



**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) D.C. for Democracy PAC	2. OCF Identification Number PAC SUP043881
Address 2939 Van Ness Street, NW Apt 220	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20008	

4. TYPE OF REPORT: **October 10th Report**

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

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 8/11/2024 through 10/10/2024		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 636.07	
(c) Total Receipts [from Line (16)]	\$ 1,613.80	\$ 2,230.09
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 2,249.87	
7. Total Expenditures (from Line 22)	\$ 1,744.79	\$ 2,951.83
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 505.08	
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.

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.

(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.

Ms. Keshini Ladduwahetty

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

10/10/2024

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.

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) D.C. for Democracy PAC	REPORT COVERING THE PERIOD FROM: 8/11/2024 TO: 10/10/2024	
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)	\$ 1,613.80	\$ 2,230.09 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)]	\$ 1,613.80	\$ 2,230.09 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]	\$ 1,613.80	\$ 2,230.09 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 1,744.79	\$ 2,951.83 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 1,744.79	\$ 2,951.83 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		636.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		1,613.80
25. SUBTOTAL (add Lines 23 and 24)		2,249.87
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		1,744.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		505.08

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)

D.C. for Democracy PAC

1. Full Name, Mailing Address and Zip Code Jayne Epstein 2743 Woodley Pl NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/12/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation unemployed Name and Address of Employer n/a		
Aggregate Year-To-date			\$ 100.00
2. Full Name, Mailing Address and Zip Code Ed Lazere 3579 13th St NW Unit 6, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/13/2024	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Director of Legislative Advocacy Name and Address of Employer UPO 301 Rhode Island Ave NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 300.00
3. Full Name, Mailing Address and Zip Code Joslyn Williams 1311 Delaware Ave SW, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/20/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation n/a Name and Address of Employer retired		
Aggregate Year-To-date			\$ 100.00
4. Full Name, Mailing Address and Zip Code Joan Kelley 2607 Brentwood Rd 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 type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/20/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation n/a Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 51.00
5. Full Name, Mailing Address and Zip Code Sarah Levine 5527 2nd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/20/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation n/a Name and Address of Employer unemployed		
Aggregate Year-To-date			\$ 10.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

D.C. for Democracy PAC

6. Full Name, Mailing Address and Zip Code Vanessa Lopez 3156 18th St NW Apt 2, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/20/2024	Amount of Each Receipt This Period \$ 20.20
Contributor Type Individual	Occupation Organizer Name and Address of Employer Mother's Outreach Network 80 M St SE, Washington, DC 20003		
Aggregate Year-To-date		\$ 20.20	
7. Full Name, Mailing Address and Zip Code Alexandra Dodds 1520 Buchanan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/27/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Digital strategist Name and Address of Employer Self		
Aggregate Year-To-date		\$ 60.00	
8. Full Name, Mailing Address and Zip Code Ben Somberg 4107 5th St NW # 1, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/28/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation publicist Name and Address of Employer American Council for an Energy-Efficient Economy 529 14th St NW Ste 600, Washington, DC 20045		
Aggregate Year-To-date		\$ 50.00	
9. Full Name, Mailing Address and Zip Code John Zottoli 3025 Ontario Rd NW Apt 504, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/29/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Name and Address of Employer Retired Washington, DC		
Aggregate Year-To-date		\$ 51.00	
10. Full Name, Mailing Address and Zip Code Malcolm Kenton 1756 Euclid St NW Apt 2, Washington, DC 20009-8818	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/04/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Transportation Planner Name and Address of Employer HDR, Inc. 1 M St SE Ste 250, Washington, DC 20003		
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)

