

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. Domestic Workers Rights 3. New York NY 4. Travel 5. FairMarketValue	11/02/2023	\$43.12	\$26,868.35
Total This Period				

No Schedule E-1 results to display.