No Schedule A results to display.

| Schedule B: In-Kind 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 4. Service/Goods Received 5. Basis used to Determine Value | Date Received | Contribution This Period | Aggregate To Date |
|--|---|------------------|-----------------------------|----------------------|
| Debra Gardner for Delegate P. O. Box 74571 North Chesterfield, VA 23236 | 1. 2. Campaign Committee 3. North Chesterfield Va 4. Yard Signs 5. Actual Cost | 08/21/2023 | \$1,199.00 | \$0.00 |
| Total This Period | | | | |

| No Schedule E-1 results to display. | |
|-------------------------------------|--|
| | |