D.C. for Democracy PAC

11. Full Name, Mailing Address and Zip Code Laura Fuchs 2818 Myrtle Ave 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 type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/04/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer DC Public Schools 540 55th St NE, Washington, DC 20019	Aggregate Year-To-date \$ 50.00	
12. Full Name, Mailing Address and Zip Code John Capozzi 3612 Austin St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/04/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Technical recruiter Name and Address of Employer Hill Technology Inc 700 Pennsylvania Ave SE, Washington, DC 20003	Aggregate Year-To-date \$ 10.00	
13. Full Name, Mailing Address and Zip Code Mat Hanson 3930 S St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/05/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Advocacy Name and Address of Employer DC Action 1400 16th St NW, Washington, DC 20036	Aggregate Year-To-date \$ 50.00	
14. Full Name, Mailing Address and Zip Code Brenda Turnbull 4601 Linnean Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/06/2024	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Research manager Name and Address of Employer Policy Studies Associates, Inc. 1120 20th St NW Ste 200N, Washington, DC 20036	Aggregate Year-To-date \$ 51.00	
15. Full Name, Mailing Address and Zip Code Elizabeth Goldberg 2714 Ontario Rd NW Unit 3, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/06/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Healthcare Name and Address of Employer self	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)

D.C. for Democracy PAC

16. Full Name, Mailing Address and Zip Code Jacquelyn Duclos 52 Quincy Pl NW Apt 201, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/06/2024	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation International Development Professional Name and Address of Employer DAIGlobal, LLC 7600 Wisconsin Ave Ste 200, Bethesda, MD 20814		
Aggregate Year-To-date		\$ 50.00	
17. Full Name, Mailing Address and Zip Code Katharine Landfield 5112 38th St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/06/2024	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Advocate Name and Address of Employer Fair Budget Coalition 5112 38th St NW, Washington, DC 20016		
Aggregate Year-To-date		\$ 250.00	
18. Full Name, Mailing Address and Zip Code Elinor Hart 1651 Hobart 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 type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/06/2024	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 30.00	
19. Full Name, Mailing Address and Zip Code Monica Weeks 300 Peabody St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/07/2024	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation State Policy & Legislative Representative/Pr Name and Address of Employer International Association of Fire Fighters/DC NOW 1750 New York Ave NW Ste 300, Washington, DC 20006		
Aggregate Year-To-date		\$ 120.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

D.C. for Democracy PAC

20. Full Name, Mailing Address and Zip Code Keshini Ladduwahetty 2939 Van Ness St NW Apt 220, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/10/2024	Amount of Each Receipt This Period \$ 20.20
Contributor Type Individual	Occupation Graphic Artist/Designer Name and Address of Employer Self Employed 2939 Van Ness St NW Apt 220, Washington, DC 20008		
Aggregate Year-To-date		\$ 161.60	
21. Full Name, Mailing Address and Zip Code Carol Delany 3001 Veazey Ter NW Apt 230, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/10/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 100.00	
22. Full Name, Mailing Address and Zip Code Tiffani Johnson 5806 3rd Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/11/2024	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Disability Advocate Name and Address of Employer DC Government 220 E St SW, Washington, DC 20024		
Aggregate Year-To-date		\$ 229.89	
23. Full Name, Mailing Address and Zip Code Emmanuel Caicedo 5806 3rd Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/13/2024	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation consultant Name and Address of Employer self		
Aggregate Year-To-date		\$ 25.00	
24. Full Name, Mailing Address and Zip Code Keith Ivey 3801 Connecticut Ave NW Apt 425, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 09/13/2024	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation software developer Name and Address of Employer self		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

D.C. for Democracy PAC

		Aggregate Year-To-date		\$ 110.00	
25. Full Name, Mailing Address and Zip Code Carole Lewis Anderson 3616 Reservoir Rd NW, Washington, DC 20007		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 09/14/2024	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation			
		Name and Address of Employer			
		Aggregate Year-To-date		\$ 100.00	
26. Full Name, Mailing Address and Zip Code Vanessa Lopez 3156 18th St NW Apt 2, Washington, DC 20010		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 09/21/2024	Amount of Each Receipt This Period \$ 20.20
Contributor Type Individual		Occupation Organizer			
		Name and Address of Employer Mother's Outreach Network 80 M St SE, Washington, DC 20003			
		Aggregate Year-To-date		\$ 40.40	
27. Full Name, Mailing Address and Zip Code Alexandra Dodds 1520 Buchanan St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 09/27/2024	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual		Occupation Digital strategist			
		Name and Address of Employer Self			
		Aggregate Year-To-date		\$ 65.00	
28. Full Name, Mailing Address and Zip Code Monica Weeks 300 Peabody St NE, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 10/06/2024	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual		Occupation State Policy & Legislative Representative/Pr			
		Name and Address of Employer International Association of Fire Fighters/DC NOW 1750 New York Ave NW Ste 300, Washington, DC 20006			
		Aggregate Year-To-date		\$ 135.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

