occupation Real Estate Investment Name and Address of Employer TBC		
Aggregate Year-To-date			\$ 125.00
15. Full Name, Mailing Address and Zip Code Rachel Mariner 610 Harvard St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/05/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Self Employed		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

16. Full Name, Mailing Address and Zip Code William Eacho 6710a Rockledge Dr Ste 400, Bethesda, MD 20817	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/05/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 100.00	
17. Full Name, Mailing Address and Zip Code Karen Kane-Levy 1512 Monroe St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/06/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Writer Name and Address of Employer Self-Employed		
Aggregate Year-To-date		\$ 25.00	
18. Full Name, Mailing Address and Zip Code Jamie Gregorian 215 17th 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) 03/07/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Counsel Name and Address of Employer DLA Piper		
Aggregate Year-To-date		\$ 250.00	
19. Full Name, Mailing Address and Zip Code Joshu Shih 1111 Army Navy Dr Apt 1024, Arlington, VA 22202	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/07/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Transportation Resource Associates, Inc.		
Aggregate Year-To-date		\$ 25.00	
20. Full Name, Mailing Address and Zip Code Jesse S Crew 1055 Piedmont Ave NE Unit 405, Atlanta, GA 30309	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/07/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Self-Employed Name and Address of Employer Self-Employed		
Aggregate Year-To-date		\$ 5.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

21. Full Name, Mailing Address and Zip Code Herman Pryor 1014 17th St NE Apt 4, 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) 03/07/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Management Consultant Name and Address of Employer Myar Solutions		
Aggregate Year-To-date			\$ 10.00
22. Full Name, Mailing Address and Zip Code Philip Gregory 2001 11th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Student Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 25.00
23. Full Name, Mailing Address and Zip Code Lynne Riedesel 1424 Monroe St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
24. Full Name, Mailing Address and Zip Code Richard Levy 1750 Saint Charles Ave, New Orleans, LA 70130	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> 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 \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 10.00
25. Full Name, Mailing Address and Zip Code Kenny Wright 2400 16th St NW Apt 408, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2024	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer CFTC		
Aggregate Year-To-date			\$ 150.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

26. Full Name, Mailing Address and Zip Code Eleanor F Shevlin 2006 Columbia Rd NW Apt 42, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/10/2024	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Professor of English Name and Address of Employer West Chester University of Pennsylvania		
Aggregate Year-To-date			\$ 40.00
27. Full Name, Mailing Address and Zip Code Ritika Robertson 1835 Ontario Pl NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/10/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Meta		
Aggregate Year-To-date			\$ 50.00
28. Full Name, Mailing Address and Zip Code Diana Alvarez 1390 Kenyon St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/13/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Lady D Invt		
Aggregate Year-To-date			\$ 500.00
29. Full Name, Mailing Address and Zip Code Christopher Schriever 919 T St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/14/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Sales Consulting Name and Address of Employer Blue House Sales Group		
Aggregate Year-To-date			\$ 100.00
30. Full Name, Mailing Address and Zip Code David Pettey 1020 Monroe St NW Apt 203, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/14/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Pilot Name and Address of Employer American Airlines		
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)

The Committee to Recall Brianne Nadeau

31. Full Name, Mailing Address and Zip Code Jennifer Thornton 3921 Law St, Houston, TX 77005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> 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 \$ 250.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer The Business Roundtable		
Aggregate Year-To-date			\$ 250.00
32. Full Name, Mailing Address and Zip Code Tim Baird 813 T St NW # B, 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) 03/15/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Sr Manager Name and Address of Employer ATA		
Aggregate Year-To-date			\$ 10.00
33. Full Name, Mailing Address and Zip Code Mitch Taylor 3313 Sherman Ave NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/15/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer Inova Healthcare System		
Aggregate Year-To-date			\$ 10.00
34. Full Name, Mailing Address and Zip Code Nicholas Monu 915 French St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/15/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Physician Name and Address of Employer MAPMG		
Aggregate Year-To-date			\$ 100.00
35. Full Name, Mailing Address and Zip Code Dan Degagne 1369 Parkwood Pl NW Unit 3, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/15/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Finance Name and Address of Employer Bechtel		
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)

