

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

ADDRESS (number and street)

Post Office Box 60936

Check if different than previously reported. (ACC)

Palto Alto

CA

94306

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

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)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - Convention (12C)
 - General (12G)
 - Special (12S)
 - Runoff (12R)

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

[MM] / [DD] / [YYYY] 07 / 01 / 2019

through

[MM] / [DD] / [YYYY] 09 / 30 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Gottlieb, Graham, D., ,

Type or Print Name of Treasurer

Signature of Treasurer

Gottlieb, Graham, D., ,

[Electronically Filed]

Date

[MM] / [DD] / [YYYY] 11 / 12 / 2019

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Mind the Gap

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		51229.23
(b) Cash on Hand at Beginning of Reporting Period.....	144431.56	
(c) Total Receipts (from Line 19)	593681.88	817868.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	738113.44	869097.90
7. Total Disbursements (from Line 31).....	110295.25	241279.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	627818.19	627818.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Mind the Gap

Report Covering the Period: From: 07 / 01 / 2019 To: 09 / 30 / 2019

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).....	593081.88	817023.67
(ii) Unitemized	600.00	600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	593681.88	817623.67
(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)	593681.88	817623.67
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).....	0.00	245.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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)).....▶	593681.88	817868.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	593681.88	817868.67

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	110295.25	241279.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	110295.25	241279.71
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)) ..	110295.25	241279.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110295.25	241279.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	593681.88	817623.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	593681.88	817623.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	110295.25	241279.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	245.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	110295.25	241034.71

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 70
<input checked="" 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 type="checkbox"/> 17

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

A. Acree, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 Rhode Island St
 City San Francisco State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 16 / 2019
Transaction ID : SA11AI.4438
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Asen, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 224 E 49th St
 City New York State NY Zip Code 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 01 / 2019
Transaction ID : SA11AI.4442
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Bash, Alec, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 Church Street
 City San Francisco State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 04 / 2019
Transaction ID : SA11AI.4446
 Amount of Each Receipt this Period 800.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	13300.00
TOTAL 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 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Bennett, Kathleen, , ,

Mailing Address 10 Mapache Court

City Portola Valley	State CA	Zip Code 94028
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2019

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Bernhardt, Anthony, , ,

Mailing Address 4 The Uplands

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2019

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Bhutani, Leslie, , ,

Mailing Address 12 E 13th St Apt 9

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

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

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2019

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL 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: PAGE 8 OF 70
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Birenbaum, Larry, , ,

Mailing Address 20052 Sunset Dr

City Saratoga State CA Zip Code 95070

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

Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2019

Transaction ID : SA11AI.4455

Amount of Each Receipt this Period
10000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Boothe, Barry, , ,

Mailing Address 2435 Divisadero St

City San Francisco State CA Zip Code 94115

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2019

Transaction ID : SA11AI.4457

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Borchert, Adam, , ,

Mailing Address 598 Tremont St Unit 3

City Boston State MA Zip Code 02118

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

Name of Employer (for Individual) Bain & Company Occupation (for Individual) Consultant

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
 09 / 01 / 2019

Transaction ID : SA11AI.4459

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 17500.00

TOTAL 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 9 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Braufman, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 Sunrise Highway, No. 1-307
 City Rockville Center State NY Zip Code 11570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Philanthropist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 02 / 2019
Transaction ID : SA11AI.4461
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Braufman, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 265 Sunrise Highway, No. 1-307
 City Rockville Center State NY Zip Code 11570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Philanthropist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 09 / 2019
Transaction ID : SA11AI.4829
 Amount of Each Receipt this Period 9000.00
 Memo Item

C. Brown, Shona, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Crowell Lane
 City Atherton State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 10 / 2019
Transaction ID : SA11AI.4593
 Amount of Each Receipt this Period 50000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60000.00
TOTAL 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 10 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Burstein, Barton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 Cowper St
 City Palo Alto State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2019
Transaction ID : SA11AI.4463
 Amount of Each Receipt this Period
 15000.00
 Memo Item

B. Chang, Wayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 Berkeley Ave
 City Menlo Park State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tailwindss Occupation (for Individual) Investor
 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
 08 / 21 / 2019
Transaction ID : SA11AI.4467
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Chun, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8520 Allenwood Rd
 City Los Angeles State CA Zip Code 90046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2019
Transaction ID : SA11AI.4469
 Amount of Each Receipt this Period
 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	21500.00
TOTAL 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 11 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Clearman, Steven, , ,

Mailing Address 52 Garner Road

City Valatie	State NY	Zip Code 12184
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2019

Transaction ID : SA11AI.4599

Amount of Each Receipt this Period
50000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Cohen, David, , ,

Mailing Address 210 S 25th St Unit 1001

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Minerva Advisors	Occupation (for Individual) Investor
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2019

Transaction ID : SA11AI.4471

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Cohen, Josh, , ,

Mailing Address 570 Diamond Street

City San Francisco	State CA	Zip Code 94114
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Apple, Inc.	Occupation (for Individual) Professor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2019

