

FEC  
FORM 3

REPORT OF RECEIPTS  
AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Virgin Islands for Plaskett

ADDRESS (number and street)

PO Box 1006



Check if different  
than previously  
reported. (ACC)

Frederiksted

VI

00841

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00528182

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

STATE ▼ DISTRICT

VI

01

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)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

VI

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Eckard, Mark, W., ,

Signature of Treasurer

Eckard, Mark, W., ,

Date

M M /

D D /

Y Y Y Y

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

Office  
Use  
Only

FEC FORM 3  
(Revised 05/2016)

SUMMARY PAGE  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Virgin Islands for Plaskett

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 36362.00                | 683762.37                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 8953.12                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 36362.00                | 674809.25                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 57540.63                | 656650.82                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 3662.63                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 57540.63                | 652988.19                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 67098.91                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 64992.50                |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Virgin Islands for Plaskett

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

I. RECEIPTS

| COLUMN A<br>Total this Period                              | COLUMN B<br>Election Cycle Total as of<br>11 / 05 / 2024<br>(date of general election) | COLUMN C<br>Total for<br>11 / 06 / 2024<br>(date after general election)<br><br>through<br>11 / 25 / 2024<br>(last day of reporting period) |
|------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 11. CONTRIBUTIONS<br>(other than loans) FROM:              |                                                                                        |                                                                                                                                             |
| (a) Individuals/Persons Other than<br>Political Committees |                                                                                        |                                                                                                                                             |
| (i) Itemized (use Schedule A)                              |                                                                                        |                                                                                                                                             |
| 20750.00                                                   | 317268.00                                                                              | 0.00                                                                                                                                        |
| (ii) Unitemized                                            |                                                                                        |                                                                                                                                             |
| 1812.00                                                    | 29272.70                                                                               | 205.00                                                                                                                                      |
| (iii) Total of contributions from individuals              |                                                                                        |                                                                                                                                             |
| 22562.00                                                   | 346540.70                                                                              | 205.00                                                                                                                                      |
| (b) Political Party Committees                             |                                                                                        |                                                                                                                                             |
| 0.00                                                       | 0.00                                                                                   | 0.00                                                                                                                                        |
| (c) Other Political Committees                             |                                                                                        |                                                                                                                                             |
| 13800.00                                                   | 337221.67                                                                              | 0.00                                                                                                                                        |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b>                                         | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| (d) The Candidate                                                                   |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) |                                                                                                                 |                                                                                                                                                    |
| 36362.00                                                                            | 683762.37                                                                                                       | 205.00                                                                                                                                             |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 13. LOANS:                                                                          |                                                                                                                 |                                                                                                                                                    |
| (a) Made or Guaranteed by the Candidate                                             |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (b) All Other Loans                                                                 |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b))                                           |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 3662.63                                                                                                         | 0.00                                                                                                                                               |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)                                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.01                                                                                                            | 0.00                                                                                                                                               |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)                                |                                                                                                                 |                                                                                                                                                    |
| 36362.00                                                                            | 687425.01                                                                                                       | 205.00                                                                                                                                             |

POST-ELECTION DETAILED SUMMARY PAGE  
Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Virgin Islands for Plaskett

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

II. DISBURSEMENTS

| COLUMN A<br>Total this Period                           | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 17. OPERATING EXPENDITURES                              |                                                                                                   |                                                                                                                               |
| 57540.63                                                | 656650.82                                                                                         | 35483.06                                                                                                                      |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES            |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 19. LOAN REPAYMENTS:                                    |                                                                                                   |                                                                                                                               |
| (a) Of Loans Made or Guaranteed by the Candidate        |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (b) Of All Other Loans                                  |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))   |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 20. REFUNDS OF CONTRIBUTIONS TO:                        |                                                                                                   |                                                                                                                               |
| (a) Individuals/Persons Other Than Political Committees |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 6953.12                                                                                           | 0.00                                                                                                                          |
| (b) Political Party Committees                          |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b> | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|

(c) Other Political Committees (such as PACs)

|      |         |      |
|------|---------|------|
| 0.00 | 2000.00 | 0.00 |
|------|---------|------|

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

|      |         |      |
|------|---------|------|
| 0.00 | 8953.12 | 0.00 |
|------|---------|------|

**21. OTHER DISBURSEMENTS**

|        |          |        |
|--------|----------|--------|
| 250.00 | 23316.75 | 250.00 |
|--------|----------|--------|

**22. TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d) and 21)

|          |           |          |
|----------|-----------|----------|
| 57790.63 | 688920.69 | 35733.06 |
|----------|-----------|----------|

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

|          |           |        |
|----------|-----------|--------|
| 36362.00 | 674809.25 | 205.00 |
|----------|-----------|--------|

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

|          |           |          |
|----------|-----------|----------|
| 57540.63 | 652988.19 | 35483.06 |
|----------|-----------|----------|

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

|           |
|-----------|
| 88527.54  |
| 36362.00  |
| 124889.54 |
| 57790.63  |
| 67098.91  |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

Lockwood, Charles, , ,

A.