The Committee to Recall Brianne Nadeau

36. Full Name, Mailing Address and Zip Code Bradley J Preamble 2100 11th St NW Apt 102, 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) 03/15/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Trial Attorney Name and Address of Employer US DOJ		
Aggregate Year-To-date			\$ 50.00
37. Full Name, Mailing Address and Zip Code Mark Tyndall 1101 Q St NW Unit PH1, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/15/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Shared Services LLC		
Aggregate Year-To-date			\$ 500.00
38. Full Name, Mailing Address and Zip Code Anthony Guzzardo 2100 11th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/15/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Flight Attendant Name and Address of Employer Jetblue		
Aggregate Year-To-date			\$ 25.00
39. Full Name, Mailing Address and Zip Code David Holly 526 10th 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) 03/17/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Cooley LLP		
Aggregate Year-To-date			\$ 500.00
40. Full Name, Mailing Address and Zip Code Scott Pearson 225 Touchdown Dr, Mountain Village, CO 81435	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/18/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Councilmember Name and Address of Employer Town of Mountain Village		
Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

41. Full Name, Mailing Address and Zip Code Anthony Hui 241 S 6th St, Philadelphia, PA 19106	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/21/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation CPA Name and Address of Employer Strouss Hui Roomberg Ellis		
Aggregate Year-To-date		\$ 500.00	
42. Full Name, Mailing Address and Zip Code Parker E Floyd 401 Holland Ln Apt 813, Alexandria, VA 22314	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Prospecting Manager Name and Address of Employer Targeted Victory		
Aggregate Year-To-date		\$ 35.00	
43. Full Name, Mailing Address and Zip Code Carolyn Inabinet 111 Glendale Dr, Summerville, SC 29485	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 2.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 2.00	
44. Full Name, Mailing Address and Zip Code Jan Miller 18760 Briarwood Dr, Kemp, TX 75143	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 25.00	
45. Full Name, Mailing Address and Zip Code Jannette LoBianco 3074 N 86th Pl, Scottsdale, AZ 85251	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 5.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

46. Full Name, Mailing Address and Zip Code Charles Petersen 836 S 150 W, Centerville, UT 84014	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
47. Full Name, Mailing Address and Zip Code James Leibertz 640 Westover Rd, Stamford, CT 06902	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
48. Full Name, Mailing Address and Zip Code Brian Basham 1613 High Meadows Dr, Norman, OK 73071	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
49. Full Name, Mailing Address and Zip Code Virginia Arnold 3856 Edinburgh Rd, Columbia, SC 29204	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
50. Full Name, Mailing Address and Zip Code Ron Masters 2227 Woodland Dr, Richmond, TX 77406	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input checked="" type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 1.00
Contributor Type Individual	Occupation Insurance Broker Name and Address of Employer PCP		
Aggregate Year-To-date			\$ 1.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

51. Full Name, Mailing Address and Zip Code Charles Reed 314 Tanglewood Rd, Harriman, TN 37748	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 2.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 2.00
52. Full Name, Mailing Address and Zip Code Alex Madison 763 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) 03/22/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer Deb & Alex Properties		
Aggregate Year-To-date			\$ 10.00
53. Full Name, Mailing Address and Zip Code James Lewis 97 Frantz Ct, Morgantown, PA 19543	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
54. Full Name, Mailing Address and Zip Code Carter Eggers 1181 Evelyn Ave, Ypsilanti, MI 48198	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
55. Full Name, Mailing Address and Zip Code Deborah G Madewell 21460 Hardison Ln, Windsor, VA 23487	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 11.00
Contributor Type Individual	Occupation Retired Teacher Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 11.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

56. Full Name, Mailing Address and Zip Code Sylvia Theryoung 410 Converse Ct, Lake Orion, MI 48362	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
57. Full Name, Mailing Address and Zip Code Lorena Jackson 625 County Road 101, Brownwood, TX 76801	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
58. Full Name, Mailing Address and Zip Code Karen J Steinkruger 108 N Bell St, Tallula, IL 62688	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/23/2024	Amount of Each Receipt This Period \$ 35.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 35.00
59. Full Name, Mailing Address and Zip Code Eric H Schultz 1414 S St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/25/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self		
Aggregate Year-To-date			\$ 100.00
60. Full Name, Mailing Address and Zip Code Matt Zanolli 2211 13th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/26/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Compass		
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)

