

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5  
Mind the Gap, Inc

ADDRESS (number and street) 855 El Camino Real  
Ste 13A #235  
 Check if different than previously reported. (ACC) Palo Alto CA 94301

2. **FEC IDENTIFICATION NUMBER ▼** C C00683649 **3. IS THIS REPORT**  **NEW (N)** **OR**  **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on MM / DD / YYYY in the State of     
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on MM / DD / YYYY in the State of   

5. Covering Period 01 / 01 / 2024 through 03 / 31 / 2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Gotlieb, Graham, D., ,

Signature of Treasurer Gotlieb, Graham, D., , Date 04 / 15 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Mind the Gap, Inc

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		2376020.75
(b) Cash on Hand at Beginning of Reporting Period.....	2376020.75	
(c) Total Receipts (from Line 19) .....	418406.47	418406.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2794427.22	2794427.22
7. Total Disbursements (from Line 31).....	473154.06	473154.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2321273.16	2321273.16
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Mind the Gap, Inc**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	72980.00	72980.00
(ii) Unitemized .....	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	73130.00	73130.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	73130.00	73130.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	329690.46	329690.46
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	15586.01	15586.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	418406.47	418406.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	418406.47	418406.47

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	473154.06	473154.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	473154.06	473154.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	473154.06	473154.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	473154.06	473154.06

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	73130.00	73130.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73130.00	73130.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	473154.06	473154.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	329690.46	329690.46
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	143463.60	143463.60

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Hemmer, John, Michael, ,**

Mailing Address 4826 Montgomery Ln

City Bethesda	State MD	Zip Code 20814-5302
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2024  
**Transaction ID : 7625700**

Amount of Each Receipt this Period  
20000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Hatch, Peter, , ,**

Mailing Address 11 E 10th St

City New York	State NY	Zip Code 10003-5903
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2024  
**Transaction ID : 7682010**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Stein, Charlie, , ,**

Mailing Address 1340 King Ave

City Boulder	State CO	Zip Code 80302-7836
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) InJoy Productions Inc.	Occupation (for Individual) Publisher
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2024  
**Transaction ID : 7732141**

Amount of Each Receipt this Period  
160.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25160.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cohan, David, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 19 / 2024 <b>Transaction ID : 7680092</b>
Mailing Address 1391 Montclair Ct		Amount of Each Receipt this Period 25000.00
City Los Altos	State CA	Zip Code 94024-6763
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Burke, Kathleen, J., ,</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2024 <b>Transaction ID : 7743783</b>
Mailing Address 320 Blackfield Dr		Amount of Each Receipt this Period 5000.00
City Tiburon	State CA	Zip Code 94920-2010
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Rhia Ventures	Occupation (for Individual) Social Impact Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Wallace, Mara, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 11 / 2024 <b>Transaction ID : 7659793</b>
Mailing Address 433 Melville Ave		Amount of Each Receipt this Period 15000.00
City Palo Alto	State CA	Zip Code 94301-3237
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Steinberg, Ari, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 02 / 2024 <b>Transaction ID : 7623228</b>
Mailing Address 3922 Meridian Ave N		Amount of Each Receipt this Period 2500.00
City Seattle	State WA	Zip Code 98103-8347
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) AirBnB	Occupation (for Individual) Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stein, Charlie, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 08 / 2024 <b>Transaction ID : 7628278</b>
Mailing Address 1340 King Ave		Amount of Each Receipt this Period 160.00
City Boulder	State CO	Zip Code 80302-7836
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) InJoy Productions Inc.	Occupation (for Individual) Publisher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stein, Charlie, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 08 / 2024 <b>Transaction ID : 7691698</b>
Mailing Address 1340 King Ave		Amount of Each Receipt this Period 160.00
City Boulder	State CO	Zip Code 80302-7836
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) InJoy Productions Inc.	Occupation (for Individual) Publisher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2820.00
<b>TOTAL</b> This Period (last page this line number only).....▶	72980.00