Transaction ID : SA11AI.4473

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	53500.00
TOTAL 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 12 OF 70
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Cooke, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 W 63d Street
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 04 / 2019
Transaction ID : SA11AI.4475
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Crabb, Tony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1083 Vine St # 249
 City Healdsburg State CA Zip Code 95448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 16 / 2019
Transaction ID : SA11AI.4477
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Deamer, Bartley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 Douglass St
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 21 / 2019
Transaction ID : SA11AI.4481
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL 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 13 OF 70
<input checked="" 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 type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Donahue, John, , ,		Date of Receipt
Mailing Address 559 Nathan Abbott Way		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2019"/>
City Stanford	State CA	Zip Code 94305
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4483
Name of Employer (for Individual) Stanford Law School		Occupation (for Individual) Professor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Driscoll, Jean, , ,		Date of Receipt
Mailing Address 21 Tanglewood Rd		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2019"/>
City Berkeley	State CA	Zip Code 94705
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4485
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	Amount of Each Receipt this Period <input type="text" value="10000.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Farb, Deborah, , ,		Date of Receipt
Mailing Address 49 Plaza Drive		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2019"/>
City Berkeley	State CA	Zip Code 94705
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4491
Name of Employer (for Individual) Stirling Associates SF		Occupation (for Individual) Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="16000.00"/>
TOTAL 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 14 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Feintech, Lynn, , ,

Mailing Address 4 The Uplands

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Liberty Bldg Company Investmen	Occupation (for Individual) President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2019

Transaction ID : SA11AI.4493

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Fischer, David, , ,

Mailing Address PO Box 19440

City Avon	State CO	Zip Code 81620
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Facebook	Occupation (for Individual) VP
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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
08		18		2019

Transaction ID : SA11AI.4495

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Fitterman, Robert, , ,

Mailing Address 56 West 89th Street
Apt A

City New York	State NY	Zip Code 10024
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2019

Transaction ID : SA11AI.4497

Amount of Each Receipt this Period
12000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	19500.00
TOTAL 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 15 OF 70
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Forman, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 Loomis Place
 City New Haven State CT Zip Code 06511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Yale Law School Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2019
Transaction ID : SA11AI.4498
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Geballe, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 35th Ave
 City Seattle State WA Zip Code 98122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F. Hutchinson Cancer Research Occupation (for Individual) Physician-Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 21 / 2019
Transaction ID : SA11AI.4500
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Geballe, Theodore, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 259 Kings Mountain Rd
 City Woodside State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stanford University Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 16 / 2019
Transaction ID : SA11AI.4502
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL 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 16 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1455.79

Date of Receipt 07 / 09 / 2019
Transaction ID : SA11AI.4619
 Amount of Each Receipt this Period 14.00
 Memo Item
 In-kind - cost of graphic design through Vizzlo

B. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1575.79

Date of Receipt 07 / 15 / 2019
Transaction ID : SA11AI.4617
 Amount of Each Receipt this Period 120.00
 Memo Item
 In-kind - Cost of file encryption through Digify

C. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1645.79

Date of Receipt 07 / 16 / 2019
Transaction ID : SA11AI.4615
 Amount of Each Receipt this Period 70.00
 Memo Item
 In-kind - cost of mass email through ActiveCampaign

SUBTOTAL of Receipts This Page (optional).....	204.00
TOTAL 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 17 OF 70
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1659.79

Date of Receipt 08 / 09 / 2019
Transaction ID : SA11AI.4612
 Amount of Each Receipt this Period 14.00
 Memo Item
 In-kind - Cost of graphic design through Vizzlo

B. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1779.79

Date of Receipt 08 / 15 / 2019
Transaction ID : SA11AI.4610
 Amount of Each Receipt this Period 120.00
 Memo Item
 In-kind - Cost of file encryption through Digify

C. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1849.79

Date of Receipt 08 / 16 / 2019
Transaction ID : SA11AI.4622
 Amount of Each Receipt this Period 70.00
 Memo Item
 In-kind - cost of mass emails through Active Campaign

SUBTOTAL of Receipts This Page (optional).....	204.00
TOTAL 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:	PAGE 18 OF 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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

A. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1863.79

Date of Receipt 09 / 09 / 2019
Transaction ID : SA11AI.4607
 Amount of Each Receipt this Period 14.00
 Memo Item
 In-kind - Graphic design through Vizzlo

B. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1983.79

Date of Receipt 09 / 15 / 2019
Transaction ID : SA11AI.4605
 Amount of Each Receipt this Period 120.00
 Memo Item
 In-kind - Cost of Digify file encryption.

C. Gottlieb, Graham, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Pox 60936
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Student Occupation (for Individual) Student
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2053.79

Date of Receipt 09 / 16 / 2019
Transaction ID : SA11AI.4601
 Amount of Each Receipt this Period 70.00
 Memo Item
 In-kind - cost of ActiveCampaign email outreach.

