

**FEC
FORM 3P****REPORT OF RECEIPTS
AND DISBURSEMENTS**BY AN AUTHORIZED COMMITTEE OF A CANDIDATE
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

Howie Hawkins for Our Future

ADDRESS (number and street)

Post Office Box 562

Check if different
than previously
reported. (ACC)

Syracuse

CITY

NY

STATE

13205

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00708024

3. TYPE OF REPORT (Choose One)Check here if this is a Termination Report (TER) ☐

Quarterly Reports:

Monthly Reports:



April 15 (Q1)



October 15 (Q3)



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)



July 15 (Q2)



January 31 Year-End Report (YE)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)



12-Day Pre-Election Report for the Election on

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

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

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

in the State of

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



30-Day Post-Election Report for the General Election on

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

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

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

4. IS THIS REPORT AN AMENDMENT?

yes



no

5. COVERING PERIODM M / D D / Y Y Y Y Y Y
01 / 01 / 2021M M / D D / Y Y Y Y Y Y
01 / 01 / 2021M M / D D / Y Y Y Y Y Y
01 / 01 / 2021

THROUGH

M M / D D / Y Y Y Y Y Y
01 / 31 / 2021M M / D D / Y Y Y Y Y Y
01 / 31 / 2021M M / D D / Y Y Y Y Y Y
01 / 31 / 2021

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

Christal, Travis, , ,

Signature of Treasurer

Christal, Travis, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 23 / 2021M M / D D / Y Y Y Y Y Y
02 / 23 / 2021M M / D D / Y Y Y Y Y Y
02 / 23 / 2021NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.
All previous versions of this form are obsolete and should no longer be used.Office
Use
Only

Write or Type Committee Name

Howie Hawkins for Our Future

Report Covering the Period:

From:

M M
01D D
01Y Y Y Y
2021

To:

M M
01D D
31Y Y Y Y
2021**SUMMARY**

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	17920.12
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	3653.26
8. SUBTOTAL (Lines 6 and 7)	21573.38
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4)	15666.82
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8).....	5906.56
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	0.00
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	138194.90
13. EXPENDITURES SUBJECT TO LIMITATION (Use the worksheet on Page 8 to calculate this amount.)	0.00

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3).....	14281.59
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4).....	37233.23

DETAILED SUMMARY PAGE of Receipts

FEC Form 3P (Rev. 05/2016)

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NAME OF COMMITTEE (in Full)

Howie Hawkins for Our Future

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 / 01 / 2021

To:

M M / D D / Y Y Y Y
01 / 31 / 2021

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	507.50	1591.00
(ii) unitemized	3145.76	12931.19
(iii) Total contributions	3653.26	14522.19
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	3653.26	14522.19
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0.00	1055.00
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	1055.00
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	25.75
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	3653.26	15602.94

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 05/2016)

of Disbursements and Contributed Items

PAGE 4 / 50

NAME OF COMMITTEE (in Full)

Howie Hawkins for Our Future

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 / 01 / 2021

To:

M M / D D / Y Y Y Y
01 / 31 / 2021**II. DISBURSEMENTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

23. OPERATING EXPENDITURES.....	15666.82	38288.23
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	240.60
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	240.60
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	15666.82	38528.83

III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)31. ITEMS ON HAND TO BE LIQUIDATED
(Attach List)

FEC Form 3P (Rev. 05/2016)
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Page 5

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C

C00708024

Howie Hawkins for Our Future

ADDRESS (number and street)

Post Office Box 562

Syracuse

CITY

NY

STATE

13205

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

SCHEDULE A-P **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 50

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

Howie Hawkins for Our Future

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

Byrnes, James, , ,

Mailing Address 2 Enterprise Apt 8113

City

Aliso Viejo

State

CA

Zip Code

92656

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avanir Pharmaceuticals

Occupation

Systems Manager

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

257.50

Transaction ID : A-386540

Date of Receipt

01 / 11 / 2021

Amount of Each Receipt this Period

257.50

☐ Memo Item

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

Shoup, Laurence, , ,

Mailing Address 609 Aileen

City

Oakland

State

CA

Zip Code

94609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

retired

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : A-386695

Date of Receipt

01 / 22 / 2021

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

507.50

Total This Period (last page this line number only).....

