

Schedule A: Direct 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	Date Received	Contribution This Period	Aggregate To Date
Growald, Eileen PO Box 459 Shelburne, VT 05482-0459	1.None 2.Philanthropist 3.Shelburne VT	08/27/2019	\$10,000.00	\$10,000.00

No Schedule B results to display.

No Schedule E-1 results to display.