

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
CHARITY-BROWN, TAMARA 11841 THOMAS MILL DR. GLEN ALLEN, VA 23059	1.ASSOCIATES IN PEDIATRICS 2.PEDIATRICIAN 3.GLEN ALLEN,VA	10/20/2025	\$10,000.00	\$12,500.00

No Schedule B results to display.

No Schedule E-1 results to display.