D.C. for Democracy PAC

29. Full Name, Mailing Address and Zip Code Keshini Ladduwahetty 2939 Van Ness St NW Apt 220, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/10/2024	Amount of Each Receipt This Period \$ 20.20
Contributor Type Individual	Occupation Graphic Artist/Designer Name and Address of Employer Self Employed 2939 Van Ness St NW Apt 220, Washington, DC 20008		
Aggregate Year-To-date		\$ 181.80	
30. Full Name, Mailing Address and Zip Code Tiffani Johnson 5806 3rd Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Other (Specify) Stripe <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/10/2024	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Disability Advocate Name and Address of Employer DC Government 220 E St SW, Washington, DC 20024		
Aggregate Year-To-date		\$ 244.89	
TOTAL This Period (Aggregate of all Receipt pages)			\$ 1,613.80

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

D.C. for Democracy PAC

1. Full Name, Mailing Address and Zip Code Zoom Video Communications 55 Almaden Blvd, San Jose, CA 95113	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 08/13/2024	Amount of Each Expenditure This Period \$ 16.95
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code Action Network 1900 L Street NW #900, Washington, DC 20036	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 08/16/2024	Amount of Each Expenditure This Period \$ 10.60
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Stripe 354 Oyster Point Boulevard, South San Francisco, CA 94080	Purpose of Expenditure Bank Fees	Date (month, day, year) 08/31/2024	Amount of Each Expenditure This Period \$ 28.14
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Zoom Video Communications 55 Almaden Blvd, San Jose, CA 95113	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/13/2024	Amount of Each Expenditure This Period \$ 16.95
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Action Network 1900 L Street NW #900, Washington, DC 20036	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 09/16/2024	Amount of Each Expenditure This Period \$ 10.60
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Tiffani Johnson 5806 3rd Pl NW, Washington, DC 20011	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 09/20/2024	Amount of Each Expenditure This Period \$ 186.08
Occupation Disability Advocate	Name and Address of Employer DC Government 250 E Street SW, Washington, DC 20011		
7. Full Name, Mailing Address and Zip Code Ed Lazere 3579 13th St NW, Washington, DC 20010	Purpose of Expenditure Printing	Date (month, day, year) 09/20/2024	Amount of Each Expenditure This Period \$ 1,321.88
Occupation Legislative Advocacy	Name and Address of Employer UPO 301 Rhode Island Ave NW, Washington, DC 20001		

8. Full Name, Mailing Address and Zip Code Stripe 354 Oyster Point Boulevard, South San Francisco, CA 94080	Purpose of Expenditure Bank Fees	Date (month, day, year) 09/30/2024	Amount of Each Expenditure This Period \$ 37.86
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code Scale to Win 13742 Harper Street, Santa Ana, CA 92703	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/01/2024	Amount of Each Expenditure This Period \$ 12.97
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code ElectionBuddy.com Not Applicable, Edmonton, NA 00000	Purpose of Expenditure Computer and Web Expenses	Date (month, day, year) 10/02/2024	Amount of Each Expenditure This Period \$ 99.00
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Visa International Service PO Box 8999 , San Francisco, CA 94128	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/02/2024	Amount of Each Expenditure This Period \$ 0.99
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code Stripe 354 Oyster Point Boulevard, South San Francisco, CA 94080	Purpose of Expenditure Bank Fees	Date (month, day, year) 10/10/2024	Amount of Each Expenditure This Period \$ 2.77
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 1,744.79