

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
Care in Action 45 Broadway Ste 320 New York, NY 10006-4019	1. 2. Social Welfare Organization 3. New York NY 4. Staff Services 5. ActualCost	10/29/2021	\$1,719.42	\$7,290.66
Total This Period				

No Schedule E-1 results to display.