Mailing Address 1131 King St

City

Christiansted

State

VI

Zip Code

00820-4974

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DNF

Occupation

Attorney

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 29 |   |   | 2024 |   |   |   |

Transaction ID : 10246230

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 03 |   |   | 2024 |   |   |   |

Transaction ID : 10246230E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)

Hendry, Catherine, , ,

Mailing Address PO Box 24006

City

Christiansted

State

VI

Zip Code

00824-0006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VI Port Authority

Occupation

General Counsel

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : 10244211

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)  
International Private Bank LLC

A. Mailing Address 1047 King St

City  
ChristianstedState  
VIZip Code  
00820-4922FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2024

Transaction ID : 10244221

Amount of Each Receipt this Period

3300.00

☐ Memo Item

LLC - Members below if itemized. Permissible funds.

B. Full Name (Last, First, Middle Initial)  
Ash Bank Trust

Mailing Address 1047 King St

City  
ChristianstedState  
VIZip Code  
00820-4922FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 02 2024

Transaction ID : 10307466

Amount of Each Receipt this Period

3300.00

☒ Memo ItemC. Full Name (Last, First, Middle Initial)  
Greenwood, Gordon, , ,

Mailing Address 159 Country Club Dr

City  
HaywardState  
CAZip Code  
94542-7946FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kazan McClain Satterley &amp; Greenwood

Occupation  
Attorney

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 26 2024

Transaction ID : 10207641

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

4300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10237.00

Date of Receipt

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

Transaction ID : 10207641E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Wels, Georgia, , ,

Mailing Address 4895 4Th St

City

Vero Beach

State

FL

Zip Code

32968-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : 10307771

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Davis, James, C., ,

Mailing Address PO Box 468

City

Hanover

State

MD

Zip Code

21076-0468

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Allegis Group

Chairman

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : 10203733

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

4000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

Chase-Goloff, Rosemary, , ,

A.

Mailing Address 305 SW 10Th St

City

Ft Lauderdale

State

FL

Zip Code

33315-1213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Medical Help Family Practice Inc

Occupation

Office Manager

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

365.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 22 |   |   | 2024 |   |   |   |

Transaction ID : 10207624

Amount of Each Receipt this Period

15.00

☐ Memo Item

\* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2024 |   |   |   |

Transaction ID : 10207624E

Amount of Each Receipt this Period

15.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)

Allietta, Michael, J., ,

Mailing Address 25 Robinson Rd

City

Falmouth

State

MA

Zip Code

02540-3840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IPB

Occupation

Finance

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : 10206934

Amount of Each Receipt this Period

2500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

2515.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

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

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : 10206934E

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Chase-Goloff, Rosemary, , ,

Mailing Address 305 SW 10Th St

City

Ft Lauderdale

State

FL

Zip Code

33315-1213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Medical Help Family Practice Inc

Office Manager

Receipt For: 2024

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

Election Cycle-to-Date ▼

365.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2024 |   |   |   |

Transaction ID : 10207664

Amount of Each Receipt this Period

10.00

☐ Memo Item

\* Earmarked Contribution: See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

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

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2024 |   |   |   |

Transaction ID : 10207664E

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

10.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

Hodges, Glinda, , ,

A.

