

Robert D. "Bobby" Orrock for House
Committee (CC-12-00825)

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
Molina Healthcare, Inc. P.O. Box 22819 Long Beach, CA 90801	1. 2.Managed Healthcare Services 3.Long Beach, California	09/13/2023	\$1,500.00	\$0.00

No Schedule B results to display.

No Schedule E-1 results to display.