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 9 OF 51
<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

**A. MTG Research**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 60793

City Palo Alto	State CA	Zip Code 94306-0793
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
329690.46

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	07	/	2024

**Transaction ID : 7743395**

Amount of Each Receipt this Period  

329690.46
-----------

Memo Item

Salaries and Overhead

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period  

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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	329690.46
<b>TOTAL</b> This Period (last page this line number only).....▶	329690.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Live Oak Bank</b>			Date of Receipt
Mailing Address 1741 Tiburon Dr			<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28403-6244	<b>Transaction ID : 7737010</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="786.03"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="13212.88"/>		Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Live Oak Bank</b>			Date of Receipt
Mailing Address 1741 Tiburon Dr			<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28403-6244	<b>Transaction ID : 7755740</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="3902.05"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="13212.88"/>		Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Amalgamated Bank</b>			Date of Receipt
Mailing Address 1825 K St NW			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2024"/>
City Washington	State DC	Zip Code 20006-1202	<b>Transaction ID : 7737004</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="879.80"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2373.13"/>		Interest

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5567.88"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Amalgamated Bank</b>		Date of Receipt
Mailing Address 1825 K St NW		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City Washington	State DC	Zip Code 20006-1202
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 7737005</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="784.85"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2373.13"/>	Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Live Oak Bank</b>		Date of Receipt
Mailing Address 1741 Tiburon Dr		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28403-6244
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 7737006</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="837.54"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="13212.88"/>	Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Amalgamated Bank</b>		Date of Receipt
Mailing Address 1825 K St NW		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City Washington	State DC	Zip Code 20006-1202
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 7755736</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="708.48"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2373.13"/>	Interest

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="2330.87"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Live Oak Bank</b>			Date of Receipt
Mailing Address 1741 Tiburon Dr			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28403-6244	<b>Transaction ID : 7737007</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="3521.76"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="13212.88"/>		Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Live Oak Bank</b>			Date of Receipt
Mailing Address 1741 Tiburon Dr			<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28403-6244	<b>Transaction ID : 7737008</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="3304.80"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="13212.88"/>		Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Live Oak Bank</b>			Date of Receipt
Mailing Address 1741 Tiburon Dr			<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2024"/>
City Wilmington	State NC	Zip Code 28403-6244	<b>Transaction ID : 7755739</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="860.70"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="13212.88"/>		Interest

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="7687.26"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="15586.01"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

Mailing Address 100 N Tryon St

City Charlotte State NC Zip Code 28202-2135

FEC Identification Number

C [ ]

**Transaction ID : 501360200**

Amount of Each Disbursement this Period

[ ] 491.78 [ ]

Purpose of Disbursement  
Credit Card Payment, See Below

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	4

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

FEC Identification Number

C [ ]

**Transaction ID : 501360197**

Amount of Each Disbursement this Period

[ ] 367.20 [ ]

Purpose of Disbursement  
Software Subscription

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. Slack**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	4

Mailing Address 500 Howard St

City San Francisco State CA Zip Code 94105-3000

FEC Identification Number

C [ ]

**Transaction ID : 501360198**

Amount of Each Disbursement this Period

[ ] 75.08 [ ]

Purpose of Disbursement  
Software Subscription

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 491.78 [ ]

**TOTAL** This Period (last page this line number only)..... ▶

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Benefits Administration

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2024

FEC Identification Number

C

**Transaction ID : 501360310**

Amount of Each Disbursement this Period

428.36

Memo Item

Full Name (Last, First, Middle Initial)

**B. Premier Political Compliance**

Mailing Address 1032 15th St NW  
Ste 247

City  
Washington

State  
DC

Zip Code  
20005-1502

Purpose of Disbursement

Compliance Services

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2024

FEC Identification Number

C

**Transaction ID : 501360140**

Amount of Each Disbursement this Period

1271.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Employee Benefits

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2024

FEC Identification Number

C

**Transaction ID : 501360160**

Amount of Each Disbursement this Period

4043.81

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5743.82

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

**A. ADP, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement Payroll, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 12 / 2024

