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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
1.Anderson & Maanavi 2.Women's Health NP 3.Fairfax, VA	02/04/2020	\$100.00	\$195.00
1.Anderson & Maanavi 2.Women's Health NP 3.Fairfax, VA	02/04/2020	\$50.00	\$245.00
1.Anderson & Maanavi 2.Women's Health NP 3.Fairfax, VA	03/10/2020	\$100.00	\$345.00
1.VAMC Salem 2.Adult NP 3.Salem, VA	03/10/2020	\$100.00	\$140.00
1.Sentana Careplex Hospital (?) 2.NP Hospitalist 3.Yorktown, VA	03/10/2020	\$75.00	\$160.00
1.SH Family Medicine 2.NP 3.South Hill, VA	03/10/2020	\$100.00	\$105.00
1.Easter Associates, Inc. 2.Owner/Executive Director 3.Charlottesville, VA	03/31/2020	\$250.00	\$250.00
1.Eastern Shore Rural Health System 2.NP 3.Onanock, VA	03/10/2020	\$100.00	\$105.00
1.Drexel U 2.NP 3.PHILADELPHIA, PA	03/10/2020	\$60.00	\$110.00
1.Greene Family Medicine 2.FNP 3.Crozet, VA	03/10/2020	\$200.00	\$200.00
1. 2.Association of Nurse Practitioners 3.Richmond, VA	02/20/2020	\$1,000.00	\$1,000.00
1.Capitol Travel Medicine 2.FNP 3.Arlington, VA	02/04/2020	\$200.00	\$200.00
	Employer of Business (If Corporate/Company Donor: N/A)     Type of Business(If Corporate Donor Type of Business)     Business Location      I.Anderson & Maanavi     Women's Health NP     J.Fairfax, VA      I.Sentana Careplex Hospital (?)     S.NP Hospitalist     J.Yorktown, VA      I.Sentana Careplex Hospital (?)     S.NP Hospitalist     J.Yorktown, VA      I.Sentana Careplex Hospital (?)     S.NP Hospitalist     J.Yorktown, VA      I.Sentana Careplex Hospital (?)     S.NP     J.South Hill, VA      I.Easter Associates, Inc.     S.Owner/Executive Director     J.Charlottesville, VA      I.Eastern Shore Rural Health System     S.NP     J.Onanock, VA      I.Drexel U     S.NP     J.Crozet, VA      I.Capitol Travel Medicine     J.FNP     J.Capitol Travel Medicine     J.FNP	1. Employer or Businessi (If Corporate/Company Donor: N/A)       Date         2. Type of Businessi (IC Corporate Donor Type of Businessi)       Date         3. Business Location       02/04/2020         1. Anderson & Maanavi       02/04/2020         3. Fairfax, VA       02/04/2020         1. Anderson & Maanavi       02/04/2020         3. Fairfax, VA       02/04/2020         1. Anderson & Maanavi       02/04/2020         3. Fairfax, VA       03/10/2020         1. Anderson & Maanavi       03/10/2020         3. Fairfax, VA       03/10/2020         1. Anderson & Maanavi       03/10/2020         3. Fairfax, VA       03/10/2020         1. Anderson & Maanavi       03/10/2020         3. Fairfax, VA       03/10/2020         1. Sentana Careplex Hospital (?)       03/10/2020         1. Sentana Careplex Hospital (?)       03/10/2020         1. Sentana Careplex Hospital (?)       03/10/2020         1. Faster Associates, Inc.       03/10/2020         3. Commotic Executive Director       03/10/2020         1. Eastern Shore Rural Health System       03/10/2020         1. Drexel U       03/10/2020         3. Corpat, VA       03/10/2020         1. Greene Family Medicine       03/10/2020 <td>1. Employer or Business (ff Corporate/Company Donor: N/A) 2. Type of Business(ff Corporate Donor Type of Business)Date ReceivedContribution This Period1. Anderson &amp; Maanavi 2. Women's Health NP 3. Fairfax, VA02/04/2020\$100.001. Anderson &amp; Maanavi 2. Women's Health NP 3. Fairfax, VA02/04/2020\$50.001. Anderson &amp; Maanavi 2. Women's Health NP 3. Fairfax, VA03/10/2020\$100.001. Anderson &amp; Maanavi 2. Women's Health NP 3. Fairfax, VA03/10/2020\$100.001. Anderson &amp; Maanavi 2. Women's Health NP 3. Fairfax, VA03/10/2020\$100.001. VAMC Salem 2. Adult NP 3. Salem, VA03/10/2020\$100.001. Sentana Careplex Hospital (?) 2. NP Hospitalist 3. South Hill, VA03/10/2020\$100.001. Easter Associates, Inc. 2. Owner/Executive Director 3. Conarthoutise, VA03/10/2020\$100.001. Easter Shore Rural Health System 2. NP 3. Onanock, VA03/10/2020\$100.001. Drexel U 2. NP 3. Concet, VA03/10/2020\$100.001. Greene Family Medicine 2. FNP 3. Crozet, VA03/10/2020\$200.001. Capitol Travel Medicine 2. FNP02/20/2020\$1,000.00</td>	1. Employer or Business (ff Corporate/Company Donor: N/A) 2. Type of Business(ff Corporate Donor Type of Business)Date ReceivedContribution This Period1. Anderson & Maanavi 2. Women's Health NP 3. Fairfax, VA02/04/2020\$100.001. Anderson & Maanavi 2. Women's Health NP 3. Fairfax, VA02/04/2020\$50.001. Anderson & Maanavi 2. Women's Health NP 3. Fairfax, VA03/10/2020\$100.001. Anderson & Maanavi 2. Women's Health NP 3. Fairfax, VA03/10/2020\$100.001. Anderson & Maanavi 2. Women's Health NP 3. Fairfax, VA03/10/2020\$100.001. VAMC Salem 2. Adult NP 3. Salem, VA03/10/2020\$100.001. Sentana Careplex Hospital (?) 2. NP Hospitalist 3. South Hill, VA03/10/2020\$100.001. Easter Associates, Inc. 2. Owner/Executive Director 3. Conarthoutise, VA03/10/2020\$100.001. Easter Shore Rural Health System 2. NP 3. Onanock, VA03/10/2020\$100.001. Drexel U 2. NP 3. Concet, VA03/10/2020\$100.001. Greene Family Medicine 2. FNP 3. Crozet, VA03/10/2020\$200.001. Capitol Travel Medicine 2. FNP02/20/2020\$1,000.00

