



**GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20003**

**REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES**

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Ward One Democrats	2. OCF Identification Number PACUP020096
Address 1818 4th Street, NW	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20001	

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

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

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 10/11/2025 through 12/10/2025		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,666.01	
(c) Total Receipts [from Line (16)]	\$ 348.20	\$ 2,073.45
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 2,014.21	
7. Total Expenditures (from Line 22)	\$ 13.86	\$ 531.02
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 2,000.35	
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	\$ 1,368.25
(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.

Joshua Harold Jacobson

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

12/10/2025

SIGNATURE OF TREASURER

DATE

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

NOTARY PUBLIC

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

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

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Ward One Democrats	REPORT COVERING THE PERIOD FROM: 10/11/2025 TO: 12/10/2025	
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)	\$ 348.20	\$ 705.20 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)]	\$ 348.20	\$ 705.20 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	\$ 1,368.25 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	\$ 1,368.25 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]	\$ 348.20	\$ 2,073.45 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 13.86	\$ 531.02 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)]	\$ 13.86	\$ 531.02 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$ 1,666.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$ 348.20
25. SUBTOTAL (add Lines 23 and 24)		\$ 2,014.21
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		\$ 13.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		\$ 2,000.35

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.			
Full Name of Committee (Name of Candidate, if Candidate is reporting)			
Ward One Democrats			
1. Full Name, Mailing Address and Zip Code J. Swiderski 1100 Euclid St NW # B, 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) 10/11/2025	Amount of Each Receipt This Period \$ 5.10
Contributor Type Individual	Occupation transportation planner		
	Name and Address of Employer Toole Design Group 8484 Georgia Ave, Silver Spring, MD 20910		
Aggregate Year-To-date			\$ 5.10
2. Full Name, Mailing Address and Zip Code Brad Johnson 1633 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) 10/23/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Climate hawk		
	Name and Address of Employer Self 1633 Irving St NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 40.00
3. Full Name, Mailing Address and Zip Code John Zottoli 3025 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) 10/25/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed		
	Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 50.00
4. Full Name, Mailing Address and Zip Code Alex Baca 609 Newton Pl NW Unit A, 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) 10/26/2025	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Manager		
	Name and Address of Employer Greater Greater Washington 609 Newton Pl NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 20.00
5. Full Name, Mailing Address and Zip Code Laura Whitaker 1634 Argonne 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) 10/27/2025	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Not Employed		
	Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 60.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward One Democrats

6. Full Name, Mailing Address and Zip Code Alexis Rangel 3223 11th St NW BSMT, 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) 10/28/2025	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Director of Operations Name and Address of Employer District of Columbia 1350 Pennsylvania Ave NW, Washington, DC 20004		
		Aggregate Year-To-date		\$ 100.00
7. Full Name, Mailing Address and Zip Code Brad Howard 3526 Park Pl NW Unit 1, Washington, DC 20010		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 10/31/2025	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual		Occupation Chief of Staff Name and Address of Employer U.S. House of Representatives 3526 Park Pl NW Unit 1, Washington, DC 20010		
		Aggregate Year-To-date		\$ 153.00
8. Full Name, Mailing Address and Zip Code Josh Jacobson 2605 Sherman Ave NW, Washington, DC 20001		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/05/2025	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Technical Account Manager Name and Address of Employer Datadog 620 8th Ave Fl 45, New York, NY 10018		
		Aggregate Year-To-date		\$ 45.00
9. Full Name, Mailing Address and Zip Code Santiago Lakatos 120 S 4th St Apt 2E, Brooklyn, NY 11249		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/05/2025	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual		Occupation Analyst Name and Address of Employer Venable LLP 600 Massachusetts Ave NW, Washington, DC 20001		
		Aggregate Year-To-date		\$ 25.00
10. Full Name, Mailing Address and Zip Code David Greer 1828 9th 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) 11/08/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual		Occupation Communications Name and Address of Employer CLPHA 1828 9th St NW, Washington, DC 20001		
		Aggregate Year-To-date		\$ 20.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward One Democrats

11. Full Name, Mailing Address and Zip Code J. Swiderski 1100 Euclid St NW # B, 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) 11/11/2025	Amount of Each Receipt This Period \$ 5.10
Contributor Type Individual	Occupation transportation planner Name and Address of Employer Toole Design Group 8484 Georgia Ave, Silver Spring, MD 20910		
Aggregate Year-To-date			\$ 10.20
12. Full Name, Mailing Address and Zip Code Nicolle Rivero 1124 Columbia Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/15/2025	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Chief of Staff Name and Address of Employer Council of DC 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 5.00
13. Full Name, Mailing Address and Zip Code David Meni 609 Newton Pl NW, Washington, DC 20010-1711	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/15/2025	Amount of Each Receipt This Period \$ 11.00
Contributor Type Individual	Occupation Legislative Director Name and Address of Employer Council of the District of Columbia 609 Newton Pl NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 11.00
14. Full Name, Mailing Address and Zip Code Aparna Raj 2656 15th St NW Apt 302, 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) 11/15/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Communications Manager Name and Address of Employer Local Progress 2656 15th St NW Apt 302, Washington, DC 20009		
Aggregate Year-To-date			\$ 10.00
15. Full Name, Mailing Address and Zip Code Brad Johnson 1633 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) 11/23/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Climate hawk Name and Address of Employer Self 1633 Irving St NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