SUBTOTAL of Receipts This Page (optional).....	204.00
TOTAL 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 19 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Gottlieb, Graham, D., ,

Mailing Address P.O. Pox 60936

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

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

Aggregate Year-to-Date ▼
2173.67

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2019

Transaction ID : SA11AI.4603

Amount of Each Receipt this Period
119.88

Memo Item
In-kind - cost of Adobe PDF editing & design.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Granetz, Marc, , ,

Mailing Address 36 Chestnut Hill Rd

City Wilton	State CT	Zip Code 06897
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JP Morgan Chase	Occupation (for Individual) Banking
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2019

Transaction ID : SA11AI.4504

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Grant, Robert, , ,

Mailing Address 15 Campo Bello Ct

City Menlo Park	State CA	Zip Code 94025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2019

Transaction ID : SA11AI.4506

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3619.88
TOTAL 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 20 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Grasseschi, Barbara, , ,		Date of Receipt MM / DD / YYYY 08 / 16 / 2019
Mailing Address 1083 Vine Street Mailbox 286		Transaction ID : SA11AI.4837
City Healsburg	State CA	Zip Code 95448
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) Puma Springs Vineyard	Occupation (for Individual) Farmer	<input type="checkbox"/> Memo Item
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. Haddock, Robert, , ,		Date of Receipt MM / DD / YYYY 08 / 23 / 2019
Mailing Address 7548 N Eucalyptus Dr		Transaction ID : SA11AI.4508
City Paradise Valley	State AZ	Zip Code 85253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hall, Victoria, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2019
Mailing Address 1175 Park Ave.		Transaction ID : SA11AI.4835
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL 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: PAGE 21 OF 70
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Harris, Elisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3506 N Oakley Ave
 City Chicago State IL Zip Code 60618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2019
Transaction ID : SA11AI.4510
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Hienemann, Benjamin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Everett St - G24
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harvard Law School Occupation (for Individual) Lecturer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 21 / 2019
Transaction ID : SA11AI.4512
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Jacobs, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 Roblar Avenue
 City Hillsborough State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 08 / 2019
Transaction ID : SA11AI.4519
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00
TOTAL 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 22 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Katz, Meryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 Potomac St
 City San Francisco State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pangaea Trading Company Occupation (for Individual) Importer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2019
Transaction ID : SA11AI.4518
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Katz, Russell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2723 Q St NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dataprompt Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2019
Transaction ID : SA11AI.4514
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Keller, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 Locust St
 City San Francisco State CA Zip Code 94118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 14 / 2019
Transaction ID : SA11AI.4521
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL 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 23 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Khaishgi, Ahmed, , ,

Mailing Address 455 Frederick Street

City San Francisco	State CA	Zip Code 94117
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Square Table	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2019

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period
7500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Kramer, Karl, , ,

Mailing Address 1561 Awalt Ct

City Los Altos	State CA	Zip Code 94024
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		15		2019

Transaction ID : SA11AI.4525

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Lafetra Collier, Suzanne, , ,

Mailing Address 1600 Euclid Avenue

City Berkeley	State CA	Zip Code 94709
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2019

Transaction ID : SA11AI.4527

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL 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 24 OF 70
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Leigh, Abby, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 Central Park W Apt 6L
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Abby Leigh Ltd. Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2019
Transaction ID : SA11AI.4529
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Lo, Selina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 Santa Rita Ave
 City Palo Alto State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 11 / 2019
Transaction ID : SA11AI.4531
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Mahoney, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 Jordan Ave.
 City San Francisco State CA Zip Code 94118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Symantec Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2019
Transaction ID : SA11AI.4839
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	12000.00
TOTAL 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 25 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Marshall, Robert, , ,

Mailing Address 846 Lilac Dr

City Montecito	State CA	Zip Code 93108
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2019

Transaction ID : SA11AI.4535

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Martin, Michael, , ,

Mailing Address 10 W 66th St Apt 32B

City New York	State NY	Zip Code 10023
------------------	-------------	-------------------

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

Name of Employer (for Individual) Fordham University	Occupation (for Individual) Professor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2019

Transaction ID : SA11AI.4537

Amount of Each Receipt this Period
2000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Maya, Gina, , ,

Mailing Address 450 Seale Ave

City Palo Alto	State CA	Zip Code 94301
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Human Rights Watch	Occupation (for Individual) Outreach & Development
---	---

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
08		15		2019

Transaction ID : SA11AI.4539

Amount of Each Receipt this Period
20000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	22500.00
TOTAL 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 26 OF 70
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. McClelland, Carter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 Central Park West, Apt. 13C
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Union Square Advisors Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 24 / 2019
Transaction ID : SA11AI.4541
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. McKown, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 Russell St
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 21 / 2019
Transaction ID : SA11AI.4543
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. McNamee, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Olive Hill Lane
 City Woodside State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Elevation Partners Occupation (for Individual) Venture Capitalist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 08 / 06 / 2019
Transaction ID : SA11AI.4846
 Amount of Each Receipt this Period 30000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	57500.00
TOTAL 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 27 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Miller, Robert, , ,

Mailing Address 1008 Sycamore Dr.

