## Sickles For Delegate (CC-12-01059)

Reporting Period: 01/05/2021 Through: 01/05/2021 Page: 1 of 3

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
CVS/Caremark PO Box 287 Lincoln, RI 02865-0393	1. 2.Pharmaceutical 3.Scottsdale AZ	01/05/2021	\$1,500.00	\$1,500.00

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No Schedule B results to display.			

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No Schedule E-1 results to display.			