507.50

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Basecamp LLC

Mailing Address 30 North Racine Ave
#200

City
Chicago

State
IL

Zip Code
60607

Purpose of Disbursement
project mgt software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-386720

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blankenhorn, Chris, M, ,

Mailing Address 821 N 5th

City
Springfield

State
IL

Zip Code
62702

Purpose of Disbursement
digital director

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2021

FEC Identification Number

C

Transaction ID : B-386713

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Christal, Travis, , ,

Mailing Address 14525 McCarran Ave

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Treasurer

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2021

FEC Identification Number

C

Transaction ID : B-386715

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1099.00

Total This Period (last page this line number only).....

SCHEDULE B-P

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Christal, Travis, , ,

Mailing Address 14525 McCarran Ave

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Treasurer

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2021

FEC Identification Number

C

Transaction ID : B-386711

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. eApps Hosting

Mailing Address 7742 Spalding Drive #363

City
Norcross

State
GA

Zip Code
30092

Purpose of Disbursement
hosting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2021

FEC Identification Number

C

Transaction ID : B-386719

Amount of Each Disbursement this Period

100.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Innovations, Inc.

Mailing Address 1 Weingeroff Blvd.

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
merch

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-386702

Amount of Each Disbursement this Period

3674.23

☐ Memo Item

Subtotal Of Receipts This Page (optional)..... 4275.18

Total This Period (last page this line number only).....

SCHEDULE B-P

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Financial Innovations, Inc.

Mailing Address 1 Weingeroff Blvd.

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
merch

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-386703

Amount of Each Disbursement this Period

4461.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Innovations, Inc.

Mailing Address 1 Weingeroff Blvd.

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
merch

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-386704

Amount of Each Disbursement this Period

155.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Innovations, Inc.

Mailing Address 1 Weingeroff Blvd.

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
merch

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-386705

Amount of Each Disbursement this Period

1034.84

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

5651.63

Total This Period (last page this line number only).....

SCHEDULE B-P

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Financial Innovations, Inc.

Mailing Address 1 Weingeroff Blvd.

City
Cranston

State
RI

Zip Code
02910

Purpose of Disbursement
merch

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2021

FEC Identification Number

C

Transaction ID : B-386706

Amount of Each Disbursement this Period

362.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google LLC

Mailing Address 1600 Amphitheatre Parkway

City
Mountain View

State
CA

Zip Code
94043

Purpose of Disbursement
G-Suite

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2021

FEC Identification Number

C

Transaction ID : B-386718

Amount of Each Disbursement this Period

233.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GreenGeeks LLC

Mailing Address 1158 26th St
#446

City
Santa Monica

State
CA

Zip Code
90403

Purpose of Disbursement
hosting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2021

FEC Identification Number

C

Transaction ID : B-386701

Amount of Each Disbursement this Period

169.95

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

765.42

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Merida, Andrea, E., ,

Mailing Address 1132 N Washington St

City
Denver

State
CO

Zip Code
80203

Purpose of Disbursement
campaign manager

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2021

FEC Identification Number

C

Transaction ID : B-386716

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merida, Andrea, E., ,

Mailing Address 1132 N Washington St

City
Denver

State
CO

Zip Code
80203

Purpose of Disbursement
campaign manager

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2021

FEC Identification Number

C

Transaction ID : B-386712

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Rodino, Virginia, , ,

Mailing Address 7251 Dockside Lane

City
Columbia

State
MD

Zip Code
21045

Purpose of Disbursement
press sec

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-386707

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1250.00

Total This Period (last page this line number only).....

SCHEDULE B-P **ITEMIZED DISBURSEMENTS**

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

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☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Rodino, Virginia, , ,

Mailing Address 7251 Dockside Lane

City
Columbia

State
MD

Zip Code
21045

Purpose of Disbursement
press sec

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-386708

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Rodino, Virginia, , ,

Mailing Address 7251 Dockside Lane

City
Columbia

State
MD

Zip Code
21045

Purpose of Disbursement
press sec

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-386709

Amount of Each Disbursement this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Rodino, Virginia, , ,

Mailing Address 7251 Dockside Lane

City
Columbia

State
MD

Zip Code
21045

Purpose of Disbursement
press sec

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-386710

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

875.00

Total This Period (last page this line number only).....