City Cupertino	State CA	Zip Code 95014
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Cooley LLP	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2019

Transaction ID : SA11AI.4841

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mornell, Sascha, , ,

Mailing Address 300 Ascot Rd

City Hillsborough	State CA	Zip Code 94010
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Get My Boat	Occupation (for Individual) Executive
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		16		2019

Transaction ID : SA11AI.4545

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Muscatine, Lissa, , ,

Mailing Address 7020 Glenbrook Rd

City Bethesda	State MD	Zip Code 20814
------------------	-------------	-------------------

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

Name of Employer (for Individual) Politics & Prose Book Store	Occupation (for Individual) Owner & Author
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2019

Transaction ID : SA11AI.4547

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL 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 28 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Noble, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Locke Ln
 City Lexington State MA Zip Code 02420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bain & Company Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2019
Transaction ID : SA11AI.4549
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Obermayer, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Grey Stone Path
 City Dedham State MA Zip Code 02026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2019
Transaction ID : SA11AI.4551
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Orr, Dominic, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 Junipero Serra Blvd
 City Daly City State CA Zip Code 94014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 09 / 04 / 2019
Transaction ID : SA11AI.4554
 Amount of Each Receipt this Period 40000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45250.00
TOTAL 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 29 OF 70
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Parsons, John, , ,		Date of Receipt MM / DD / YYYY 08 / 17 / 2019
Mailing Address 14 Peninsula Road		Transaction ID : SA11AI.4556
City Delvedere Tiburon	State CA	Zip Code 94920
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peschke-Koedt, Lisa, , ,		Date of Receipt MM / DD / YYYY 08 / 26 / 2019
Mailing Address 965 Addison Avenue		Transaction ID : SA11AI.4843
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rao, Amy, , ,		Date of Receipt MM / DD / YYYY 09 / 11 / 2019
Mailing Address 228 Seale Ave		Transaction ID : SA11AI.4558
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7000.00
Name of Employer (for Individual) Integrated Archive Systems	Occupation (for Individual) Chief Executive Officer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 7000.00	

SUBTOTAL of Receipts This Page (optional).....▶	7750.00
TOTAL 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 30 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rifkin, Ryan, , ,		Date of Receipt MM / DD / YYYY 08 / 27 / 2019
Mailing Address 630 Thomas L Berkley Way Apt 707		Transaction ID : SA11AI.4560
City Oakland	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) Google, Inc.	Occupation (for Individual) Scientist	<input type="checkbox"/> Memo Item
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. Ring, David, , ,		Date of Receipt MM / DD / YYYY 08 / 19 / 2019
Mailing Address 3610 W Soda Rock Ln		Transaction ID : SA11AI.4562
City Healdsburg	State CA	Zip Code 95448
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Eureka Information Services Gr	Occupation (for Individual) Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Robbins, Lawrence, , ,		Date of Receipt MM / DD / YYYY 08 / 24 / 2019
Mailing Address 200 Chambers St. Apt. 19A		Transaction ID : SA11AI.4832
City New York	State NY	Zip Code 10007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) Robbins Russell	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional).....▶	13500.00
TOTAL 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 31 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Ryan, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 W 69th St.
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AlleyCorp Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 29 / 2019
Transaction ID : SA11AI.4564
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. Salusky, Monica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Oak Dr
 City Orinda State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 22 / 2019
Transaction ID : SA11AI.4566
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Salusky, Sheppard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 Westlake Avenue, Suite 305
 City Seattle State WA Zip Code 98109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Phsycologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 16 / 2019
Transaction ID : SA11AI.4568
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 28000.00
TOTAL 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 32 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Sanger, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3600 Washington St
 City San Francisco State CA Zip Code 94118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2019
Transaction ID : SA11AI.4570
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Schwartz, Evan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 W 89th St Apt A
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Joremi Enterprises, Inc. Occupation (for Individual) Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 26 / 2019
Transaction ID : SA11AI.4572
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Serrurier, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 Old La Honda Road
 City Woodside State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 10 / 2019
Transaction ID : SA11AI.4595
 Amount of Each Receipt this Period 50000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65000.00
TOTAL 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 33 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Sharfman, Ronnie, , ,

Mailing Address 620 West 247th Street

City Bronx	State NY	Zip Code 10471
---------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2019

Transaction ID : SA11AI.4574

Amount of Each Receipt this Period
800.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Siegelman, Russell, , ,

Mailing Address 244 Santa Rita Ave.