FEC Identification Number: C

Transaction ID : 501360180

Amount of Each Disbursement this Period: 61878.00

Memo Item

**B. Mathias, Mitch, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 855 El Camino Real Ste 13A #235

City Palo Alto State CA Zip Code 94301-2326

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 12 / 2024

FEC Identification Number: C

Transaction ID : 501360210

Amount of Each Disbursement this Period: 8096.77

Memo Item

**C. McBride, Marissa, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 855 El Camino Real Ste 13A #235

City Palo Alto State CA Zip Code 94301-2326

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 12 / 2024

FEC Identification Number: C

Transaction ID : 501360211

Amount of Each Disbursement this Period: 10380.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 61878.00

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Ramjug, Patrick, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360212**

Amount of Each Disbursement this Period

4557.66

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Rosmarin, Josh, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360213**

Amount of Each Disbursement this Period

8208.67

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Wheeler, Natalie, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360214**

Amount of Each Disbursement this Period

4651.45

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Mind the Gap, Inc

Form A: ADP, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll Taxes), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/12/2024), FEC Identification Number, Transaction ID (501360205), and Amount of Each Disbursement (5666.11).

Form B: ADP, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll Services & Insurance), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/12/2024), FEC Identification Number, Transaction ID (501360206), and Amount of Each Disbursement (757.25).

Form C: Benjamin, Beth, , , Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Salary), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/12/2024), FEC Identification Number, Transaction ID (501360207), and Amount of Each Disbursement (9145.67).

SUBTOTAL of Disbursements This Page (optional) 0.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Burns, Jackie, , ,**

Mailing Address 570 Vanderbilt Ave  
Apt 2R

City  
Brooklyn

State  
NY

Zip Code  
11238-3518

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	2			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : 501360208**

Amount of Each Disbursement this Period

7288.44

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Fawcett, Emma, , ,**

Mailing Address 9010 SW Oak St  
Apt 209

City  
Tigard

State  
OR

Zip Code  
97223-6587

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	2			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : 501360209**

Amount of Each Disbursement this Period

3125.87

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Employee Benefits

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : 501360311**

Amount of Each Disbursement this Period

8679.23

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8679.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b through 30b with checkboxes.

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NAME OF COMMITTEE (In Full)
Mind the Gap, Inc

Form A: ADP, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Mathias, Mitch, , , Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: McBride, Marissa, , , Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only) summary rows.

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Ramjug, Patrick, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360222**

Amount of Each Disbursement this Period

4	5	5	7	6
---	---	---	---	---

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Rosmarin, Josh, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360223**

Amount of Each Disbursement this Period

8	2	0	8	6	7
---	---	---	---	---	---

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Wheeler, Natalie, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360224**

Amount of Each Disbursement this Period

4	4	9	1	4	5
---	---	---	---	---	---

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0	0	0	0	0
---	---	---	---	---

0	0	0	0	0
---	---	---	---	---

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C [ ]

Transaction ID : 501360215

Amount of Each Disbursement this Period

[ ] 4378.19 [ ]

Memo Item \*

Full Name (Last, First, Middle Initial)

B. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Services & Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C [ ]

Transaction ID : 501360216

Amount of Each Disbursement this Period

[ ] 757.25 [ ]

Memo Item \*

Full Name (Last, First, Middle Initial)

C. Benjamin, Beth, , ,

Mailing Address 855 El Camino Real  
Ste # 13A

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

C [ ]

Transaction ID : 501360217

Amount of Each Disbursement this Period

[ ] 9145.67 [ ]

Memo Item \*

SUBTOTAL of Disbursements This Page (optional)..... ▶

[ ] 0.00 [ ]