SCHEDULE B-P

ITEMIZED DISBURSEMENTS

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

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Rodino, Virginia, , ,

Mailing Address 7251 Dockside Lane

City
Columbia

State
MD

Zip Code
21045

Purpose of Disbursement
press sec

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 27 / 2021

FEC Identification Number

C

Transaction ID : B-386714

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SendGrid, Inc.

Mailing Address 1801 California Street
Suite 500

City
Denver

State
CO

Zip Code
80202

Purpose of Disbursement
email marketing software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2021

FEC Identification Number

C

Transaction ID : B-386717

Amount of Each Disbursement this Period

449.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 510 Townsend Street

City
San Francisco

State
CA

Zip Code
94103

Purpose of Disbursement
Stripe fees Jan 2021

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 31 / 2021

FEC Identification Number

C

Transaction ID : B-386696

Amount of Each Disbursement this Period

124.92

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1073.92

Total This Period (last page this line number only).....

SCHEDULE B-P

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

Full Name (Last, First, Middle Initial)

A. Zoom Video Communications Inc.

Mailing Address 55 Almaden Blvd
6th Floor

City
San Jose

State
CA

Zip Code
95113

Purpose of Disbursement
Zoom webinar subscription

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 30 / 2021

FEC Identification Number

C

Transaction ID : B-386698

Amount of Each Disbursement this Period

239.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

239.88

Total This Period (last page this line number only).....

15230.03

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BackOffice Thinking

Nature of Debt (Purpose):

estimate CiviCRM database development
contractors Nov 1 - Nov 3

Mailing Address 790 East Market Street

Suite 100

City

West Chester

State

PA

Zip Code

19382

Outstanding Balance Beginning This Period

50.00

Amount Incurred This Period

0.00

Payment This Period

0.00

Transaction ID : D-361131

Outstanding Balance at Close of This Period

50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BackOffice Thinking

Nature of Debt (Purpose):

estimate CiviCRM database development
contractors Nov 4 - Nov 23

Mailing Address 790 East Market Street

Suite 100

City

West Chester

State

PA

Zip Code

19382

Outstanding Balance Beginning This Period

300.00

Amount Incurred This Period

0.00

Payment This Period

0.00

Transaction ID : D-361132

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

Social Media and graphics contractor

Mailing Address 821 N 5th

City

Springfield

State

IL

Zip Code

62702

Outstanding Balance Beginning This Period

3000.00

Amount Incurred This Period

0.00

Payment This Period

0.00

Transaction ID : D-27321

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional)

3350.00

2) **TOTALS** This Period (last page this line number only)
3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / graphics Q1 2020

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43588

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / graphics April

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-51014

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / graphics May

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-84191

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

7000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / graphics June

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90160

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / graphics July

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90218

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / graphics Aug1-24

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

1548.00

Transaction ID : D-90247

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1548.00

1) **SUBTOTALS** This Period This Page (optional)

5548.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blankenhorn, Chris, M, ,

Nature of Debt (Purpose):

social media / tech director Sept

Mailing Address 821 N 5th

City
SpringfieldState
ILZip Code
62702

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-314468

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):

Treasurer contractor

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-27315

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):

Treasurer Q1 2020

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43585

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional)

8000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate
schedule(s)
for each
numbered line)

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(check only one)

☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer April

Mailing Address 14525 McCarran Ave

City
Fort Worth

State
TX

Zip Code
76155

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-51013

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer May

Mailing Address 14525 McCarran Ave

City
Fort Worth

State
TX

Zip Code
76155

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-84192

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer June

Mailing Address 14525 McCarran Ave

City
Fort Worth

State
TX

Zip Code
76155

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90156

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

6000.00

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer July

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

Transaction ID : D-90219

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer Aug1-24

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

Transaction ID : D-90245

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer Aug25-31

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

Transaction ID : D-280982

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)
2) **TOTALS** This Period (last page this line number only)
3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
Treasurer Sept

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-314466

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christal, Travis, , ,

Nature of Debt (Purpose):
reimbursement owed - Travis advanced \$300
to H&R block for 2020 1099 work

Mailing Address 14525 McCarran Ave

City
Fort WorthState
TXZip Code
76155

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-386690

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):
e-commerce and merch costs 1st half Oct -
estimate

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

3674.23

Transaction ID : D-324631

Amount Incurred This Period

0.00

Payment This Period

3674.23

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)

2300.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):
bumper stickers and signs

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

4192.29

Transaction ID : D-366258

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4192.29

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):
estimate Oct 15-31 merch costs

