Sickles For Delegate (CC-12-01059)

Reporting Period: 01/08/2024 Through: 01/08/2024 Page: 1 of 3

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
Care Advantage, Inc 10041 Midlothian Tpke North Chesterfield, VA 23235-4815	1. 2.Healthcare 3.North Chesterfield VA	01/08/2024	\$2,500.00	\$2,500.00

No Schedule B results to display.

No Schedule E-1 results to display.	