Mailing Address 1300 E Lafayette St

Apt 2302

City

Detroit

State

MI

Zip Code

48207-2924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Financial Consultant

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : 10207625

Amount of Each Receipt this Period

25.00

☐ Memo Item

\* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2024 |   |   |   |

Transaction ID : 10207625E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)

Chase, Jeffrey, , ,

Mailing Address PO Box 8179

City

St Thomas

State

VI

Zip Code

00801-1179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vi Orthopedics

Occupation

Physician

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

750.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : 10207655

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

525.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

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

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 27  |   | 2024    |

Transaction ID : 10207655E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Zakaria, Jehangir, , ,

Mailing Address 6002 Diamond Ruby

Pmb 18

City

St Croix

State

VI

Zip Code

00820-5226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

St. Croix Renaissance Group

Vice President

Receipt For: 2024

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

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

Transaction ID : 10275816

Amount of Each Receipt this Period

2000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Hendricks, Carmine, , ,

Mailing Address PO Box 7643

City

Christiansted

State

VI

Zip Code

00823-7643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

FHC

Physician

Receipt For: 2024

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

Election Cycle-to-Date ▼

2300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 23  |   | 2024    |

Transaction ID : 10207626

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

2100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 2 | 4 |

Transaction ID : 10207626E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Emmett, Richard, J., ,

Mailing Address 1290 S Race St

City

Denver

State

CO

Zip Code

80210-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Francesca's Collections

Chairman Of The Board

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : 10307766

Amount of Each Receipt this Period

500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Nairns, Anthony, R., ,

Mailing Address 6501 Red Hook Plz  
Ste 201

City

St Thomas

State

VI

Zip Code

00802-1311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Entrepreneur

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : 10307767

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

Chewning, Kirk, , ,

A.

Mailing Address 108 Hillside Cir

City

Christiansted

State

VI

Zip Code

00820-3635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cane Bay Partners VI

Occupation

Consultant

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2800.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2024 |   |   |   |

Transaction ID : 10207628

Amount of Each Receipt this Period

2800.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10237.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2024 |   |   |   |

Transaction ID : 10207628E

Amount of Each Receipt this Period

2800.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

Evangelista, Wanda, I., ,

C.

Mailing Address PO Box 1182

City

Kingshill

State

VI

Zip Code

00851-1182

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Government Of VI

Occupation

Lawyer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : 10244209

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

3300.00

|   |     |  |     |  |     |  |     |    |
|---|-----|--|-----|--|-----|--|-----|----|
| ✕ | 11a |  | 11b |  | 11c |  | 11d |    |
|   | 12  |  | 13a |  | 13b |  | 14  | 15 |

FEC Schedule A (Form 3) (Revised 05/2016)

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 51

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

A.

Mailing Address 805 15Th St NW

Ste 430

City

Washington

State

DC

Zip Code

20005-2273

FEC ID number of contributing  
federal political committee.

C C00147173

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 18 2024

Transaction ID : 10121360

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

VERIZON WIRELESS/VERIZON COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1300 I St NW

Ste 400W

City

Washington

State

DC

Zip Code

20005-7101

FEC ID number of contributing  
federal political committee.

C C00363127

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 05 2024

Transaction ID : 10301942

Amount of Each Receipt this Period

2000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

WILLIAMS AND JENSEN, PLLC POLITICAL ACTION COMMITTEE

Mailing Address 1201 Pennsylvania Ave NW

Ste 800

City

Washington

State

DC

Zip Code

20004-2401

FEC ID number of contributing  
federal political committee.

C C00039206

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 22 2024

Transaction ID : 10171092

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 51

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION

A.

Mailing Address 555 New Jersey Ave NW

City

Washington

State

DC

Zip Code

20001-2029

FEC ID number of contributing  
federal political committee.

C C00028860

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : 10203743

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1333 New Hampshire Ave NW  
Ste 700

City

Washington

State

DC

Zip Code

20036-1532

FEC ID number of contributing  
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 05 2024

Transaction ID : 10322066

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

CBOE GLOBAL MARKETS, INC. PAC (CBOE PAC)

Mailing Address 433 W Van Buren St

City

Chicago

State

IL

Zip Code

60607-0433

FEC ID number of contributing  
federal political committee.

C C00100693

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : 10203747

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 51

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

ALPHA KAPPA ALPHA SORORITY PAC, INC. (AKA AKA 1908 PAC)

A.

Mailing Address 5656 S Stony Island Ave

City

Chicago

State

IL

Zip Code

60637-1906

FEC ID number of contributing  
federal political committee.