City Palo Alto	State CA	Zip Code 94301
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2019

Transaction ID : SA11AI.4849

Amount of Each Receipt this Period
50000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Spiro, Lionel, , ,

Mailing Address 68 Beacon St # 5E

City Boston	State MA	Zip Code 02108
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2019

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	52300.00
TOTAL 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 34 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Stein, Isaac, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 Monte Vista Ave

City Atherton	State CA	Zip Code 94027
------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2019

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
1000.00

Memo Item

B. Steinberg, Diane Heidt, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 84 Remsen St

City Brooklyn	State NY	Zip Code 11201
------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2019

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period
30000.00

Memo Item

C. Vernal, Mike, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 Lowell Ave

City Lowell	State MA	Zip Code 94301
----------------	-------------	-------------------

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

Name of Employer (for Individual) Sequoia Capital	Occupation (for Individual) Partner
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2019

Transaction ID : SA11AI.4587

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	31500.00
TOTAL 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 35 OF 70
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mind the Gap

A. Weitz, Katie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 S 91st Ave
 City Omaha State NE Zip Code 68124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Weitz Family Foundation Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2019
Transaction ID : SA11AI.4585
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Westmont, Cheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 Parrott Dr
 City Hillsborough State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gardenscapes Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2019
Transaction ID : SA11AI.4589
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Young, Sheila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 Parrot Drive
 City Hillsborough State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Young & Young Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 09 / 2019
Transaction ID : SA11AI.4591
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	593081.88

**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

Full Name (Last, First, Middle Initial)
A. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85282

Purpose of Disbursement Payroll taxes and benefits withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 09 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4647

Amount of Each Disbursement this Period: 6709.11

Memo Item

Full Name (Last, First, Middle Initial)
B. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85282

Purpose of Disbursement payroll administrative expense.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4663

Amount of Each Disbursement this Period: 102.95

Memo Item

Full Name (Last, First, Middle Initial)
C. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85282

Purpose of Disbursement Payroll taxes and benefits withholding.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 08 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4720

Amount of Each Disbursement this Period: 6692.82

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13504.88

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

Full Name (Last, First, Middle Initial)

A. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85282

Purpose of Disbursement
Payroll administrative expense.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4732
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85282

Purpose of Disbursement
Payroll taxes and benefits withholding.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4743
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85282

Purpose of Disbursement
payroll taxes and benefits withholding.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4764
Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City
Tempe

State
AZ

Zip Code
85282

Purpose of Disbursement
Payroll administrative expenses.

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4797

Amount of Each Disbursement this Period

[REDACTED] 97.95

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP Inc.

Mailing Address 111 West Rio Salado Parkway

City
Tempe

State
AZ

Zip Code
85282

Purpose of Disbursement
Payroll tax, income tax, and benefit withholdings

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4805

Amount of Each Disbursement this Period

[REDACTED] 1011.54

Memo Item

Full Name (Last, First, Middle Initial)

C. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
travel

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4675

Amount of Each Disbursement this Period

[REDACTED] 471.30

Memo Item

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

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

[REDACTED] 1580.79

[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

Full Name (Last, First, Middle Initial)
A. Alaska Air

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 24 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4676**

Amount of Each Disbursement this Period: 752.60

Memo Item

Full Name (Last, First, Middle Initial)
B. Alaska Air

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement In-flight Wifi.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 24 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4680**

Amount of Each Disbursement this Period: 40.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Alaska Air

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement In-flight Wifi.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 25 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4681**

Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 832.60

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

Full Name (Last, First, Middle Initial)

A. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
In-flight Wifi.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4708

Amount of Each Disbursement this Period

[REDACTED] 39.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
food and beverage.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4709

Amount of Each Disbursement this Period

[REDACTED] 6.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
Travel

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4726

Amount of Each Disbursement this Period

[REDACTED] 471.30

Memo Item

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

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

[REDACTED] 517.25

[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

Full Name (Last, First, Middle Initial)

A. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
Travel.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4750

Amount of Each Disbursement this Period

627.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
Travel.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4765

Amount of Each Disbursement this Period

381.31

Memo Item

Full Name (Last, First, Middle Initial)

C. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
Travel.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4767

Amount of Each Disbursement this Period

1.00

Memo Item

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

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

1009.91

**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

Full Name (Last, First, Middle Initial)

A. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
In-flight Wifi.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2019

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.4785

Amount of Each Disbursement this Period

[Redacted] 23.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
Travel.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2019

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.4792

Amount of Each Disbursement this Period

[Redacted] 105.99

Memo Item

Full Name (Last, First, Middle Initial)

C. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
travel.

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2019

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.4796

Amount of Each Disbursement this Period

[Redacted] 431.30

Memo Item

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

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

[Redacted] 561.24

[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

Full Name (Last, First, Middle Initial)

A. Alaska Air

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
Airline WiFi

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4802

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Benjamin, Beth, , ,

Mailing Address 777 Hermosa Way

City
Menlo Park

State
CA

Zip Code
94025

Purpose of Disbursement
Payroll via ADP

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4819

Amount of Each Disbursement this Period

8926.88

Memo Item

Full Name (Last, First, Middle Initial)

C. Benjamin, Beth, , ,

Mailing Address 777 Hermosa Way

City
Menlo Park

State
CA

Zip Code
94025

Purpose of Disbursement
Payroll via ADP

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2019

FEC Identification Number

C

Transaction ID : SB21B.4824

Amount of Each Disbursement this Period

9571.21

Memo Item

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

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

18518.09

**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

Full Name (Last, First, Middle Initial)

A. Blue Parasol

Mailing Address 3901 Centerview Drive, Suite W

City Chantilly State VA Zip Code 20151

Purpose of Disbursement information technology services.