TOTAL This Period (last page this line number only)..... ▶

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Burns, Jackie, , ,**

Mailing Address 570 Vanderbilt Ave  
Apt 2R

City  
Brooklyn

State  
NY

Zip Code  
11238-3518

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : 501360218**

Amount of Each Disbursement this Period

7288.44

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Fawcett, Emma, , ,**

Mailing Address 9010 SW Oak St  
Apt 209

City  
Tigard

State  
OR

Zip Code  
97223-6587

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : 501360219**

Amount of Each Disbursement this Period

3125.87

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Paragon Solutions**

Mailing Address 25 Commerce Dr

City  
Cranford

State  
NJ

Zip Code  
07016-3605

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : 501360291**

Amount of Each Disbursement this Period

28.41

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

28.41

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**

Mailing Address 1445 New York Ave NW  
Ste 200

City  
Washington

State  
DC

Zip Code  
20005-2158

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360142**

Amount of Each Disbursement this Period

373.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll, See Below

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360182**

Amount of Each Disbursement this Period

60030.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mathias, Mitch, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360230**

Amount of Each Disbursement this Period

8096.77

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

60404.27

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

A. McBride, Marissa, , ,

Mailing Address 855 El Camino Real  
Ste 13A #235

City Palo Alto

State CA

Zip Code 94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360231

Amount of Each Disbursement this Period

10380.11

Memo Item \*

Full Name (Last, First, Middle Initial)

B. Ramjug, Patrick, , ,

Mailing Address 855 El Camino Real  
Ste 13A #235

City Palo Alto

State CA

Zip Code 94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360232

Amount of Each Disbursement this Period

4557.66

Memo Item \*

Full Name (Last, First, Middle Initial)

C. Rosmarin, Josh, , ,

Mailing Address 855 El Camino Real  
Ste 13A #235

City Palo Alto

State CA

Zip Code 94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360233

Amount of Each Disbursement this Period

8208.67

Memo Item \*

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Wheeler, Natalie, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360234**

Amount of Each Disbursement this Period

[REDACTED] 4602.40

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360225**

Amount of Each Disbursement this Period

[REDACTED] 3867.53

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Services & Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360226**

Amount of Each Disbursement this Period

[REDACTED] 757.25

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

A. Benjamin, Beth, , ,

Mailing Address 855 El Camino Real  
Ste # 13A

City Palo Alto

State CA

Zip Code 94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360227

Amount of Each Disbursement this Period

9145.67

Memo Item \*

Full Name (Last, First, Middle Initial)

B. Burns, Jackie, , ,

Mailing Address 570 Vanderbilt Ave  
Apt 2R

City Brooklyn

State NY

Zip Code 11238-3518

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360228

Amount of Each Disbursement this Period

7288.44

Memo Item \*

Full Name (Last, First, Middle Initial)

C. Fawcett, Emma, , ,

Mailing Address 9010 SW Oak St  
Apt 209

City Tigard

State OR

Zip Code 97223-6587

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360229

Amount of Each Disbursement this Period

3125.87

Memo Item \*

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

**A. NGP VAN**

Full Name (Last, First, Middle Initial)

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement  
Software Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 04 / 2024

FEC Identification Number: C  
**Transaction ID : 501360292**

Amount of Each Disbursement this Period: 373.90

Memo Item

**B. NGP VAN**

Full Name (Last, First, Middle Initial)

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement  
Software Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 05 / 2024

FEC Identification Number: C  
**Transaction ID : 501360143**

Amount of Each Disbursement this Period: 373.90

Memo Item

**C. Bank of America**

Full Name (Last, First, Middle Initial)

Mailing Address 100 N Tryon St

City Charlotte State NC Zip Code 28202-2135

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 01 / 2024

FEC Identification Number: C  
**Transaction ID : 501360293**

Amount of Each Disbursement this Period: 2434.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3182.54

