

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				
O&#39;Meara, Katie 2705 N Yucatan St Arlington, VA 22213-1724	1.The Center for Cognitive Therapy & Assessment 2.Psychologist 3.Arlington VA	06/13/2025	\$20,000.00	\$20,061.11

No Schedule B results to display.

No Schedule E-1 results to display.