

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor

Johnette Jarvis

Mailing Address of Donor

9207 County Rd. E

City

Stinnett

State

TX

Zip

79083

Date of Receipt

J	M	D	Y	M	D
1	0	0	4	2	0

Amount

2 5 0 0 0

B. Full Name of Donor

Jon Jarvis

Mailing Address of Donor

9207 County Rd. E

City

Stinnett

State

TX

Zip

79083

Date of Receipt

J	M	D	Y	M	D
1	0	0	4	2	0

Amount

5 0 0 0 0

C. Full Name of Donor

Christopher Johnson

Mailing Address of Donor

834 5th Avenue

City

New York

State

NY

Zip

10021

Date of Receipt

J	M	D	Y	M	D
1	0	0	4	2	0

Amount

1 0 0 0 0 0

D. Full Name of Donor

Raymond Johnson

Mailing Address of Donor

340 Marcia Dr.

City

Luling

State

LA

Zip

70070

Date of Receipt

J	M	D	Y	M	D
1	0	0	4	2	0

Amount

1 0 0 0 0 0

E. Full Name of Donor

Thomas H Johnson

Mailing Address of Donor

PO Box 421549

City

Atlanta

State

GA

Zip

30342

Date of Receipt

J	M	D	Y	M	D
1	0	0	4	2	0

Amount

5 0 0 0 0

SUBTOTAL of Donations This Page (optional) ▶

3 2 5 0 0 0

TOTAL This Period (last page this line number only) ▶

1 1 3 7 5 0 0 0

(carry total from last page to Line 9)