Reporting Period: 01/01/2021 Through: 03/31/2021 Page: 1 of 11

Schedule A: Direct Contributions Over \$100 1. Employer or Business (If Corporate/Company Donor: N/A) 2. Type of Business(If Corporate Donor Type of Business) Date Contribution Aggregate 3. Business Location Full Name of Contributor Received This Period To Date Mailing Address of Contributor Abingdon Health & Denter Rehab Center 4423 Pheasant Ridge Rd 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Suite 200 3.Roanoke VA Roanoke, VA 24014 Blue Ridge Nursing Center PO Box 459 2. Nursing Facility \$1,000.00 01/15/2021 \$1,000.00 Stuart, VA 24171 3.Stuart Va Brookside Rehabilitation & Dursing \$1,000.00 01/22/2021 \$1,000.00 614 Hastings Lane 2. Nursing Facility Warrenton, VA 20186 3.Warrenton, VA Canterbury Rehab & Dept Healthcare 1776 Cambridge Drive \$1,000.00 2. Nursing Facility 01/08/2021 \$1,000.00 Richmond, VA 23238 3.Richmond, VA Carriage Hill Health & Denter Rehab Center 6106 Health Center Lane 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Fredricksburg, VA 22407 3.Fredricksburg, Va Chase City Health & Denter Rehab Center 5539 Hwy 47 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Chase City, VA 23924 3.Chase City, VA Dinwiddie Health & Dinwiddie Hea 46 Diamond Drive 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Petersburg, VA 23803 3.Petersburg, VA Dulles Health & amp: Rehab 2978 Centerville Road 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Herndon, VA 20171 3.Herndon VA Gainesville health & Denter Rehab Center 7501 Heritage Village Plaza 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Gainesille, VA 20155 3. Gainesville, VA Hare, James Keith 1.VHCA/VCAL 2112 W Laburnum Ave 2.President 03/22/2021 \$62.50 \$125.00 3.Richmond, VA Richmond, VA 23227 Hare, James Keith 1.VHCA/VCAL 2112 W Laburnum Ave 03/22/2021 \$62.50 \$187.50 2.President 2112 3.Richmond, VA Richmond, VA 23227 Highland Ridge Rehab Center PO Box 459 2. Nursing Facility 01/15/2021 \$1,000.00 \$1,000.00 Stuart, VA 24171 3.Stuart VA

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Schedule A: Direct Contributions Over \$100 1. Employer or Business (If Corporate/Company Donor: N/A) 2. Type of Business(If Corporate Donor Type of Business) Date Contribution Aggregate 3. Business Location Full Name of Contributor Received This Period To Date Mailing Address of Contributor Landmark Center 227 Landmark Drive 2. Nursing Facility 01/15/2021 \$1,000.00 \$1,000.00 Stuart, VA 24171 3.Stuart Va Lee Health & amp; Rehab Center 208 Health Care Drive 01/04/2021 \$1,000.00 \$1,000.00 2. Nursing Facility Penington Gap, VA 24277 3.Pennington Gap, VA Manassas Health & Denter Rehab Center \$1,000.00 01/04/2021 \$1,000.00 8575 Rixlew Lane 2. Nursing Facility Manassas, VA 20109 3.Manassas, VA Potomac Falls Health & Dry Rehb 46531 Harry Byrd Hwy 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Sterling, VA 20164 3.Roanoke VA Radford Health & Denter Rehab Center 700 Randolf Streed 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 Radford, VA 24141 3.Radford, VA River View on the Appomattox Health & Description 2015. Rehab 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 201 Eppes Street 3. Hopewell, VA Hopewell, VA 23860 Skyview Springs Health & Drings Rehab 2. Nursing Facility 30 MontVue Drive 01/22/2021 \$1,000.00 \$1,000.00 Luray, VA 22835-1057 3.Luray VA The Laurels at University Park 2420 Pemberton Road 2. Nursing Facility 01/04/2021 \$1,000.00 \$1,000.00 RIchmond, VA 23233 3.Richmond, VA The Laurels of Bon Air 9101 Bon Air Crossings Drive 2. Nursing Facility 01/08/2021 \$1,000.00 \$1,000.00 Richmond, VA 23235 3. Richmond VA The Laurels of Willow Creek 11611 Robious Road 2. Nursing Facility 01/15/2021 \$1,000.00 \$1,000.00 3.Midlothian VA Midlothian VA, VA 23113-2349 The Woodlands Health & Denter Rehab Center 1000 Fairview Ave 2. Nursing Facility 01/22/2021 \$1,000.00 \$1,000.00 Clifton Forge, VA 24422 3. Clifton Forge, VA Virginia Health Services Inc 240 Nat Turner Boulevard 2. Nursing Facilities 01/04/2021 \$8,000.00 \$8,000.00 Newport News, VA 23606 3. Newport News VA

