

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
DEVELOPMENT, ND CH 409 WASHINGTON AVE #900 TOWSON, MD 21204.0	1.ND CH DEVELOPMENT 2.GENERAL MANGER 3.TOWSON, MD	10/16/2025	\$5,000.00	\$5,000.00

No Schedule B results to display.

No Schedule E-1 results to display.