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

### A. Slack

Mailing Address 500 Howard St

City  
San Francisco

State  
CA

Zip Code  
94105-3000

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360301**

Amount of Each Disbursement this Period

[REDACTED] 85.24

Memo Item \*

Full Name (Last, First, Middle Initial)

### B. Zoom

Mailing Address 55 Almaden Blvd  
FL 6

City  
San Jose

State  
CA

Zip Code  
95113-1608

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360302**

Amount of Each Disbursement this Period

[REDACTED] 189.98

Memo Item \*

Full Name (Last, First, Middle Initial)

### C. 1Password

Mailing Address 4711 Yonge St  
Floor 10

City  
Toronto Ontario M2N 6K8 Canada

State  
ZZ

Zip Code  
00000

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360294**

Amount of Each Disbursement this Period

[REDACTED] 767.04

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

### A. Asana

Mailing Address 1550 Bryant St  
Ste 200

City San Francisco

State CA

Zip Code 94103-4853

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 501360296

Amount of Each Disbursement this Period

[Redacted] 269.80

Memo Item \*

Full Name (Last, First, Middle Initial)

### B. Digify

Mailing Address 350 Townsend St  
Ste 746

City San Francisco

State CA

Zip Code 94107-1693

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 501360297

Amount of Each Disbursement this Period

[Redacted] 640.00

Memo Item \*

Full Name (Last, First, Middle Initial)

### C. Google

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View

State CA

Zip Code 94043-1351

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 501360298

Amount of Each Disbursement this Period

[Redacted] 367.20

Memo Item \*

SUBTOTAL of Disbursements This Page (optional)..... ▶

[Redacted] 0.00

TOTAL This Period (last page this line number only)..... ▶

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

**A. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Employee Benefits

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360304

Amount of Each Disbursement this Period

4043.81

Memo Item

Full Name (Last, First, Middle Initial)

**B. Office IT Solutions**

Mailing Address 4401 A Connecticut Ave NW  
Ste 303

City  
Washington

State  
DC

Zip Code  
20008-2325

Purpose of Disbursement

IT Services

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360144

Amount of Each Disbursement this Period

800.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Premier Political Compliance**

Mailing Address 1032 15th St NW  
Ste 247

City  
Washington

State  
DC

Zip Code  
20005-1502

Purpose of Disbursement

Compliance Services

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360274

Amount of Each Disbursement this Period

1250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6093.81

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

**A. ADP, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement  
Employee Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 17 / 2024

FEC Identification Number: C

Transaction ID : 501360305

Amount of Each Disbursement this Period: 8180.18

Memo Item

**B. ADP, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement  
Payroll Services & Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 02 / 2024

FEC Identification Number: C

Transaction ID : 501360415

Amount of Each Disbursement this Period: 3.23

Memo Item

**C. Liftoff Campaigns LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 403 E Melbourne Ave

City Silver Spring State MD Zip Code 20901-3627

Purpose of Disbursement  
Communications Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 27 / 2024

FEC Identification Number: C

Transaction ID : 501360235

Amount of Each Disbursement this Period: 36000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 44183.41

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

### A. Office IT Solutions

Mailing Address 4401 A Connecticut Ave NW  
Ste 303

City  
Washington

State  
DC

Zip Code  
20008-2325

Purpose of Disbursement

IT Services

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 501360145

Amount of Each Disbursement this Period

800.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Benefits Administration

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 501360306

Amount of Each Disbursement this Period

415.73

Memo Item

Full Name (Last, First, Middle Initial)

### C. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Employee Benefits

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	2	4		

FEC Identification Number

C

Transaction ID : 501360336

Amount of Each Disbursement this Period

8679.23

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

9894.96

TOTAL This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Elias Law Group**

Mailing Address 10 G St NE  
Ste 600

City  
Washington

State  
DC

Zip Code  
20002-4253

Purpose of Disbursement

Legal Services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 501360146**

Amount of Each Disbursement this Period

[ ] 1274.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll, See Below

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 501360246**

Amount of Each Disbursement this Period

[ ] 59415.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fawcett, Emma, , ,**