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

Ward One Democrats

16. Full Name, Mailing Address and Zip Code John Zottoli 3025 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) 11/25/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 60.00
17. Full Name, Mailing Address and Zip Code Alex Baca 609 Newton Pl NW Unit A, 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) 11/26/2025	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Greater Greater Washington 609 Newton Pl NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 25.00
18. Full Name, Mailing Address and Zip Code Laura Whitaker 1634 Argonne 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) 11/27/2025	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed		
Aggregate Year-To-date			\$ 75.00
19. Full Name, Mailing Address and Zip Code Alexis Rangel 3223 11th St NW BSMT, 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) 11/28/2025	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Director of Operations Name and Address of Employer District of Columbia 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date			\$ 125.00
20. Full Name, Mailing Address and Zip Code Brad Howard 3526 Park Pl NW Unit 1, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 11/30/2025	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Chief of Staff Name and Address of Employer U.S. House of Representatives 3526 Park Pl NW Unit 1, Washington, DC 20010		
Aggregate Year-To-date			\$ 204.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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

Ward One Democrats

21. Full Name, Mailing Address and Zip Code Josh Jacobson 2605 Sherman Ave NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/05/2025	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Technical Account Manager Name and Address of Employer Datadog 620 8th Ave Fl 45, New York, NY 10018		
Aggregate Year-To-date			\$ 70.00
22. Full Name, Mailing Address and Zip Code Santiago Lakatos 120 S 4th St Apt 2E, Brooklyn, NY 11249	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/05/2025	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation Analyst Name and Address of Employer Venable LLP 600 Massachusetts Ave NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 30.00
23. Full Name, Mailing Address and Zip Code David Greer 1828 9th 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) 12/08/2025	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Communications Name and Address of Employer CLPHA 1828 9th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 30.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 348.20

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

Ward One Democrats

1. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 10/12/2025	Amount of Each Expenditure This Period \$ 0.61
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 10/26/2025	Amount of Each Expenditure This Period \$ 1.00
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 11/02/2025	Amount of Each Expenditure This Period \$ 3.61
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 11/09/2025	Amount of Each Expenditure This Period \$ 1.59
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 11/16/2025	Amount of Each Expenditure This Period \$ 1.25
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 11/23/2025	Amount of Each Expenditure This Period \$ 0.40
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Purpose of Expenditure Fund-raiser	Date (month, day, year) 11/30/2025	Amount of Each Expenditure This Period \$ 4.21
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code	Purpose of Expenditure	Date (month, day, year)	Amount of Each Expenditure This Period
ActBlue Technical Services 366 Summer Street , Somerville, MA 02144	Fund-raiser	12/07/2025	\$ 1.19
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 13.86

SCHEDULE E
LOANS OWED BY THE COMMITTEE TO THE CANDIDATE

Page 1 of 1 for Line Number 13a

Full Name of Committee (Name of Candidate, if Candidate is reporting)				
Ward One Democrats				
1. Full Name, Mailing Address and Zip Code of Loan Source	Original Amount of Loan	Payment this period	Cumulative Payment to Date	Balance Outstanding at Close of this Period
Ward One Democrats 1820 Ingleside Terrace, NW, Washington, DC 20010	\$ 170.50	\$ 0.00	\$0.00	\$ 170.50
Terms: Date Incurred: 01/05/2011 Date Due: 12/31/2014 Interest Rate: 0.00 % (apr) <input type="checkbox"/> Secured				
2. Full Name, Mailing Address and Zip Code of Loan Source	Original Amount of Loan	Payment this period	Cumulative Payment to Date	Balance Outstanding at Close of this Period
Ward One Democrats 1820 Ingleside Terrace, NW, Washington, DC 20010	\$ 300.00	\$ 0.00	\$0.00	\$ 300.00
Terms: Date Incurred: 08/04/2014 Date Due: 08/04/2015 Interest Rate: 0.00 % (apr) <input type="checkbox"/> Secured				
3. Full Name, Mailing Address and Zip Code of Loan Source	Original Amount of Loan	Payment this period	Cumulative Payment to Date	Balance Outstanding at Close of this Period
Ward One Democrats 1820 Ingleside Terrace, NW, Washington, DC 20010	\$ 654.75	\$ 0.00	\$0.00	\$ 654.75
Terms: Date Incurred: 10/09/2014 Date Due: 10/09/2015 Interest Rate: 0.00 % (apr) <input type="checkbox"/> Secured				
4. Full Name, Mailing Address and Zip Code of Loan Source	Original Amount of Loan	Payment this period	Cumulative Payment to Date	Balance Outstanding at Close of this Period
Ward One Democrats 1820 Ingleside Terrace, NW, Washington, DC 20010	\$ 243.00	\$ 0.00	\$0.00	\$ 243.00
Terms: Date Incurred: 10/20/2014 Date Due: 10/20/2015 Interest Rate: 0.00 % (apr) <input type="checkbox"/> Secured				
TOTALS this period (Aggregate the Subtotals from all Loan Schedules)				\$ 1,368.25
Carry Outstanding Loan Balance forward to Line 10 (a) on the Summary Page.				