XXXXX_SMOKETEST_XXXXX (CC-21-00399)

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

(CC-21-00399)					
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	
Testor, Test 553 Test Street Richmond, VA 23223	1. 2. 3.	01/01/2021	\$12,000.00	\$0.00	

XXXXX_SMOKETEST_XXXXX (CC-21-00399)	Reporting Period: 01/01/2021 Through: 01/01/2021 Page: 2 of 3
No Schedule B results to display.	

XXXXX_SMOKETEST_XXXXX | Reporting Period: 01/01/2021 Through: 01/01/2021 Page: 3 of 3 |

No Schedule E-1 results to display.