| 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 |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------|----------------------|
| KAISER, MIRANDA 315 EAST 18TH STREET NEW YORK, NY 10003 | 1.NOT EMPLOYED 2.NOT EMPLOYED 3.NEW YORK, NY | 10/09/2023 | \$1,100.00 | \$1,100.00 |

No Schedule B results to display.

| No Schedule E-1 results to display. | |
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