C C00886036

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 05 |   |   | 2024 |   |   |   |

Transaction ID : 10275818

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF MORTGAGE BROKERS PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW S  
Ste 900

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C C00254201

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 28 |   |   | 2024 |   |   |   |

Transaction ID : 10212499

Amount of Each Receipt this Period

1000.00

☐ 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  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

4300.00

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

13800.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Google GSuite**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain ViewState  
CAZip Code  
94043-1351Purpose of Disbursement  
Website expense

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.53

Transaction ID : 500529210

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Forever Flowers**

Mailing Address Rue De St Barthelemy Charlotte Ama

City  
St ThomasState  
VIZip Code  
00802Purpose of Disbursement  
Flowers

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

140.00

Transaction ID : 500529230

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Nelthropp, Matthew, , ,**

Mailing Address PO Box 305375

City  
St ThomasState  
VIZip Code  
00803-5375Purpose of Disbursement  
Campaign office expense

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

420.00

Transaction ID : 500528630

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

590.53

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Rebirth Investments LLC**

Mailing Address PO Box 7486

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 18  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00801-0486

FEC Identification Number

C

Purpose of Disbursement  
Rent and utilities

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1015.27

Transaction ID : 500528830

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 20  |   | 2024    |

City  
SomervilleState  
MAZip Code  
02144-3132

FEC Identification Number

C

Purpose of Disbursement  
Service Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.00

Transaction ID : 500525240

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Stevens, Daren, , ,**

Mailing Address PO Box 6290

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

City  
ChristianstedState  
VIZip Code  
00823-6290

FEC Identification Number

C

Purpose of Disbursement  
Event entertainment

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

400.00

Transaction ID : 500525340

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1416.27

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Prentis, Hesketh, , ,**

Mailing Address PO Box 4274

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 14  |   | 2024    |

City  
KingshillState  
VIZip Code  
00851-4274

FEC Identification Number

C

Purpose of Disbursement  
Sign placement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1600.00

Transaction ID : 500528640

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Courtyard By Marriott - Wallington CT**

Mailing Address 600 Northrop Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 28  |   | 2024    |

City  
WallingfordState  
CTZip Code  
06492-1946

FEC Identification Number

C

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4.76

Transaction ID : 500529240

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Bank Of America**

Mailing Address PO Box 25118

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 18  |   | 2024    |

City  
TampaState  
FLZip Code  
33622-5118

FEC Identification Number

C

Purpose of Disbursement  
Bank fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.00

Transaction ID : 500529250

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1605.76

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Creative Minds, LLC AKA Da Vybe**

Mailing Address PO Box 307713

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 11 |   |   | 2024 |   |   |   |

City  
St ThomasState  
VIZip Code  
00803-7713

FEC Identification Number

C

Purpose of Disbursement  
Radio advertising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

508.00

Transaction ID : 500528160

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Centerline Car Rentals**

Mailing Address PO Box 1529

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 06 |   |   | 2024 |   |   |   |

City  
KingshillState  
VIZip Code  
00851-1529

FEC Identification Number

C

Purpose of Disbursement  
Car rental

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

301.16

Transaction ID : 500527990

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Buckney-Small, Jonathan, , ,**

Mailing Address PO Box 26502

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

City  
ChristianstedState  
VIZip Code  
00824-2502

FEC Identification Number

C

Purpose of Disbursement  
Campaign expenses (see below if itemized)

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

425.96

Transaction ID : 500528001

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1235.12

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Home Depot**

Mailing Address 1105 Barren Spot

Date of Disbursement

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

City  
KingshillState  
VIZip Code  
00850-9612

FEC Identification Number

C

Purpose of Disbursement  
Equipment purchase

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

138.00

Transaction ID : 500528000

☒ Memo Item \*

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Home Depot**

Mailing Address 1105 Barren Spot

Date of Disbursement

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

City  
KingshillState  
VIZip Code  
00850-9612

FEC Identification Number

C

Purpose of Disbursement  
Equipment purchase

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

138.00

Transaction ID : 500527997

☒ Memo Item \*

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Home Depot**

Mailing Address 1105 Barren Spot

Date of Disbursement

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

City  
KingshillState  
VIZip Code  
00850-9612

FEC Identification Number

C

Purpose of Disbursement  
Equipment purchase

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

149.96

Transaction ID : 500527999

☒ Memo Item \*

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

0.00

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



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Cape Air**

Mailing Address 660 Barnstable Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
HyannisState  
MAZip Code  
02601-1927

FEC Identification Number

C

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

239.00

Transaction ID : 500528832

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 1725 3Rd St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 29  |   | 2024    |

City  
San FranciscoState  
CAZip Code  
94158-2203

FEC Identification Number

C

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.67

Transaction ID : 500529242

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Comissiong, Lesley, , ,**

Mailing Address PO Box 6174

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00804-6174

FEC Identification Number

C

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : 500523592

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1754.67

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Rossie's Bar And Restaurant**

