

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) PO Box 60936

Check if different than previously reported. (ACC) Palo 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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2020 through M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2020

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

Signature of Treasurer Gotlieb, Graham, D., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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="2020"/> | | <input type="text" value="858735.03"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="709945.13"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="50225.31"/> | <input type="text" value="400938.27"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="760170.44"/> | <input type="text" value="1259673.30"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="87733.60"/> | <input type="text" value="587236.46"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="672436.84"/> | <input type="text" value="672436.84"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 50000.00 | 396822.79 |
| (ii) Unitemized | 0.00 | 850.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 50000.00 | 397672.79 |
| (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) | 50000.00 | 397672.79 |
| 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)..... | 225.31 | 2854.73 |
| 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 | 410.75 |
| 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)).....▶ | 50225.31 | 400938.27 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 50225.31 | 400938.27 |

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 | 87733.60 | 587236.46 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 87733.60 | 587236.46 |
| 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)) .. | 87733.60 | 587236.46 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 87733.60 | 587236.46 |

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) | 50000.00 | 397672.79 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 50000.00 | 397672.79 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 87733.60 | 587236.46 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 225.31 | 2854.73 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 87508.29 | 584381.73 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Amending to update a contribution received from Diana Walsh and not from Kent Walker as originally reported.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 16
(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Walsh, Diana, , ,

Mailing Address 1701 Bryant St

| | | |
|-------------------|-------------|------------------------|
| City Palo Alto | State CA | Zip Code 94301-3708 |
|-------------------|-------------|------------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2020

Transaction ID : 5036887

Amount of Each Receipt this Period
50000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 50000.00 |
| TOTAL This Period (last page this line number only)..... | 50000.00 |

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

| | | | |
|---|------------------------------|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 16 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Mind The Gap

A. ADP Inc.

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

Mailing Address 1 ADP Blvd

| | | |
|------------------|-------------|------------------------|
| City Roseland | State NJ | Zip Code 07068-1728 |
|------------------|-------------|------------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1186.51

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07 | | 17 | | 2020 |

Transaction ID : 4828351

Amount of Each Receipt this Period
205.31

Memo Item

Refund from Vendor

B. ADP Inc.

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

Mailing Address 1 ADP Blvd

| | | |
|------------------|-------------|------------------------|
| City Roseland | State NJ | Zip Code 07068-1728 |
|------------------|-------------|------------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1186.51

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07 | | 02 | | 2020 |

Transaction ID : 4789719

Amount of Each Receipt this Period
20.00

Memo Item

Refund from Vendor

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 225.31 |
| TOTAL This Period (last page this line number only)..... | 225.31 |

**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 1 ADP Blvd

City
Roseland

State
NJ

Zip Code
07068-1728

Purpose of Disbursement
Payroll Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C []

Transaction ID : 500183710

Amount of Each Disbursement this Period

[] 164.49

Memo Item

Full Name (Last, First, Middle Initial)

B. Berger Hirschberg Strategies

Mailing Address 1010 Vermont Ave NW
Ste 814

City
Washington

State
DC

Zip Code
20005-4957

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 2 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C []

Transaction ID : 500193340

Amount of Each Disbursement this Period

[] 10106.07

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP Inc.

Mailing Address 1 ADP Blvd

City
Roseland

State
NJ

Zip Code
07068-1728

Purpose of Disbursement
Payroll Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 4 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C []

Transaction ID : 500193350

Amount of Each Disbursement this Period

[] 42.00

Memo Item

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

[] 10312.56

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 1 ADP Blvd

City
Roseland

State
NJ

Zip Code
07068-1728

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500183711

Amount of Each Disbursement this Period

25517.24

Memo Item

Full Name (Last, First, Middle Initial)

B. Hemenway & Barnes LLP

Mailing Address 75 State St

City
Boston

State
MA

Zip Code
02109-1827

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 1 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193341

Amount of Each Disbursement this Period

612.17

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP Inc.

Mailing Address 1 ADP Blvd

City
Roseland

State
NJ

Zip Code
07068-1728

Purpose of Disbursement
Payroll - See Below If Itemized

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500183712

Amount of Each Disbursement this Period

48466.63

Memo Item

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

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

74596.04

**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, , ,

Mailing Address PO Box 60936

City
Palo Alto

State
CA

Zip Code
94306-0936

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193302

Amount of Each Disbursement this Period

9475.47

Memo Item

Full Name (Last, First, Middle Initial)

B. McCarthy, Jill, , ,

Mailing Address PO Box 60936

City
Palo Alto

State
CA

Zip Code
94306-0936

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193303

Amount of Each Disbursement this Period

9554.29

Memo Item

Full Name (Last, First, Middle Initial)

