

# 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:
- |                                      |                                      |   |  |
|--------------------------------------|--------------------------------------|---|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)            | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input checked="" type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10)           | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> 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:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> 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 08 / 01 / 2020 through M M M / D D D / Y Y Y Y Y Y 08 / 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.

Gotlieb, Graham, D., ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Gotlieb, Graham, D., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 09 / 20 / 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.

Office Use Only									
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**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="2020"/>		<input type="text" value="858735.03"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="672436.84"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10203.80"/>	<input type="text" value="411142.07"/>
(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="682640.64"/>	<input type="text" value="1269877.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="141490.57"/>	<input type="text" value="728727.03"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="541150.07"/>	<input type="text" value="541150.07"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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: M M / D D / Y Y Y Y 08 / 01 / 2020 To: M M / D D / Y Y Y Y 08 / 31 / 2020

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).....	10000.00	406822.79
(ii) Unitemized .....	100.00	950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10100.00	407772.79
(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) .....	10100.00	407772.79
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).....	75.00	2929.73
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	28.80	439.55
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)).....▶	10203.80	411142.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10203.80	411142.07

**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 .....	141490.57	728727.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	141490.57	728727.03
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)) ..	141490.57	728727.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	141490.57	728727.03

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10100.00	407772.79
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10100.00	407772.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	141490.57	728727.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	75.00	2929.73
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	141415.57	725797.30

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Robbins, Richard, , ,

Mailing Address 1120 Nye St  
Ste 400

City San Rafael State CA Zip Code 94901-2946

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

Name of Employer (for Individual) Wareham Development Occupation (for Individual) Real Estate Developer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2020

**Transaction ID : 4870919**

Amount of Each Receipt this Period  
10000.00

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  
MM / DD / YYYY

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

**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 7 OF 18
<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
ADP Inc.

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 ▼  
1261.51

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08	/	27	/	2020

**Transaction ID : 4893770**

Amount of Each Receipt this Period  
75.00

Memo Item

Refund from Vendor

**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
	/		/	

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
	/		/	

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	75.00

**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 18  
(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. Bank of America**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 N Tryon St  
 City Charlotte State NC Zip Code 28202-2135  
 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 ▼  
 439.55

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2020  
**Transaction ID : 4870923**  
 Amount of Each Receipt this Period  
 28.80  
 Memo Item  
 Rebate

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28.80
<b>TOTAL</b> This Period (last page this line number only).....▶	28.80



**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. Analyst Institute LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 815 16th St NW  
FI 7

City Washington State DC Zip Code 20006-4101

Purpose of Disbursement General Campaign Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 12 / 2020

FEC Identification Number: C

Transaction ID : 500193450

Amount of Each Disbursement this Period: 31326.00

Memo Item

**B. NGP VAN**

Full Name (Last, First, Middle Initial)

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement Software Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : 500193360

Amount of Each Disbursement this Period: 710.00

Memo Item

**C. ADP Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 07 / 2020

FEC Identification Number: C

Transaction ID : 500193380

Amount of Each Disbursement this Period: 26614.71

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 58650.71

**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. Paragon Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 25 Commerce Dr

City Cranford State NJ Zip Code 07016-3605

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : 500193361

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. ADP Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement Payroll Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2020

FEC Identification Number: C

Transaction ID : 500193381

Amount of Each Disbursement this Period: 48.00

Memo Item

**C. ADP Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Blvd

City Roseland State NJ Zip Code 07068-1728

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2020

FEC Identification Number: C

Transaction ID : 500193382

Amount of Each Disbursement this Period: 3412.44

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3475.44

**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 - 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	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	2	0

FEC Identification Number

C [ ]

**Transaction ID : 500193384**

Amount of Each Disbursement this Period

[ ] 17858.71

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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	8		1	0		2	0	2	0

FEC Identification Number

C [ ]

**Transaction ID : 500193383**

Amount of Each Disbursement this Period

[ ] 17858.71

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	0

FEC Identification Number

C [ ]