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

4461.56

Transaction ID : D-361128

Amount Incurred This Period

0.00

Payment This Period

4461.56

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):
estimate - merch costs Nov 1 - Nov 3

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

155.23

Transaction ID : D-361126

Amount Incurred This Period

0.00

Payment This Period

155.23

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)

4192.29

2) **TOTALS** This Period (last page this line number only)
3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
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☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):

estimate Nov4-Nov23 merch costs

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

1034.84

Transaction ID : D-361127

Amount Incurred This Period

0.00

Payment This Period

1034.84

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):

ecommerce merch costs Nov 24 - Nov 30

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

362.19

Transaction ID : D-366256

Amount Incurred This Period

0.00

Payment This Period

362.19

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):

ecommerce merch December estimate

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

1000.00

Transaction ID : D-366257

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)

1000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Financial Innovations, Inc.

Nature of Debt (Purpose):

estimate - merch costs Jan 2021

Mailing Address 1 Weingeroff Blvd.

City
CranstonState
RIZip Code
02910

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-386692

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

114.97

Transaction ID : D-84206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84220

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)

864.97

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84223

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

114.97

Transaction ID : D-84209

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84224

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)

614.97

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

114.97

Transaction ID : D-84210

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84225

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

114.97

Transaction ID : D-84211

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.97

1) **SUBTOTALS** This Period This Page (optional)

479.94

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84226

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

114.97

Transaction ID : D-84212

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84227

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)

614.97

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

114.97

Transaction ID : D-84213

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84228

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

126.97

Transaction ID : D-84215

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.97

1) **SUBTOTALS** This Period This Page (optional)

491.94

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84229

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

internet and phone for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

126.97

Transaction ID : D-84216

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hawkins, Howie, , ,

Nature of Debt (Purpose):

rent and utilities for candidate's office

Mailing Address 410 West Beard Ave

City
SyracuseState
NYZip Code
13205

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-84230

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)

626.97

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 / 50

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):
Researcher contractor

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-27320

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):
Researcher contractor Q1 2020

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43589

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):
Ballot access / researcher consultant April

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-51015

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

8000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):

Ballot access / researcher consultant May

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

Transaction ID : D-84190

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):

Ballot access outreach / researcher June

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

Transaction ID : D-90158

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):

ballot access work July

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

Transaction ID : D-90217

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)
2) **TOTALS** This Period (last page this line number only)
3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):

ballot access work Aug1-Aug24

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

Transaction ID : D-90249

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):

ballot access work Aug25-Aug31

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

Transaction ID : D-280980

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lester, Gini, , ,

Nature of Debt (Purpose):

Researcher Sept

Mailing Address 1527 Burry Street

City
JolietState
ILZip Code
60435

Outstanding Balance Beginning This Period

Transaction ID : D-314469

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)
2) **TOTALS** This Period (last page this line number only)
3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):

Campaign Manager contractor

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-27316

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):

Campaign Manager contractor Q1 2020

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43584

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):

Campaign Manager April

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-51012

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

8000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):
Campaign Manager May

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-84193

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):
campaign manager June

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90155

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):
campaign manager July

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90216

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

6000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):

Campaign Manager Aug1-Aug24

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

1548.00

Transaction ID : D-90246

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1548.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):

Campaign Manager Aug1-Aug24

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

452.00

Transaction ID : D-280983

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

452.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Merida, Andrea, E., ,

Nature of Debt (Purpose):

Campaign Manager Sept

Mailing Address 1132 N Washington St

City
DenverState
COZip Code
80203

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-314467

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

4000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Phillips, Brendan, , ,

Nature of Debt (Purpose):
ballot access coordinator May

Mailing Address 832 Lakeview

City
Stansbury ParkSState
UTZip Code
84074

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-84194

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Phillips, Brendan, , ,

Nature of Debt (Purpose):
ballot access coordinator June

Mailing Address 832 Lakeview

City
Stansbury ParkSState
UTZip Code
84074

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90159

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Phillips, Brendan, , ,

Nature of Debt (Purpose):
ballot access work July

Mailing Address 832 Lakeview

City
Stansbury ParkSState
UTZip Code
84074

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90220

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

6000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Rodino, Virginia, , ,

Nature of Debt (Purpose):