Mailing Address 9010 SW Oak St  
Apt 209

City  
Tigard

State  
OR

Zip Code  
97223-6587

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 501360240**

Amount of Each Disbursement this Period

[ ] 3125.87

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[ ] 60690.28

[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Rosmarin, Josh, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360244**

Amount of Each Disbursement this Period

[REDACTED] 8208.67

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Wheeler, Natalie, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360245**

Amount of Each Disbursement this Period

[REDACTED] 4442.40

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360236**

Amount of Each Disbursement this Period

[REDACTED] 3863.04

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement  
Payroll Services & Insurance

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360237

Amount of Each Disbursement this Period

757.25

Memo Item \*

Full Name (Last, First, Middle Initial)

B. Benjamin, Beth, , ,

Mailing Address 855 El Camino Real  
Ste # 13A

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360238

Amount of Each Disbursement this Period

9145.67

Memo Item \*

Full Name (Last, First, Middle Initial)

C. Burns, Jackie, , ,

Mailing Address 570 Vanderbilt Ave  
Apt 2R

City  
Brooklyn

State  
NY

Zip Code  
11238-3518

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360239

Amount of Each Disbursement this Period

7288.44

Memo Item \*

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

### A. Bank of America

Mailing Address 100 N Tryon St

City  
Charlotte

State  
NC

Zip Code  
28202-2135

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 501360386

Amount of Each Disbursement this Period

[REDACTED] 1070.73

Memo Item

Full Name (Last, First, Middle Initial)

### B. Asana

Mailing Address 1550 Bryant St  
Ste 200

City  
San Francisco

State  
CA

Zip Code  
94103-4853

Purpose of Disbursement  
Software Subscription

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 501360391

Amount of Each Disbursement this Period

[REDACTED] 134.90

Memo Item

Full Name (Last, First, Middle Initial)

### C. Google

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
Software Subscription

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 501360392

Amount of Each Disbursement this Period

[REDACTED] 367.20

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

[REDACTED] 1070.73

TOTAL This Period (last page this line number only).....▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

### A. Slack

Mailing Address 500 Howard St

City  
San Francisco

State  
CA

Zip Code  
94105-3000

Purpose of Disbursement

Software Subscription

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360393**

Amount of Each Disbursement this Period

[REDACTED] 63.66

Memo Item \*

Full Name (Last, First, Middle Initial)

### B. Zoom

Mailing Address 55 Almaden Blvd  
FI 6

City  
San Jose

State  
CA

Zip Code  
95113-1608

Purpose of Disbursement

Software Subscription

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360394**

Amount of Each Disbursement this Period

[REDACTED] 94.99

Memo Item \*

Full Name (Last, First, Middle Initial)

### C. Digify

Mailing Address 350 Townsend St  
Ste 746

City  
San Francisco

State  
CA

Zip Code  
94107-1693

Purpose of Disbursement

Software Subscription

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360388**

Amount of Each Disbursement this Period

[REDACTED] 320.00

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Employee Benefits

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	2	4		

FEC Identification Number

C

**Transaction ID : 501360307**

Amount of Each Disbursement this Period

8180.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paragon Solutions**

Mailing Address 25 Commerce Dr

City  
Cranford

State  
NJ

Zip Code  
07016-3605

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	2	4		

FEC Identification Number

C

**Transaction ID : 501360137**

Amount of Each Disbursement this Period

772.34

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elias Law Group**

Mailing Address 10 G St NE  
Ste 600

City  
Washington

State  
DC

Zip Code  
20002-4253

Purpose of Disbursement

Legal Services

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	2	4		

FEC Identification Number

C

**Transaction ID : 501360337**

Amount of Each Disbursement this Period

547.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

9499.72

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

**A. ADP, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement  
Benefits Administration

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 29 / 2024

FEC Identification Number: C

Transaction ID : 501360397

Amount of Each Disbursement this Period: 422.85

Memo Item

**B. ADP, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement  
Employee Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 12 / 2024