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2019

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.4747

Amount of Each Disbursement this Period

[Redacted] 3963.46

Memo Item

Full Name (Last, First, Middle Initial)

B. Budget Rent a Car

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement Travel.

002

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2019

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.4695

Amount of Each Disbursement this Period

[Redacted] 307.62

Memo Item

Full Name (Last, First, Middle Initial)

C. Daniel Martin

Mailing Address 1508 N. Winstel Blvd.

City Tucson State AZ Zip Code 85716

Purpose of Disbursement Internet Technology Database Consulting

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2019

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.4798

Amount of Each Disbursement this Period

[Redacted] 7000.00

Memo Item

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

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

[Redacted] 11271.08

[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

Full Name (Last, First, Middle Initial)

A. Fried, Barbara, , ,

Mailing Address 743 Cooksey Lane

City Stanford State CA Zip Code 94305

Purpose of Disbursement
Travel expense reimbursement

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4809
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Email and software suite

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4624
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Email and software suite.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4701
Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Email and software suite.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4746
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Gottlieb, Graham, D., ,

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
In-kind - cost of graphic design through Vizzlo

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4620
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Gottlieb, Graham, D., ,

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
Payroll via ADP

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4814
 Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Gottlieb, Graham, D., ,

Mailing Address P.O. Pox 60936

City
Palo Alto

State
CA

Zip Code
94306

Purpose of Disbursement
In-kind - Cost of file encryption through Digify

Category/
Type

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	7		1	5		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4618

Amount of Each Disbursement this Period

 120.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gottlieb, Graham, D., ,

Mailing Address P.O. Pox 60936

City
Palo Alto

State
CA

Zip Code
94306

Purpose of Disbursement
In-kind - cost of mass email through ActiveCampaign

Category/
Type

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	7		1	6		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4616

Amount of Each Disbursement this Period

 70.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Gottlieb, Graham, D., ,

Mailing Address P.O. Pox 60936

City
Palo Alto

State
CA

Zip Code
94306

Purpose of Disbursement
Payroll via ADP

 001

Category/
Type

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	8		0	8		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4817

Amount of Each Disbursement this Period

 9454.68

Memo Item

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

 9644.68

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

A. Gottlieb, Graham, D., ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
In-kind - Cost of graphic design through Vizzlo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4613**

Amount of Each Disbursement this Period: 14.00

Memo Item

B. Gottlieb, Graham, D., ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
In-kind - Cost of file encryption through Digify

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 15 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4611**

Amount of Each Disbursement this Period: 120.00

Memo Item

C. Gottlieb, Graham, D., ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement
In-kind - cost of mass emails through Active Campaign

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 16 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4623**

Amount of Each Disbursement this Period: 70.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 204.00

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

A. Gottlieb, Graham, D., ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement In-kind - Graphic design through Vizzlo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4608**

Amount of Each Disbursement this Period: 14.00

Memo Item

B. Gottlieb, Graham, D., ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement Payroll via ADP

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4823**

Amount of Each Disbursement this Period: 9718.59

Memo Item

C. Gottlieb, Graham, D., ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Pox 60936

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement In-kind - Cost of Digify file encryption.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 15 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.4606**

Amount of Each Disbursement this Period: 120.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9852.59

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

Full Name (Last, First, Middle Initial) A. Gottlieb, Graham, D., ,		Date of Disbursement MM / DD / YYYY 09 / 16 / 2019	
Mailing Address P.O. Pox 60936		FEC Identification Number C [] Transaction ID : SB21B.4602 Amount of Each Disbursement this Period [] 70.00	
City Palo Alto	State CA	Zip Code 94306	Category/ Type []
Purpose of Disbursement In-kind - cost of ActiveCampaign email outreach.			
Candidate Name		Memo Item <input type="checkbox"/>	
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:	

Full Name (Last, First, Middle Initial) B. Gottlieb, Graham, D., ,		Date of Disbursement MM / DD / YYYY 09 / 20 / 2019	
Mailing Address P.O. Pox 60936		FEC Identification Number C [] Transaction ID : SB21B.4604 Amount of Each Disbursement this Period [] 119.88	
City Palo Alto	State CA	Zip Code 94306	Category/ Type []
Purpose of Disbursement In-kind - cost of Adobe PDF editing & design.			
Candidate Name		Memo Item <input type="checkbox"/>	
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:	

Full Name (Last, First, Middle Initial) C. Hemenway & Barnes LLP		Date of Disbursement MM / DD / YYYY 08 / 23 / 2019	
Mailing Address 75 State Street		FEC Identification Number C [] Transaction ID : SB21B.4737 Amount of Each Disbursement this Period [] 4232.00	
City Boston	State MA	Zip Code 02109	Category/ Type 001
Purpose of Disbursement Legal expenses.			
Candidate Name		Memo Item <input type="checkbox"/>	
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:	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4421.88
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

Full Name (Last, First, Middle Initial)

A. Jet Blue

Mailing Address 27-01 Queens Plaza N.