Mailing Address 8 &amp; 15 Orange Grv

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 23  |   | 2024    |

City  
ChristianstedState  
VIZip Code  
00820

FEC Identification Number

C

Purpose of Disbursement  
Meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

32.00

Transaction ID : 500529233

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Comissiong, Lesley, , ,**

Mailing Address PO Box 6174

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 18  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00804-6174

FEC Identification Number

C

Purpose of Disbursement  
Travel expenses (see below)

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

370.45

Transaction ID : 500528833

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. King Christian Hotel**

Mailing Address 1102 Kings Wharf

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
ChristianstedState  
VIZip Code  
00820

FEC Identification Number

C

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

241.45

Transaction ID : 500528831

☒ Memo Item \*

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

402.45

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 1725 3Rd St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 29  |   | 2024    |

City  
San FranciscoState  
CAZip Code  
94158-2203

FEC Identification Number

C

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.01

Transaction ID : 500529243

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Rebirth Investments LLC**

Mailing Address PO Box 7486

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 28  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00801-0486

FEC Identification Number

C

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : 500527473

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Comissiong, Lesley, , ,**

Mailing Address PO Box 6174

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 29  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00804-6174

FEC Identification Number

C

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : 500527493

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

3015.01

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. CrucianPoint LLC**

Mailing Address 17 STRAND St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2024    |

City  
FrederikstedState  
VIZip Code  
00840

FEC Identification Number

C

Purpose of Disbursement  
Website design

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2250.00

Transaction ID : 500523604

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Rock Vision LLC**

Mailing Address PO Box 10911

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00801-3911

FEC Identification Number

C

Purpose of Disbursement  
Digital advertising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1100.00

Transaction ID : 500525324

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. The Market STX**

Mailing Address 14 Plessen

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 25  |   | 2024    |

City  
FrederikstedState  
VIZip Code  
00840-4621

FEC Identification Number

C

Purpose of Disbursement  
Event supplies

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

147.62

Transaction ID : 500529234

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

3497.62

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 1725 3Rd St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 29  |   | 2024    |

City  
San FranciscoState  
CAZip Code  
94158-2203

FEC Identification Number

C

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.63

Transaction ID : 500529244

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
SomervilleState  
MAZip Code  
02144-3132

FEC Identification Number

C

Purpose of Disbursement  
Service Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.99

Transaction ID : 500528154

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 27  |   | 2024    |

City  
SomervilleState  
MAZip Code  
02144-3132

FEC Identification Number

C

Purpose of Disbursement  
Service Fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

322.89

Transaction ID : 500527474

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

343.51

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Comissiong, Lesley, , ,**

Mailing Address PO Box 6174

City  
St ThomasState  
VIZip Code  
00804-6174Purpose of Disbursement  
Election Day expenses (see below if itemized)

Candidate Name

Office Sought: 

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

Disbursement For: 2024  

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

838.44

Transaction ID : 500529094

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cost-U-Less**

Mailing Address 4300 Sion Farm

City  
ChristianstedState  
VIZip Code  
00820-5186Purpose of Disbursement  
Election day food/supplies

Candidate Name

Office Sought: 

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

Disbursement For: 2024  

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

554.75

Transaction ID : 500529095

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Jones, John, , ,**

Mailing Address 118 N Carolina Ave SE

City  
WashingtonState  
DCZip Code  
20003-1805Purpose of Disbursement  
Facility fee

Candidate Name

Office Sought: 

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

Disbursement For: 2024  

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : 500527994

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1088.44

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Bank Of America**

Mailing Address PO Box 25118

City  
TampaState  
FLZip Code  
33622-5118Purpose of Disbursement  
Bank fee

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : 500527494

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cape Air**

Mailing Address 660 Barnstable Rd

City  
HyannisState  
MAZip Code  
02601-1927Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

119.00

Transaction ID : 500529205

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cost-U-Less**

Mailing Address 4300 Sion Farm

City  
ChristianstedState  
VIZip Code  
00820-5186Purpose of Disbursement  
Election day food/supplies

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

338.92

Transaction ID : 500529215

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

458.92

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Reef Broadcasting, Inc.**Mailing Address 6079 Castle Coakley  
# ACity  
St CroixState  
VIZip Code  
00820-5202Purpose of Disbursement  
Radio advertising

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : 500525325

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address PO Box 619616

City  
DallasState  
TXZip Code  
75261-9616Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

