

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
MILLER, VICKIE M 3713 ALTON RD SW ROANOKE, VA 24019	1.RIGHT VIEW HEALTH SERVICES, LLC 2.COMMUNITY OUTREACH DIRECTOR 3.ROANOKE, VA	05/24/2024	\$20.00	\$0.00

No Schedule B results to display.

No Schedule E-1 results to display.