The Committee to Recall Brianne Nadeau

61. Full Name, Mailing Address and Zip Code John K Hoskinson 888 17th St NW, Washington, DC 20006	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/27/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Real estate investment Name and Address of Employer Self		
Aggregate Year-To-date			\$ 500.00
62. Full Name, Mailing Address and Zip Code Lauren Penneys 2472 Belmont Rd NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/27/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 100.00
63. Full Name, Mailing Address and Zip Code Tyler Garrison 2121 15th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/27/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Compass		
Aggregate Year-To-date			\$ 50.00
64. Full Name, Mailing Address and Zip Code Julianne Fox 5615 Nebraska Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/27/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
65. Full Name, Mailing Address and Zip Code Peter MacGahan 4515 Willard Ave, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/27/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 5.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

66. Full Name, Mailing Address and Zip Code Kim Downes 1909 19th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/01/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Artisan Name and Address of Employer Self Employed		
Aggregate Year-To-date			\$ 5.00
67. Full Name, Mailing Address and Zip Code Terrance J Lynch 1737 Kenyon St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/01/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer The Downtown Cluster of Congregations		
Aggregate Year-To-date			\$ 500.00
68. Full Name, Mailing Address and Zip Code Theodore Jones 5001 Loughboro Rd 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) 04/02/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Senior Director Name and Address of Employer NEI		
Aggregate Year-To-date			\$ 100.00
69. Full Name, Mailing Address and Zip Code Chris Schriever 919 T St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/03/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer Self		
Aggregate Year-To-date			\$ 250.00
70. Full Name, Mailing Address and Zip Code Mary Salcedo 1854 Kalorama Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Physician Name and Address of Employer The Ross Center		
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)

The Committee to Recall Brianne Nadeau

71. Full Name, Mailing Address and Zip Code Cynthia Van Eck 15 Hilltop Pl, Rye, NY 10580	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="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 \$ 500.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 500.00
72. Full Name, Mailing Address and Zip Code John Satyabhashak 3001 13th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation architect Name and Address of Employer AFS		
Aggregate Year-To-date			\$ 100.00
73. Full Name, Mailing Address and Zip Code Arthur Berko 3605 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) 04/04/2024	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation video producer Name and Address of Employer Self		
Aggregate Year-To-date			\$ 30.00
74. Full Name, Mailing Address and Zip Code Taylor Sexton 1806 Kalorama Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Epidemiologist Name and Address of Employer Todd Strategy Group		
Aggregate Year-To-date			\$ 50.00
75. Full Name, Mailing Address and Zip Code Howard Marks 777 7th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/04/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation President Name and Address of Employer K Street Alternative Energy Strategies		
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)

The Committee to Recall Brianne Nadeau

76. Full Name, Mailing Address and Zip Code Mary Illes 1688 Coventry Pl, Annapolis, MD 21401	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/04/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Self Employed		
Aggregate Year-To-date			\$ 200.00
77. Full Name, Mailing Address and Zip Code Jaime Crowe 1824 Kalorama Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/05/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer White & Case LLP		
Aggregate Year-To-date			\$ 100.00
78. Full Name, Mailing Address and Zip Code Ayana Douglas 3639 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) 04/05/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Realtor Name and Address of Employer Compass		
Aggregate Year-To-date			\$ 100.00
79. Full Name, Mailing Address and Zip Code Louis Santucci 1612 S St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/05/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
80. Full Name, Mailing Address and Zip Code Benjamin P Gardner 128 Seaton Pl NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Northeast Group		
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)

The Committee to Recall Brianne Nadeau

81. Full Name, Mailing Address and Zip Code David O'Keefe 1733 Kenyon St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2024	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Northeast Group		
Aggregate Year-To-date			\$ 20.00
82. Full Name, Mailing Address and Zip Code Ashley Isaac 1201 N Fillmore St, Arlington, VA 22201	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/10/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Marketer Name and Address of Employer Targeted Victory		
Aggregate Year-To-date			\$ 250.00
83. Full Name, Mailing Address and Zip Code Stanley Whatley 2621 13th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/11/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 100.00
84. Full Name, Mailing Address and Zip Code Paul Kobach 10514 County Road 4150, Tyler, TX 75704	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="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 \$ 5.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 5.00
85. Full Name, Mailing Address and Zip Code Kenneth Hood 1907 3rd St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/12/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer N/A		
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)