Virginia Health Care Association - PAC

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(PAC-12-00080)			ı ago.	0 0
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
Wellsprings at Amelia 8830 Virginia Street Amelia, VA 23002-4826	1. 2.Nursing Facility 3.Amelia VA	01/22/2021	\$1,000.00	\$1,000.00
Westmoreland Rehab & Description (1997) Westmoreland Rehab & Description (1997) Westmoreland (1997) Westmoreland Rehab & Description (1997) Westmoreland Rehab & Descr	1. 2.Nursing Facility 3.Colonial Beach VA	01/15/2021	\$1,000.00	\$1,000.00
Woodbine Rehab & Dealthcare 2279 King Street Alexandria, VA 22302-4098	1. 2.Nursing Facility 3.Alexandria VA	02/18/2021	\$1,000.00	\$1,000.00
Total This Period		•	\$32,125.00	

Virginia Health Care Association - PAC (PAC-12-00080)	Reporting Period: 01/01/2021 Through: 03/31/2021 Page: 4 of 11		
No Schedule B results to display.			

Virginia Health Care Association - PAC (PAC-12-00080)	Reporting Period: 01/01/2021 Through: 03/31/2021 Page: 5 of 11
No Schedule C results to display.	

Virginia Health Care Association - PAC (PAC-12-00080)	Reporting Period: 01/01/2021 Through: 0 Page:	03/31/2021 6 of 11
No Schedule D results to display.		

Virginia Health Care Association - PAC (PAC-12-00080)	Reporting Period: 01/01/2021 Through: (Page:	03/31/2021 7 of 11
No Schedule E-1 results to display.		

Virginia Health Care Association - PAC (PAC-12-00080)	Reporting Period: 01/01/2021 Through: (Page:	03/31/2021 8 of 11
No Schedule E-2 results to display.		

Virginia Health Care Association - PAC (PAC-12-00080)	Reporting Period: 01/01/2021 Through: 03/31/202 Page: 9 of 11		
No Schedule F results to display.			

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Schedule G: Statement of Funds	Number of Contributions	Amount	
Contributions Received This Period			
1. Schedule A [Over \$100]	27	\$32,125.00	
2. Schedule B [Over \$100]	0	\$0.00	
3. Un-itemized Cash Contributions [\$100 or less]	1	\$62.50	
4. Un-itemized In-Kind Contributions [\$100 or less]	0	\$0.00	
5. Total	28		\$32,187.50
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]		\$0.00	
10. Total [add lines 7, 8 and 9]			\$0.00
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

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	\$178,387.58	
\$32,187.50		
\$0.00		
\$0.00		
	\$32,187.50	
		\$210,575.08
\$0.00		
	\$0.00	
	\$0.00	
		\$0.00
		\$210,575.08
\$0.00		
	\$178,387.58	
\$0.00		
\$32,187.50		
	\$32,187.50	
		\$210,575.08
\$0.00		
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		\$0.00
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	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$32,187.50	\$32,187.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$178,387.58 \$0.00 \$32,187.50 \$32,187.50