C. Sachs, Hadar, , ,

Mailing Address PO Box 60936

City
Palo Alto

State
CA

Zip Code
94306-0936

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193304

Amount of Each Disbursement this Period

5952.80

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Mind The Gap

Full Name (Last, First, Middle Initial)

A. Scully, Abigail, , ,

Mailing Address PO Box 60936

City
Palo Alto

State
CA

Zip Code
94306-0936

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193305

Amount of Each Disbursement this Period

5321.60

Memo Item

Full Name (Last, First, Middle Initial)

B. Slates, Erica, , ,

Mailing Address 2720 4th Ave
Apt 1209

City
Seattle

State
WA

Zip Code
98121-1890

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193306

Amount of Each Disbursement this Period

8987.41

Memo Item

Full Name (Last, First, Middle Initial)

C. Benjamin, Beth, , ,

Mailing Address PO Box 60936

City
Palo Alto

State
CA

Zip Code
94306-0936

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C

Transaction ID : 500193299

Amount of Each Disbursement this Period

9175.06

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Mind The Gap

Full Name (Last, First, Middle Initial)

A. Paragon Solutions

Mailing Address 25 Commerce Dr

City
Cranford

State
NJ

Zip Code
07016-3605

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 0 | 2 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C []

Transaction ID : 500126022

Amount of Each Disbursement this Period

[] 335.38

Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 100 N Tryon St

City
Charlotte

State
NC

Zip Code
28202-2135

Purpose of Disbursement
Credit Card Payment - See Below If Itemized

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 2 | 0 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C []

Transaction ID : 500193342

Amount of Each Disbursement this Period

[] 862.65

Memo Item

Full Name (Last, First, Middle Initial)

C. LinkedIn

Mailing Address 222 2nd St

City
San Francisco

State
CA

Zip Code
94105-3106

Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 2 | 0 | | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C []

Transaction ID : 500193373

Amount of Each Disbursement this Period

[] 119.95

Memo Item

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

[] 1198.03

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) | PAGE 14 OF 16 |
| | <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. Digify

Full Name (Last, First, Middle Initial) _____

Mailing Address 350 Townsend St
Ste 746

City San Francisco State CA Zip Code 94107-1693

Purpose of Disbursement Software Subscription

Candidate Name _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 20 / 2020

FEC Identification Number: **C** _____
Transaction ID : 500193374
Amount of Each Disbursement this Period: _____ 360.00
Memo Item

B. Google

Full Name (Last, First, Middle Initial) _____

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Software Subscription

Candidate Name _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 20 / 2020

FEC Identification Number: **C** _____
Transaction ID : 500193375
Amount of Each Disbursement this Period: _____ 36.00
Memo Item

C. Google

Full Name (Last, First, Middle Initial) _____

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Software Subscription

Candidate Name _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 20 / 2020

FEC Identification Number: **C** _____
Transaction ID : 500193376
Amount of Each Disbursement this Period: _____ 156.00
Memo Item

| | |
|--|------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | _____ 0.00 |
| TOTAL This Period (last page this line number only).....▶ | _____ |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Mind The Gap

Full Name (Last, First, Middle Initial)

A. Zoom

Mailing Address 55 Almaden Blvd
FI 6

City
San Jose

State
CA

Zip Code
95113-1608

Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 0 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C []

Transaction ID : 500193377

Amount of Each Disbursement this Period

[] 169.98

Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN

Mailing Address 1445 New York Ave NW
Ste 200

City
Washington

State
DC

Zip Code
20005-2158

Purpose of Disbursement
Software Subscription

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 3 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C []

Transaction ID : 500183713

Amount of Each Disbursement this Period

[] 710.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP Inc.

Mailing Address 1 ADP Blvd

City
Roseland

State
NJ

Zip Code
07068-1728

Purpose of Disbursement
Payroll Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 1 | 7 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C []

Transaction ID : 500193343

Amount of Each Disbursement this Period

[] 151.47

Memo Item

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

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

[] 861.47

[]

**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. Bank of America

Full Name (Last, First, Middle Initial)

Mailing Address 100 N Tryon St

City Charlotte State NC Zip Code 28202-2135

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 07 / 2020

FEC Identification Number: C

Transaction ID : 500183714

Amount of Each Disbursement this Period: 15.00

Memo Item

B. MBA Consulting Group

Full Name (Last, First, Middle Initial)

Mailing Address 611 Pennsylvania Ave SE Ste 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement Compliance Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2020

FEC Identification Number: C

Transaction ID : 500193339

Amount of Each Disbursement this Period: 750.00

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).....▶ | 765.00 |
| TOTAL This Period (last page this line number only).....▶ | 87733.10 |