The Committee to Recall Brianne Nadeau

86. Full Name, Mailing Address and Zip Code Bradley J Preamble 2100 11th St NW Apt 102, 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) 04/12/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Trial Attorney Name and Address of Employer US DOJ		
Aggregate Year-To-date			\$ 300.00
87. Full Name, Mailing Address and Zip Code Paul O'Neil 937 Westminster St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/15/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 250.00
88. Full Name, Mailing Address and Zip Code Paul Thaler 2100 11th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/17/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Cohen Seglias		
Aggregate Year-To-date			\$ 100.00
89. Full Name, Mailing Address and Zip Code Joshu Shih 1111 Army Navy Dr Apt 1024, Arlington, VA 22202	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/18/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Transportation Resource Associates, Inc.		
Aggregate Year-To-date			\$ 50.00
90. Full Name, Mailing Address and Zip Code Jeffrey Hunt 500 Florida 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) 04/18/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Statistician Name and Address of Employer USDA		
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)

The Committee to Recall Brianne Nadeau

91. Full Name, Mailing Address and Zip Code Lauren Penneys 2472 Belmont Rd NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/18/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer N/A		
Aggregate Year-To-date			\$ 150.00
92. Full Name, Mailing Address and Zip Code John Glennon 2101 16th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/29/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer FTI Consulting		
Aggregate Year-To-date			\$ 50.00
93. Full Name, Mailing Address and Zip Code Brian Ortiz 3602 16th 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) 04/30/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Self Employed		
Aggregate Year-To-date			\$ 50.00
94. Full Name, Mailing Address and Zip Code Zachary Ferguson 3411 Oakwood Ter NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Kramer Levin LLP		
Aggregate Year-To-date			\$ 25.00
95. Full Name, Mailing Address and Zip Code Kenny Wright 2400 16th St NW Apt 408, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2024	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer CFTC		
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)

The Committee to Recall Brianne Nadeau

96. Full Name, Mailing Address and Zip Code Matthew Ruest 1813 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) 05/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
97. Full Name, Mailing Address and Zip Code Thomas Looney 2246 12th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Guidehouse		
Aggregate Year-To-date			\$ 25.00
98. Full Name, Mailing Address and Zip Code Cedric Kenney 1326 R St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Policy Advisor Name and Address of Employer U.S. Department of Defense		
Aggregate Year-To-date			\$ 50.00
99. Full Name, Mailing Address and Zip Code Henry Lubet 1137 Fairmont St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Server Name and Address of Employer Chaumiere Restaurant		
Aggregate Year-To-date			\$ 50.00
100. Full Name, Mailing Address and Zip Code American Express 1349 Parkwood Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/02/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Undisclosed		
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)

The Committee to Recall Brianne Nadeau

101. Full Name, Mailing Address and Zip Code Andres Pulgar Perich 923 V St NW Unit 402, 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) 05/03/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer World bank		
Aggregate Year-To-date			\$ 10.00
102. Full Name, Mailing Address and Zip Code Kimberly Cook 1361 Irving St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/03/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Save the Children		
Aggregate Year-To-date			\$ 100.00
103. Full Name, Mailing Address and Zip Code Leo V Bosner 3325 Holmead Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/07/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
104. Full Name, Mailing Address and Zip Code Emily Ludtke 724 Columbia Rd NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/08/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Accountant Name and Address of Employer Amazon		
Aggregate Year-To-date			\$ 5.00
105. Full Name, Mailing Address and Zip Code Christopher Bower 17 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) 05/08/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Department of Justice		
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)

The Committee to Recall Brianne Nadeau

106. Full Name, Mailing Address and Zip Code Alexander Mahoney 3634 10th 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) 05/09/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Division Chief Name and Address of Employer USAID		
Aggregate Year-To-date			\$ 250.00
107. Full Name, Mailing Address and Zip Code William Kanellis 2380 Champlain St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/09/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer U.S. Government		
Aggregate Year-To-date			\$ 50.00
108. Full Name, Mailing Address and Zip Code Tonya Williams 775 Columbia Rd NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/11/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Chief of Staff Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 25.00
109. Full Name, Mailing Address and Zip Code Joseph O'Neill 336 Perry Cabin Dr, Saint Michaels, MD 21663	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/13/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
110. Full Name, Mailing Address and Zip Code Nicholas Mattera 3167 18th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/13/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 1,000.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