City Long Island City State NY Zip Code 11101

Purpose of Disbursement Travel.

Category/
Type

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	7		2	9		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4687
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Jet Blue

Mailing Address 27-01 Queens Plaza N.

City Long Island City State NY Zip Code 11101

Purpose of Disbursement travel

Category/
Type

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	8		3	0		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4744
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Jet Blue

Mailing Address 27-01 Queens Plaza N.

City Long Island City State NY Zip Code 11101

Purpose of Disbursement Travel/transportation

Category/
Type

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	9		3	0		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4808
 Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Lyft rides.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4639
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Lyft ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4642
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Lyft ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4648
Amount of Each Disbursement this Period

Memo Item

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

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

A. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4658

Amount of Each Disbursement this Period: 46.34

Memo Item

B. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4660

Amount of Each Disbursement this Period: 14.04

Memo Item

C. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4661

Amount of Each Disbursement this Period: 12.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 72.41

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

A. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4672

Amount of Each Disbursement this Period: 70.92

Memo Item

B. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement lyft ride.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4697

Amount of Each Disbursement this Period: 23.51

Memo Item

C. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4711

Amount of Each Disbursement this Period: 44.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 139.36

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

A. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides. Category/Type **002**

Candidate Name

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

State: District:

Date of Disbursement: 08 / 07 / 2019

FEC Identification Number: **C**

Transaction ID : **SB21B.4717**

Amount of Each Disbursement this Period: 131.78

Memo Item

B. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides. Category/Type **002**

Candidate Name

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

State: District:

Date of Disbursement: 08 / 08 / 2019

FEC Identification Number: **C**

Transaction ID : **SB21B.4723**

Amount of Each Disbursement this Period: 66.66

Memo Item

C. Lyft, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride. Category/Type **002**

Candidate Name

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

State: District:

Date of Disbursement: 08 / 12 / 2019

FEC Identification Number: **C**

Transaction ID : **SB21B.4727**

Amount of Each Disbursement this Period: 29.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 228.23

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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4729
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4734
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4738
 Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

002
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4740
Amount of Each Disbursement this Period
60.55

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides.

002
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4745
Amount of Each Disbursement this Period
91.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement lyft ride.

002
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4749
Amount of Each Disbursement this Period
10.41

Memo Item

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

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

162.13

**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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Lyft ride.

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4766
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft, Inc.

Mailing Address 2300 26th Street

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Lyft rides.

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4768
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 2300 26th Street

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
lyft ride.

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4771
Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4788
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4790
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement lyft ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4794
 Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride.

001
 002
Category/Type

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
09 / 18 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4795
Amount of Each Disbursement this Period
14.23

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft rides.

001
 002
Category/Type

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
09 / 23 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4800
Amount of Each Disbursement this Period
160.03

Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride

001
 002
Category/Type

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
09 / 24 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4803
Amount of Each Disbursement this Period
51.02

Memo Item

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

225.28

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

Full Name (Last, First, Middle Initial)

A. Lyft, Inc.

Mailing Address 2300 26th Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Lyft ride

Category/Type

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	9		2	6		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4804
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mix Max, Inc.

Mailing Address 512 Second Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Information technology services.

Category/Type

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	9		1	6		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4784
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mix Max, Inc.

Mailing Address 512 Second Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Information technology

Category/Type

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	9		3	0		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4807
 Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. NGP VAN Inc.

Mailing Address 48 Grove Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Data Access and Storage

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4643
Amount of Each Disbursement this Period
159.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN Inc.

Mailing Address 48 Grove Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Data access and storage.

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4724
Amount of Each Disbursement this Period
159.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN Inc.

Mailing Address 48 Grove Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Data access and storage.

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4748
Amount of Each Disbursement this Period
159.00

Memo Item

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

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

477.00

**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

Full Name (Last, First, Middle Initial)

A. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City Long IIsand City State NY Zip Code 11101

Purpose of Disbursement
Taxi Ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4682
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City Long IIsand City State NY Zip Code 11101

Purpose of Disbursement
Taxi Ride.

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4691
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City Long IIsand City State NY Zip Code 11101

Purpose of Disbursement
Taxi Rides

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4694
 Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City Long IIsand City State NY Zip Code 11101

Purpose of Disbursement
Taxi Ride

001
 002
Category/
Type

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 Y Y
08 / 01 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4698
Amount of Each Disbursement this Period
22.85

Memo Item

Full Name (Last, First, Middle Initial)

B. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City Long IIsand City State NY Zip Code 11101

Purpose of Disbursement
Taxi Ride.

