

No Schedule A results to display.

| Schedule B: In-Kind Contributions Over \$100 Full Name of Contributor Mailing Address of Contributor | Donor Information 1. Employer or Business (If Corporate/Company Donor: N/A) 2. Type of Business(If Corporate Donor Type of Business) 3. Business Location 4. Service/Goods Received 5. Basis used to Determine Value | Date Received | Contribution This Period | Aggregate To Date |
|----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------|----------------------|
| Democratic National Committee 430 S Capitol St SE Washington, DC 20003-4095 | 1. 2. 3. 4. Inkind Staff 5. ActualCost | 11/14/2017 | \$238,274.65 | \$288,654.65 |
| Total This Period | | | | |

No Schedule E-1 results to display.