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
Willis, Helen 10321 Christina Road Chesterfield, VA 23832	1.CTSA 2.ACNP 3.Richmond, VA	02/20/2020	\$100.00	\$150.00
Total This Period			\$2,435.00	

No Schedule B results to display.

No Schedule C results to display.

PAC (PAC-12-00370)			-	
Schedule D: Expenditures Person or Company Paid and Address	Item or Service	Name of Person Authorizing Expenditure	Date of Expenditure	Amount Paid
BB&T 1652 State Farm Blvd Charlottesville, VA 22911	Bank Service Charges	John Lyons	01/31/2020	\$4.00
BB&T 1652 State Farm Blvd Charlottesville, VA 22911	Bank Service Charges	John Lyons	02/29/2020	\$4.00
BB&T 1652 State Farm Blvd Charlottesville, VA 22911	Bank Service Charges	John Lyons	03/31/2020	\$11.50
Total This Period				\$19.50

No Schedule E-1 results to display.	

No Schedule E-2 results to display.	

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Schedule F: Debts remaining Unpaid as of this Report Name and Address of Creditor	Pupose of Obligation	Date Debt Incurred	Amount Remaining Unpaid
Easter Associates, Inc. 250 West Main Street Suite 100 Charlottesville, VA 22902	PAC Administration Fees	03/31/2020	\$500.00
Total This Period			\$500.00

Schedule G: Statement of Funds	Number of Contributions	Amount	
Contributions Received This Period			
1. Schedule A [Over \$100]	13	\$2,435.00	
2. Schedule B [Over \$100]	0	\$0.00	
3. Un-itemized Cash Contributions [\$100 or less]	117	\$3,415.47	
4. Un-itemized In-Kind Contributions [\$100 or less]	0	\$0.00	
5. Total	130		\$5,850.47
Bank Interest, Refunded Expenditures and Rebates			
6. Schedule C [also enter on Line 17b on Schedule H]			\$0.00
Expenditures Made This Period			
7. Schedule B [From line 2 Above]		\$0.00	
8. Un-itemized In-Kind contributions [From line 4 Above]		\$0.00	
9. Schedule D [Expenditures]		\$19.50	
10. Total [add lines 7, 8 and 9]			\$19.50
Reconciliation of Loan Account			
11. Beginning loan balance [from line 15 of last report]		\$0.00	
12. Loans received this period [from Schedule E-Part 1]		\$0.00	
13. Subtotal			\$0.00
14. Subtract: Loans repaid this period [from Schedule E-Part2]		\$0.00	
15. Ending loan balance			\$0.00

Schedule H: Summary of Receipts and Disbursements			
16. Beginning Balance [Line 19 of last Report]		\$5,167.04	
17. Receipts for Current Reporting Period:			
a. Contributions received this period [Line 5 of Schedule G]	\$5,850.47		
<ul> <li>b. Bank interest, refunded expenditures and rebates</li> <li>[Line 6 of Schedule G]</li> </ul>	\$0.00		
c. Loans received this period [Line 12 of Schedule G]	\$0.00		
d. Subtotal: Contributions and Receipts received this period		\$5,850.47	
e. Total Expendable Funds [Add Linds 16 and 17d]			\$11,017.51
18. Disbursements for Current Reporting Period			
a. Expenditures made this reporting period [Line 10 of Schedule G]	\$19.50		
b. Loans repaid this reporting period [Line 14 of Schedule G]		\$0.00	
c. Other surplus funds paid out [from Schedule I]		\$0.00	
d. Total Payments Made [Add lines 18a,18b, and 18c]			\$19.50
19. Ending Balance [Subtract Line 18b from Line 17e]			\$10,998.01
20. Total Unpaid Debts [from Schedule F of this report]	\$500.00		
Committee's Receipts and Disbursements - Election Cycle			
21. Balance at Start of Election Cycle		\$5,167.04	
22. Previous Receipts [Line 24 from last report]	\$0.00		
23. Receipts from Current Reporting Previous [Line 17d above]	\$5,850.47		
24. Total Receipts this Election Cycle [Add lines 22 and 23]		\$5,850.47	
25. Total Funds Available [Add lines 21 and 24]			\$11,017.51
26. Previous Disbursements [Line 28 from last report]	\$0.00		
27. Disbursements from Current Reporting Period [Line 18d above]	\$19.50		
28. Total Disbursements this Election Cycle			\$19.50
29. Ending Balance			\$10,998.01