294.47

Transaction ID : 500529225

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arians**

Mailing Address 8214 Subbase

City  
St ThomasState  
VIZip Code  
00802-5803Purpose of Disbursement  
Food for volunteers

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1014.00

Transaction ID : 500528635

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1508.47

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. House Gift Shop**

Mailing Address LONGWORTH BUILDING

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 21  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20515-0001

FEC Identification Number

C

Purpose of Disbursement  
Gifts for supporters

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

641.40

Transaction ID : 500530355

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Hodge-Donovan, Molefi, , ,**

Mailing Address PO Box 306391

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 07  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00803-6391

FEC Identification Number

C

Purpose of Disbursement  
Election Day GOTV Services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500528175

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CrucianPoint LLC**

Mailing Address 17 STRAND St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 01  |   | 2024    |

City  
FrederikstedState  
VIZip Code  
00840

FEC Identification Number

C

Purpose of Disbursement  
Website services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

120.00

Transaction ID : 500527995

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

2761.40

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Rock Vision LLC**

Mailing Address PO Box 10911

City  
St ThomasState  
VIZip Code  
00801-3911Purpose of Disbursement  
Digital advertising

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : 500527495

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cape Air**

Mailing Address 660 Barnstable Rd

City  
HyannisState  
MAZip Code  
02601-1927Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

239.00

Transaction ID : 500529206

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Grim Strategies**

Mailing Address PO Box 15485

City  
WashingtonState  
DCZip Code  
20003-0485Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : 500527616

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4639.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Color Max**

Mailing Address 4001 Raphune Hill Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 01  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00802-2905

FEC Identification Number

C

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

717.00

Transaction ID : 500528636

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 1725 3Rd St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 30  |   | 2024    |

City  
San FranciscoState  
CAZip Code  
94158-2203

FEC Identification Number

C

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.90

Transaction ID : 500529246

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Radio 95 Inc WJKC**

Mailing Address PO Box 25680

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 08  |   | 2024    |

City  
ChristianstedState  
VIZip Code  
00824-1680

FEC Identification Number

C

Purpose of Disbursement  
Radio advertising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2720.00

Transaction ID : 500528156

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

3451.90

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Donovan, Jelani, N., ,**

Mailing Address PO Box 306391

City  
St ThomasState  
VIZip Code  
00803-6391Purpose of Disbursement  
Election Day GOTV Services

Candidate Name

Office Sought: 

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

Disbursement For: 2024  

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

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : 500528176

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Prime Storage**

Mailing Address 41 A BARREN SPOT

City  
ChristianstedState  
VIZip Code  
00820Purpose of Disbursement  
Storage rent

Candidate Name

Office Sought: 

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

Disbursement For: 2024  

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

351.00

Transaction ID : 500529207

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Duane Morris LLP**

Mailing Address PO Box 787166

City  
PhiladelphiaState  
PAZip Code  
19178-7166Purpose of Disbursement  
Legal services

Candidate Name

Office Sought: 

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

Disbursement For: 2024  

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

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15000.00

Transaction ID : 500528107

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

17351.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 51

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

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Cruz Bay Landing**

Mailing Address 6 D Cruz Bay Town

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 07  |   | 2024    |

City  
St JohnState  
VIZip Code  
00831Purpose of Disbursement  
Meal

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

299.67

Transaction ID : 500529217

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Color Max**

Mailing Address 4001 Raphune Hill Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00802-2905Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

289.00

Transaction ID : 500528637

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 1725 3Rd St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 30  |   | 2024    |

City  
San FranciscoState  
CAZip Code  
94158-2203Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

45.08

Transaction ID : 500529247

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

633.75

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Radio 95 Inc WJKC**

Mailing Address PO Box 25680

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 08  |   | 2024    |

City  
ChristianstedState  
VIZip Code  
00824-1680

FEC Identification Number

C

Purpose of Disbursement  
Radio advertising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : 500528157

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Winpisinger & Associates, Inc.**

Mailing Address 315 Inspiration Ln

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
GaithersburgState  
MDZip Code  
20878-5808

FEC Identification Number

C

Purpose of Disbursement  
Compliance consulting

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1524.74

Transaction ID : 500528067

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Alston, Jonathan, , ,**

Mailing Address 9715 Estate Thomas

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 31  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00802-2623