001
 002
Category/
Type

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 Y Y
08 / 02 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4702
Amount of Each Disbursement this Period
18.30

Memo Item

Full Name (Last, First, Middle Initial)

C. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City Long IIsand City State NY Zip Code 11101

Purpose of Disbursement
taxi ride.

001
 002
Category/
Type

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 Y Y
08 / 02 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4703
Amount of Each Disbursement this Period
21.00

Memo Item

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

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

62.15

**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

Full Name (Last, First, Middle Initial) A. NYC Taxi LPEP Provider		Date of Disbursement MM / DD / YYYY 08 / 02 / 2019	
Mailing Address 31-00 47th Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4704 Amount of Each Disbursement this Period [REDACTED] 112.17	
City Long IIsand City	State NY	Zip Code 11101	Category/ Type 002
Purpose of Disbursement Taxi rides.		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) B. NYC Taxi LPEP Provider		Date of Disbursement MM / DD / YYYY 08 / 07 / 2019	
Mailing Address 31-00 47th Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4716 Amount of Each Disbursement this Period [REDACTED] 19.75	
City Long IIsand City	State NY	Zip Code 11101	Category/ Type 002
Purpose of Disbursement Taxi ride.		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) C. NYC Taxi LPEP Provider		Date of Disbursement MM / DD / YYYY 08 / 08 / 2019	
Mailing Address 31-00 47th Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4722 Amount of Each Disbursement this Period [REDACTED] 25.38	
City Long IIsand City	State NY	Zip Code 11101	Category/ Type 002
Purpose of Disbursement Taxi ride.		Memo Item <input type="checkbox"/>	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 157.30
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

Full Name (Last, First, Middle Initial)

A. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City
Long Island City

State
NY

Zip Code
11101

Purpose of Disbursement
Taxi rides.

002

Category/
Type

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	9		1	6		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4789

Amount of Each Disbursement this Period

[REDACTED] 64.24

Memo Item

Full Name (Last, First, Middle Initial)

B. NYC Taxi LPEP Provider

Mailing Address 31-00 47th Ave

City
Long Island City

State
NY

Zip Code
11101

Purpose of Disbursement
Taxi rides.

002

Category/
Type

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	9		2	3		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4801

Amount of Each Disbursement this Period

[REDACTED] 119.25

Memo Item

Full Name (Last, First, Middle Initial)

C. Sachs, Hadar, , ,

Mailing Address 10846 Linda Vista Drive

City
Cupertino

State
CA

Zip Code
95014

Purpose of Disbursement
Payroll via ADP

001

Category/
Type

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	9		2	7		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4826

Amount of Each Disbursement this Period

[REDACTED] 3242.56

Memo Item

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

[REDACTED] 3426.05

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

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 555 Market Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement uber rides. 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 07 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4665

Amount of Each Disbursement this Period: 118.36

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 555 Market Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement uber ride. 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 07 / 24 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4679

Amount of Each Disbursement this Period: 50.99

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 555 Market Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Uber ride. 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 07 / 29 / 2019

FEC Identification Number: C

Transaction ID : SB21B.4692

Amount of Each Disbursement this Period: 202.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 371.90

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

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 555 Market Street

City
San Francisco

State
CA

Zip Code
94105

Purpose of Disbursement
Uber rides.

002

Category/
Type

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	7				3	1		2	0	1	9		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4693

Amount of Each Disbursement this Period

[REDACTED] 111.72

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 555 Market Street

City
San Francisco

State
CA

Zip Code
94105

Purpose of Disbursement
Uber ride.

002

Category/
Type

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	8				1	3		2	0	1	9		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4728

Amount of Each Disbursement this Period

[REDACTED] 14.38

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 555 Market Street

City
San Francisco

State
CA

Zip Code
94105

Purpose of Disbursement
Uber ride

002

Category/
Type

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	9				2	7		2	0	1	9		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4806

Amount of Each Disbursement this Period

[REDACTED] 15.49

Memo Item

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

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

[REDACTED] 141.59

[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

Full Name (Last, First, Middle Initial)

A. United Air Lines

Mailing Address 233 South Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement Travel.

Category/Type

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	9		1	7		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4793
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Your Membership Careers

Mailing Address 9620 Exec. Center Dr. #200

City St. Petersburg State FL Zip Code 33702

Purpose of Disbursement Information technology services.

Category/Type

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	8		1	6		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4730
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Zoom.US

Mailing Address 55 Almaden Blvd.

City San Jose State CA Zip Code 95113

Purpose of Disbursement video/audio conferencing

Category/Type

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	8		0	5		2	0	1	9

FEC Identification Number

Transaction ID : SB21B.4710
 Amount of Each Disbursement this Period

Memo Item

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

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

A. Zoom.US

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Blvd.

City San Jose State CA Zip Code 95113

Purpose of Disbursement video/audio conferencing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 05 / 2019

FEC Identification Number C

Transaction ID : SB21B.4751

Amount of Each Disbursement this Period 40.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40.00

TOTAL This Period (last page this line number only)..... ▶ 108629.75