

Schedule A: Direct Contributions Over \$100	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	Date Received	Contribution This Period	Aggregate To Date
Full Name of Contributor Mailing Address of Contributor				
Burress, Jonathan W 531 Sand Bar Rd Bristol, TN 37620	1.Ballad Health 2.Cardiolgogist 3.Bristol, TN	04/11/2019	\$500.00	\$0.00

No Schedule B results to display.

No Schedule E-1 results to display.