

| Schedule A: Direct Contributions Over \$100<br>Full Name of Contributor<br>Mailing Address of Contributor | 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 |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------|----------------------|
| CHEEK, ROBERT<br>3400 NORTH VENICE ST<br>ARLINGTON, VA 22207                                              | 1.NOT EMPLOYED<br>2.NOT EMPLOYED<br>3.ARLINGTON, VA                                                                                                                | 10/26/2023       | \$2,000.00                  | \$2,000.00           |

No Schedule B results to display.

No Schedule E-1 results to display.