FEC Identification Number

C

Purpose of Disbursement  
Event equipment rental

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

225.00

Transaction ID : 500527628

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

4749.74

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Cutlass & Cane**Mailing Address YACHCT Hvn  
Grande 5332City  
St ThomasState  
VIZip Code  
00802Purpose of Disbursement  
Campaign appreciation dinner

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

859.20

Transaction ID : 500528628

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Avis Rent-A-Car**

Mailing Address 2600 Richmond Hwy

City  
ArlingtonState  
VAZip Code  
22202-4001Purpose of Disbursement  
Car rental

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

283.63

Transaction ID : 500529238

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Radio 95 Inc WJKC**

Mailing Address PO Box 25680

City  
ChristianstedState  
VIZip Code  
00824-1680Purpose of Disbursement  
Radio advertising

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : 500528158

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2142.83

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Cape Air**

Mailing Address 660 Barnstable Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
HyannisState  
MAZip Code  
02601-1927

FEC Identification Number

C

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

239.00

Transaction ID : 500529209

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Forever Flowers**

Mailing Address Rue De St Barthelemy Charlotte Ama

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00802

FEC Identification Number

C

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

140.00

Transaction ID : 500529219

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Asado Crucial Latin Grill**

Mailing Address 19 Castle Coakley Ste A

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

City  
St ThomasState  
VIZip Code  
00802

FEC Identification Number

C

Purpose of Disbursement  
Meal

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

170.40

Transaction ID : 500529229

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

549.40

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. WSTA Radio**

Mailing Address PO Box 6166

Date of Disbursement

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

City  
St ThomasState  
VIZip Code  
00804-6166

FEC Identification Number

C

Purpose of Disbursement  
Radio advertising

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1098.00

Transaction ID : 500528629

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Courtyard By Marriott - Wallington CT**

Mailing Address 600 Northrop Rd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

City  
WallingfordState  
CTZip Code  
06492-1946

FEC Identification Number

C

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

320.85

Transaction ID : 500529239

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Bank Of America**

Mailing Address PO Box 25118

Date of Disbursement

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

City  
TampaState  
FLZip Code  
33622-5118

FEC Identification Number

C

Purpose of Disbursement  
Bank fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.00

Transaction ID : 500529249

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1419.85

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <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  |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Service Fee

Candidate Name

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

71.54

Transaction ID : 500527889

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

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

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

71.54

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

55345.23

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 51

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <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 checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

Full Name (Last, First, Middle Initial)

**A. Virgin Islands Public Broadcasting System**

Mailing Address PO Box 7879

Date of Disbursement

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

City  
St ThomasState  
VIZip Code  
00801-0879

FEC Identification Number

C

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : 500529202

☐ Memo Item

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.**

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

250.00

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

250.00

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

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

PAGE 45 OF 51

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Comissioning, Lesley, , ,

Nature of Debt (Purpose):

Election Day expenses

Mailing Address PO Box 6174

City

St Thomas

State

VI

Zip Code

00804-6174

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001390

Amount Incurred This Period

838.44

Payment This Period

838.44

Outstanding Balance at Close of This Period

0.00

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

Nimble U Advertising Truck

Nature of Debt (Purpose):

Advertising

Mailing Address PO Box 5636

City

Christiansted

State

VI

Zip Code

00823-5636

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001391

Amount Incurred This Period

1424.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

1424.90

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

Newgrange Consulting Group

Nature of Debt (Purpose):

Swearing In Reception

Mailing Address 43 Charles St

City

Boston

State

MA

Zip Code

02114-4640

Outstanding Balance Beginning This Period

6500.00

Transaction ID : 1250000522

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6500.00

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

7924.90

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

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

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 46 OF 51

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Duane Morris LLP

Nature of Debt (Purpose):

Legal services

Mailing Address PO Box 787166

City

Philadelphia

State

PA

Zip Code

19178-7166

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001382

Amount Incurred This Period

46769.50

Payment This Period

15000.00

Outstanding Balance at Close of This Period

31769.50

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

Actions Pack Arena

Nature of Debt (Purpose):

Tent rental

Mailing Address PO Box 7060

City

Christiansted

State

VI

Zip Code

00823-7060

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001392

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

CHRISTIANSTED RESTORATION CORP

Nature of Debt (Purpose):

Rent

Mailing Address 5001 Tamarind Reef  
Ste 28

City

Christiansted

State

VI

Zip Code

00820-4582

Outstanding Balance Beginning This Period

840.00

Transaction ID : 1250000523

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

840.00

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

32909.50

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 47 OF 51

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Donovan, Jelani, N., ,

Nature of Debt (Purpose):