111. Full Name, Mailing Address and Zip Code David L Ain 3601 Macomb 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) 05/18/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Physician Name and Address of Employer Mid-Atlantic Permanente Medical Group, P.C.		
Aggregate Year-To-date			\$ 25.00
112. Full Name, Mailing Address and Zip Code Daniel Ferguson 1348 Euclid St NW Apt 103, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/19/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer TD Bank		
Aggregate Year-To-date			\$ 50.00
113. Full Name, Mailing Address and Zip Code Adeel Khan 919 Florida Ave NW Apt 103, 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) 05/22/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Data Scientist Name and Address of Employer DV01		
Aggregate Year-To-date			\$ 25.00
114. Full Name, Mailing Address and Zip Code Francisco Vazquez-Grande 2100 11th St NW Apt 206, 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) 05/23/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Economist Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 100.00
115. Full Name, Mailing Address and Zip Code John Koenig 1312 Massachusetts Ave NW, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/24/2024	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Entrepreneur Name and Address of Employer Self Employed		
Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

The Committee to Recall Brianne Nadeau

116. Full Name, Mailing Address and Zip Code Adam Hickey 3624 10th 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) 05/26/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Mayer Brown LLP		
Aggregate Year-To-date		\$ 100.00	
117. Full Name, Mailing Address and Zip Code Betty B Pair 3552 11th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Self		
Aggregate Year-To-date		\$ 25.00	
118. Full Name, Mailing Address and Zip Code John Vagas 1618 11th St NW Apt 301, 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) 06/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Deloitte		
Aggregate Year-To-date		\$ 50.00	
119. Full Name, Mailing Address and Zip Code Alice Dress 2009 Belmont Rd NW Apt 202, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 50.00	
120. Full Name, Mailing Address and Zip Code Theresa McLaughlin 3118 19th 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) 06/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired		
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)

The Committee to Recall Brianne Nadeau

121. Full Name, Mailing Address and Zip Code David Schrock 1428 Meridian Pl NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/06/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Analyst Name and Address of Employer Energy Department		
Aggregate Year-To-date			\$ 25.00
122. Full Name, Mailing Address and Zip Code David Courret-Knight 758 Fairmont St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Strategic Advisor Name and Address of Employer Federal Government		
Aggregate Year-To-date			\$ 25.00
123. Full Name, Mailing Address and Zip Code Paul Lobo 3307 Cleveland 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) 06/18/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Government Affairs Name and Address of Employer Policy Integration Partners		
Aggregate Year-To-date			\$ 25.00
124. Full Name, Mailing Address and Zip Code John Oravec 2211 Ontario Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/05/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer FDIC		
Aggregate Year-To-date			\$ 25.00
125. Full Name, Mailing Address and Zip Code William Garber 1722 Seaton St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/15/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Credit Risk Management Name and Address of Employer Navy Federal Credit Union		
Aggregate Year-To-date			\$ 25.00

TOTAL This Period (Aggregate of all Receipt pages)	\$ 13,216.00
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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