FEC Identification Number: C

Transaction ID : 501360308

Amount of Each Disbursement this Period: 4043.81

Memo Item

**C. Paragon Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 25 Commerce Dr

City Cranford State NJ Zip Code 07016-3605

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 02 / 2024

FEC Identification Number: C

Transaction ID : 501360138

Amount of Each Disbursement this Period: 330.19

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4796.85

**TOTAL** This Period (last page this line number only)..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

### A. Office IT Solutions

Mailing Address 4401 A Connecticut Ave NW  
Ste 303

City  
Washington

State  
DC

Zip Code  
20008-2325

Purpose of Disbursement

IT Services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360338**

Amount of Each Disbursement this Period

[REDACTED] 1600.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Bank of America

Mailing Address 100 N Tryon St

City  
Charlotte

State  
NC

Zip Code  
28202-2135

Purpose of Disbursement

Credit Card Payment, See Below

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360148**

Amount of Each Disbursement this Period

[REDACTED] 1077.76

Memo Item

Full Name (Last, First, Middle Initial)

### C. Digify

Mailing Address 350 Townsend St  
Ste 746

City  
San Francisco

State  
CA

Zip Code  
94107-1693

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360150**

Amount of Each Disbursement this Period

[REDACTED] 320.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 2677.76

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Mind the Gap, Inc

Form A: Asana. Includes fields for Full Name, Mailing Address (1550 Bryant St), City (San Francisco), State (CA), Zip Code (94103-4853), Purpose of Disbursement (Software Subscription), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/03/2024), FEC Identification Number (C), Transaction ID (501360153), Amount of Each Disbursement (134.90), and Memo Item checkbox.

Form B: Zoom. Includes fields for Full Name, Mailing Address (55 Almaden Blvd), City (San Jose), State (CA), Zip Code (95113-1608), Purpose of Disbursement (Software Subscription), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/03/2024), FEC Identification Number (C), Transaction ID (501360154), Amount of Each Disbursement (94.99), and Memo Item checkbox.

Form C: Google. Includes fields for Full Name, Mailing Address (1600 Amphitheatre Pkwy), City (Mountain View), State (CA), Zip Code (94043-1351), Purpose of Disbursement (Software Subscription), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/03/2024), FEC Identification Number (C), Transaction ID (501360157), Amount of Each Disbursement (367.20), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 0.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

### A. Slack

Mailing Address 500 Howard St

City  
San Francisco

State  
CA

Zip Code  
94105-3000

Purpose of Disbursement

Software Subscription

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360158**

Amount of Each Disbursement this Period

[REDACTED] 78.18

Memo Item \*

Full Name (Last, First, Middle Initial)

### B. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll, See Below

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360398**

Amount of Each Disbursement this Period

[REDACTED] 59499.53

Memo Item

Full Name (Last, First, Middle Initial)

### C. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Services & Insurance

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360400**

Amount of Each Disbursement this Period

[REDACTED] 761.62

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 59499.53

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

**A. Benjamin, Beth, , ,**

Mailing Address 855 El Camino Real  
Ste # 13A

City Palo Alto State CA Zip Code 94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 501360401

Amount of Each Disbursement this Period

[Redacted] 9145.67

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Burns, Jackie, , ,**

Mailing Address 570 Vanderbilt Ave  
Apt 2R

City Brooklyn State NY Zip Code 11238-3518

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 501360402

Amount of Each Disbursement this Period

[Redacted] 7288.44

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Fawcett, Emma, , ,**

Mailing Address 9010 SW Oak St  
Apt 209

City Tigard State OR Zip Code 97223-6587

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C [Redacted]

Transaction ID : 501360403

Amount of Each Disbursement this Period

[Redacted] 3334.21

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Mathias, Mitch, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	9			2	0	2	4		