Press Secretary Sep partial month

Mailing Address 7251 Dockside Lane

City
ColumbiaState
MDZip Code
21045

Outstanding Balance Beginning This Period

Transaction ID : D-314473

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Rodino, Virginia, , ,

Nature of Debt (Purpose):

Press Secretary 1st half Oct

Mailing Address 7251 Dockside Lane

City
ColumbiaState
MDZip Code
21045

Outstanding Balance Beginning This Period

Transaction ID : D-314474

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Rodino, Virginia, , ,

Nature of Debt (Purpose):

Press Secretary 2nd half Oct

Mailing Address 7251 Dockside Lane

City
ColumbiaState
MDZip Code
21045

Outstanding Balance Beginning This Period

Transaction ID : D-361130

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)
2) **TOTALS** This Period (last page this line number only)
3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)
4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

Call Center Manager / Phonebanker Q1 2020

Mailing Address 40 Liberty Street

2b

City

Stamford

State

CT

Zip Code

06902

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43592

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

Call Center Manager / Phonebanker April

Mailing Address 40 Liberty Street

2b

City

Stamford

State

CT

Zip Code

06902

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-51017

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

phonebank manager and phonebanker May

Mailing Address 40 Liberty Street

2b

City

Stamford

State

CT

Zip Code

06902

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-84188

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

7000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

phonebank manager and phonebanker June

Mailing Address 40 Liberty Street

2b

City

Stamford

State

CT

Zip Code

06902

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90157

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

phonebank manager and phonebanking July

Mailing Address 40 Liberty Street

2b

City

Stamford

State

CT

Zip Code

06902

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90221

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

Call Center Manager / Phonebanker Aug1-24

Mailing Address 40 Liberty Street

2b

City

Stamford

State

CT

Zip Code

06902

Outstanding Balance Beginning This Period

1548.00

Transaction ID : D-90250

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1548.00

1) **SUBTOTALS** This Period This Page (optional)

5548.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

Call Center Manager / Phonebanker Aug25-31

Mailing Address 40 Liberty Street
2bCity
StamfordState
CTZip Code
06902

Outstanding Balance Beginning This Period

452.00

Transaction ID : D-280979

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

452.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Santaguida, Cora, , ,

Nature of Debt (Purpose):

call center manager / phonebanker Sept

Mailing Address 40 Liberty Street
2bCity
StamfordState
CTZip Code
06902

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-314470

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):

Scheduling/logistics contractor

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-27317

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional)

5452.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics Q1 2020

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43586

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics April

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-51010

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics May

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-84195

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)

7000.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
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FOR LINE NUMBER:
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☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics June

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90162

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
July logistics and scheduling

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-90213

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics Aug1-24

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

1548.00

Transaction ID : D-90248

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1548.00

1) **SUBTOTALS** This Period This Page (optional)

5548.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
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(check only one)11
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NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics Aug25-31

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

452.00

Transaction ID : D-280981

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

452.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seeman, Rose, , ,

Nature of Debt (Purpose):
scheduler/logistics Sept

Mailing Address 5117 Preston Avenue South

City
GulfportState
FLZip Code
33707

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-314471

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trudeau, Michael, , ,

Nature of Debt (Purpose):
Volunteer Coordinator contractor

Mailing Address 112 Reton Ct

City
CaryState
NCZip Code
27513

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-27319

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional)

5452.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D-P**DEBTS AND OBLIGATIONS (Excluding Loans)**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

Howie Hawkins for Our Future

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trudeau, Michael, , ,

Nature of Debt (Purpose):

Volunteer Coordinator, copy editor, Q1 2020

Mailing Address 112 Reton Ct

City
CaryState
NCZip Code
27513

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-43587

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Trudeau, Michael, , ,

Nature of Debt (Purpose):

copy editing, volunteer coordination

Mailing Address 112 Reton Ct

City
CaryState
NCZip Code
27513

Outstanding Balance Beginning This Period

1000.00

Transaction ID : D-51008

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Violett, Thomas, , ,

Nature of Debt (Purpose):

ballot access, outreach, organizing

Mailing Address 16 N. Main St.

City
FarmingdaleState
NJZip Code
07727

Outstanding Balance Beginning This Period

500.00

Transaction ID : D-90229

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

1) **SUBTOTALS** This Period This Page (optional)

4500.00

2) **TOTALS** This Period (last page this line number only)

138194.90

3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

138194.90