**Transaction ID : 500193385**

Amount of Each Disbursement this Period

[ ] 49387.60

Memo Item

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

[ ] 67246.31

**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) <b>A. Gottlieb, Graham, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020	
Mailing Address PO Box 60936		FEC Identification Number C [ ] <b>Transaction ID : 500193457</b>	
City Palo Alto	State CA	Zip Code 94306-0936	Amount of Each Disbursement this Period [ ] <b>10396.47</b>
Purpose of Disbursement Salary		Category/ Type [ ]	Memo Item <input checked="" 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>B. McCarthy, Jill, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020	
Mailing Address PO Box 60936		FEC Identification Number C [ ] <b>Transaction ID : 500193458</b>	
City Palo Alto	State CA	Zip Code 94306-0936	Amount of Each Disbursement this Period [ ] <b>9554.28</b>
Purpose of Disbursement Salary		Category/ Type [ ]	Memo Item <input checked="" 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>C. Sachs, Hadar, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020	
Mailing Address PO Box 60936		FEC Identification Number C [ ] <b>Transaction ID : 500193459</b>	
City Palo Alto	State CA	Zip Code 94306-0936	Amount of Each Disbursement this Period [ ] <b>5952.79</b>
Purpose of Disbursement Salary		Category/ Type [ ]	Memo Item <input checked="" 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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] <b>0.00</b>
<b>TOTAL</b> 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) <b>A. ADP Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020	
Mailing Address 1 ADP Blvd		FEC Identification Number C [ ] <b>Transaction ID : 500193395</b> Amount of Each Disbursement this Period [ ] 151.47	
City Roseland	State NJ	Zip Code 07068-1728	Category/ Type [ ]
Purpose of Disbursement Payroll Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020	
Mailing Address 100 N Tryon St		FEC Identification Number C [ ] <b>Transaction ID : 500193386</b> Amount of Each Disbursement this Period [ ] 15.00	
City Charlotte	State NC	Zip Code 28202-2135	Category/ Type [ ]
Purpose of Disbursement Bank Fee		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. MBA Consulting Group</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2020	
Mailing Address 611 Pennsylvania Ave SE Ste 143		FEC Identification Number C [ ] <b>Transaction ID : 500193397</b> Amount of Each Disbursement this Period [ ] 750.00	
City Washington	State DC	Zip Code 20003-4303	Category/ Type [ ]
Purpose of Disbursement Compliance Consulting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 916.47
<b>TOTAL</b> 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. 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	8		0	5		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : 500193358**

Amount of Each Disbursement this Period

[REDACTED] 10041.47

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP Inc.**

Mailing Address 1 ADP Blvd

City  
Roseland

State  
NJ

Zip Code  
07068-1728

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : 500193378**

Amount of Each Disbursement this Period

[REDACTED] 5.71

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : 500193388**

Amount of Each Disbursement this Period

[REDACTED] 781.97

Memo Item

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

[REDACTED] 10829.15

**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. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View

State CA

Zip Code 94043-1351

Purpose of Disbursement Software Subscription

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2020

FEC Identification Number

C [ ]

**Transaction ID : 500193454**

Amount of Each Disbursement this Period

[ ] 156.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Zoom**

Mailing Address 55 Almaden Blvd  
FI 6

City San Jose

State CA

Zip Code 95113-1608

Purpose of Disbursement Software Subscription

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2020

FEC Identification Number

C [ ]

**Transaction ID : 500193455**

Amount of Each Disbursement this Period

[ ] 169.98

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

MM / DD / YYYY  
08 / 21 / 2020

FEC Identification Number

C [ ]

**Transaction ID : 500193398**

Amount of Each Disbursement this Period

[ ] 17.00

Memo Item

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

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

[ ] 17.00

[ ]

**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. 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) ▼

Date of Disbursement: 08 / 07 / 2020

FEC Identification Number: C

Transaction ID : 500193379

Amount of Each Disbursement this Period: 168.99

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : 500193399

Amount of Each Disbursement this Period: 186.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	354.99
<b>TOTAL</b> This Period (last page this line number only).....▶	141490.07