

| Schedule A: Direct Contributions Over \$100   | Donor Information<br>1. Employer or Business (If Corporate/Company Donor: N/A)<br>2. Type of Business(If Corporate Donor Type of Business)<br>3. Business Location | Date<br>Received | Contribution<br>This Period | Aggregate<br>To Date |
|---|--|------------------|-----------------------------|----------------------|
| Full Name of Contributor<br>Mailing Address of Contributor  |  |                  |                             |                      |
| American HealthCare, LLC, DBA Heritage<br>Hall-Leesburg<br>3131 Electric Rd<br>Roanoke, VA 24018-6427 | 1.<br>2.Health care<br>3.Roanoke VA  | 06/04/2021       | \$1,000.00                  | \$1,000.00           |

No Schedule B results to display.

No Schedule E-1 results to display.