FEC Identification Number

C [ ]

**Transaction ID : 501360404**

Amount of Each Disbursement this Period

[ ] 7646.77

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. McBride, Marissa, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	9			2	0	2	4		

FEC Identification Number

C [ ]

**Transaction ID : 501360405**

Amount of Each Disbursement this Period

[ ] 10380.11

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Ramjug, Patrick, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	9			2	0	2	4		

FEC Identification Number

C [ ]

**Transaction ID : 501360406**

Amount of Each Disbursement this Period

[ ] 4557.66

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Mind the Gap, Inc**

**A. Rosmarin, Josh, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 29 / 2024

Mailing Address: 855 El Camino Real, Ste 13A #235

City: Palo Alto, State: CA, Zip Code: 94301-2326

Purpose of Disbursement: Salary

Candidate Name:

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: 501360407

Amount of Each Disbursement this Period: 8208.67

Memo Item \*

**B. Wheeler, Natalie, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 29 / 2024

Mailing Address: 855 El Camino Real, Ste 13A #235

City: Palo Alto, State: CA, Zip Code: 94301-2326

Purpose of Disbursement: Salary

Candidate Name:

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: 501360408

Amount of Each Disbursement this Period: 4442.40

Memo Item \*

**C. ADP, Inc.**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 29 / 2024

Mailing Address: 1 ADP Blvd

City: Roseland, State: NJ, Zip Code: 07068-1728

Purpose of Disbursement: Payroll Taxes

Candidate Name:

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: 501360399

Amount of Each Disbursement this Period: 3733.98

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Mind the Gap, Inc

Form A: ADP, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Premier Political Compliance. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: ADP, Inc. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only) summary rows.

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mind the Gap, Inc

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360340

Amount of Each Disbursement this Period

3841.05

Memo Item \*

Full Name (Last, First, Middle Initial)

B. ADP, Inc.

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Payroll Services & Insurance

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360341

Amount of Each Disbursement this Period

757.25

Memo Item \*

Full Name (Last, First, Middle Initial)

C. Benjamin, Beth, , ,

Mailing Address 855 El Camino Real  
Ste # 13A

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C

Transaction ID : 501360342

Amount of Each Disbursement this Period

9145.67

Memo Item \*

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Burns, Jackie, , ,**

Mailing Address 570 Vanderbilt Ave  
Apt 2R

City  
Brooklyn

State  
NY

Zip Code  
11238-3518

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360343**

Amount of Each Disbursement this Period

7288.44

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Fawcett, Emma, , ,**

Mailing Address 9010 SW Oak St  
Apt 209

City  
Tigard

State  
OR

Zip Code  
97223-6587

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360344**

Amount of Each Disbursement this Period

3125.87

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Mathias, Mitch, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C

**Transaction ID : 501360345**

Amount of Each Disbursement this Period

7646.77

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. McBride, Marissa, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360346**

Amount of Each Disbursement this Period

[REDACTED] 10380.11

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Ramjug, Patrick, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360347**

Amount of Each Disbursement this Period

[REDACTED] 4557.66

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Rosmarin, Josh, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 501360348**

Amount of Each Disbursement this Period

[REDACTED] 8208.67

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 0.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Mind the Gap, Inc**

Full Name (Last, First, Middle Initial)

**A. Wheeler, Natalie, , ,**

Mailing Address 855 El Camino Real  
Ste 13A #235

City  
Palo Alto

State  
CA

Zip Code  
94301-2326

Purpose of Disbursement

Salary

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 501360349**

Amount of Each Disbursement this Period

[ ] 4602.40 [ ]

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. ADP, Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement

Retirement Plan

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 501360159**

Amount of Each Disbursement this Period

[ ] 4721.51 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ] [ ]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 4721.51 [ ]

**TOTAL** This Period (last page this line number only)..... ▶

[ ] 472999.81 [ ]