The Committee to Recall Brianne Nadeau

1. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 04/04/2024	Amount of Each Expenditure This Period \$ 100.00
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code PNC Bank 300 Fifth Ave, Pittsburgh, PA 15222	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/10/2024	Amount of Each Expenditure This Period \$ 4.50
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Dos Gringos Cafe 3116 Mount Pleasant St NW, Washington, DC 20010	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 04/11/2024	Amount of Each Expenditure This Period \$ 215.85
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Basecamp Inc 1929 18th St NW, Washington, DC 20009	Purpose of Expenditure Campaign Materials	Date (month, day, year) 04/17/2024	Amount of Each Expenditure This Period \$ 1,874.87
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Harland Clarke 10931 Laureate Drive, San Antonio, TX 78249	Purpose of Expenditure Supplies	Date (month, day, year) 04/18/2024	Amount of Each Expenditure This Period \$ 77.10
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Elliot Howe 1310 U Street NW Apt 206, Washington, DC 20009	Purpose of Expenditure Campaign Materials	Date (month, day, year) 04/19/2024	Amount of Each Expenditure This Period \$ 948.70
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 04/24/2024	Amount of Each Expenditure This Period \$ 200.00
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 04/29/2024	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 04/29/2024	Amount of Each Expenditure This Period \$ 200.00
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/03/2024	Amount of Each Expenditure This Period \$ 330.00
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Basecamp Inc 1929 18th St NW, Washington, DC 20009	Purpose of Expenditure Campaign Materials	Date (month, day, year) 05/07/2024	Amount of Each Expenditure This Period \$ 1,786.10
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code Alexander Madison 763 Morton St NW, Washington, DC 20010	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 05/13/2024	Amount of Each Expenditure This Period \$ 233.20
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Alexander Madison 763 Morton St NW, Washington, DC 20010	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 05/13/2024	Amount of Each Expenditure This Period \$ 166.30
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Alexander Madison 763 Morton St NW, Washington, DC 20010	Purpose of Expenditure Supplies	Date (month, day, year) 05/13/2024	Amount of Each Expenditure This Period \$ 154.35
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Basecamp Inc 1929 18th St NW, Washington, DC 20009	Purpose of Expenditure Campaign Materials	Date (month, day, year) 05/15/2024	Amount of Each Expenditure This Period \$ 2,539.76
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Intuit Mailchimp 405 N Angier Avenue NE, Atlanta, GA 30308	Purpose of Expenditure Advertising	Date (month, day, year) 05/18/2024	Amount of Each Expenditure This Period \$ 116.60
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/21/2024	Amount of Each Expenditure This Period \$ 220.00
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/21/2024	Amount of Each Expenditure This Period \$ 450.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/30/2024	Amount of Each Expenditure This Period \$ 240.00
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/31/2024	Amount of Each Expenditure This Period \$ 315.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code He'Ichie Koton 3298 Ft Lincoln Drive NE 704, Washington, DC 20018	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 06/11/2024	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 06/14/2024	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code Intuit Mailchimp 405 N Angier Avenue NE, Atlanta, GA 30308	Purpose of Expenditure Advertising	Date (month, day, year) 06/18/2024	Amount of Each Expenditure This Period \$ 116.60
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 06/25/2024	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 07/08/2024	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code Alexander Madison 763 Morton St NW, Washington, DC 20010	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 07/08/2024	Amount of Each Expenditure This Period \$ 332.61
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code Alexander Madison 763 Morton St NW, Washington, DC 20010	Purpose of Expenditure Supplies	Date (month, day, year) 07/08/2024	Amount of Each Expenditure This Period \$ 20.00
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 07/15/2024	Amount of Each Expenditure This Period \$ 480.00
Occupation	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code Intuit Mailchimp 405 N Angier Avenue NE, Atlanta, GA 30308	Purpose of Expenditure Advertising	Date (month, day, year) 07/18/2024	Amount of Each Expenditure This Period \$ 116.60
Occupation	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code David Bates 1764 Columbia Rd NW #3, Washington, DC 20009	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 07/29/2024	Amount of Each Expenditure This Period \$ 240.00
Occupation	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code Stripe 199 Water Street , New York, NY 10038	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/30/2024	Amount of Each Expenditure This Period \$ 458.07
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 13,436.21

REFUNDS OF CONTRIBUTIONS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN POLITICAL COMMITTEES

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

The Committee to Recall Brianne Nadeau

1. Full Name, Mailing Address and Zip Code Paul C Dougherty 1909 K St NW, Washington, DC 20006	Purpose of Expenditure	Date (month, day, year) 02/20/2024	Amount of Each Expenditure This Period \$ 500.00
Contributor Type Individual			
2. Full Name, Mailing Address and Zip Code John Dabney 4934 Indian Ln NW, Washington, DC 20016	Purpose of Expenditure	Date (month, day, year) 03/13/2024	Amount of Each Expenditure This Period \$ 500.00
Contributor Type Individual			
3. Full Name, Mailing Address and Zip Code Nicholas Mattera 3167 18th St NW, Washington, DC 20010	Purpose of Expenditure	Date (month, day, year) 07/25/2024	Amount of Each Expenditure This Period \$ 500.00
Contributor Type Individual			
4. Full Name, Mailing Address and Zip Code Terrance J Lynch 1737 Kenyon St NW, Washington, DC 20010	Purpose of Expenditure	Date (month, day, year) 07/31/2024	Amount of Each Expenditure This Period \$ 25.00
Contributor Type Individual			
TOTAL This Period (Aggregate of all expenditure pages)			\$ 1,525.00