Election Day GOTV Services

Mailing Address PO Box 306391

City

St Thomas

State

VI

Zip Code

00803-6391

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001383

Amount Incurred This Period

2000.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

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

Williams, Vladimir, , ,

Nature of Debt (Purpose):

DJ Services

Mailing Address PO Box 168

City

Kingshill

State

VI

Zip Code

00851-0168

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001393

Amount Incurred This Period

3350.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3350.00

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

Axis Promotions

Nature of Debt (Purpose):

Campaign Materials

Mailing Address 8 W 38Th St

City

New York

State

NY

Zip Code

10018-6229

Outstanding Balance Beginning This Period

17393.10

Transaction ID : 1250000524

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17393.10

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

20743.10

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

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

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

PAGE 48 OF 51

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Hodge-Donovan, Molefi, , ,

Nature of Debt (Purpose):

Election Day GOTV Services

Mailing Address PO Box 306391

City

St Thomas

State

VI

Zip Code

00803-6391

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001384

Amount Incurred This Period

2000.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

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

Edwards, Emmrie, , ,

Nature of Debt (Purpose):

DJ Services

Mailing Address 10528 Est La Reine

City

Kingshill

State

VI

Zip Code

00850-9644

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001394

Amount Incurred This Period

1000.00

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

Southland Gaming Of The VI

Nature of Debt (Purpose):

Advertising

Mailing Address 1003 Estate Ross  
Ste 8

City

St Thomas

State

VI

Zip Code

00802-6725

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001385

Amount Incurred This Period

350.00

Payment This Period

350.00

Outstanding Balance at Close of This Period

0.00

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 (last page only) .....

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

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

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

PAGE 49 OF 51

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Stevens, Darren, , ,

Nature of Debt (Purpose):

DJ Services

Mailing Address PO Box 6290

City

Christiansted

State

VI

Zip Code

00823-6290

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001395

Amount Incurred This Period

400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

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

National Democratic Club

Nature of Debt (Purpose):

Dues/Meals

Mailing Address 30 Ivy St SE

City

Washington

State

DC

Zip Code

20003-4006

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001386

Amount Incurred This Period

180.65

Payment This Period

180.65

Outstanding Balance at Close of This Period

0.00

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

Class A Rentals

Nature of Debt (Purpose):

Furniture rental

Mailing Address PO Box 6255

City

St Thomas

State

VI

Zip Code

00804-6255

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001396

Amount Incurred This Period

340.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

340.00

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

740.00

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

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

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 50 OF 51

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Prentis, Hesketh, , ,

Nature of Debt (Purpose):

Sign placement

Mailing Address PO Box 4274

City

Kingshill

State

VI

Zip Code

00851-4274

Outstanding Balance Beginning This Period

1600.00

Transaction ID : 1250001387

Amount Incurred This Period

0.00

Payment This Period

1600.00

Outstanding Balance at Close of This Period

0.00

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

Stevens, Daren, , ,

Nature of Debt (Purpose):

Event entertainment

Mailing Address PO Box 6290

City

Christiansted

State

VI

Zip Code

00823-6290

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001397

Amount Incurred This Period

400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

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

Rebirth Investments LLC

Nature of Debt (Purpose):

Rent and utilities

Mailing Address PO Box 7486

City

St Thomas

State

VI

Zip Code

00801-0486

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001388

Amount Incurred This Period

1015.27

Payment This Period

1015.27

Outstanding Balance at Close of This Period

0.00

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

400.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 51 OF 51

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Virgin Islands for Plaskett

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

Edwards, Emmrie, , ,

Nature of Debt (Purpose):

Event services

Mailing Address 10528 Est La Reine

City

Kingshill

State

VI

Zip Code

00850-9644

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001398

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

Comissiong, Lesley, , ,

Nature of Debt (Purpose):

Travel expenses

Mailing Address PO Box 6174

City

St Thomas

State

VI

Zip Code

00804-6174

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001389

Amount Incurred This Period

370.45

Payment This Period

370.45

Outstanding Balance at Close of This Period

0.00

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

All Star Moko Jumbies Inc.

Nature of Debt (Purpose):

Event entertainment

Mailing Address PO Box 31

City

Kingshill

State

VI

Zip Code

00851-0031

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250001399

Amount Incurred This Period

275.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

275.00

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

1275.00

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

64992.50

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

0.00

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

64992.50