

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
Sintich, Maureen 10328 Sager Ave. #204 Fairfax, VA 22030	1.Inova Health System 2.Chief Nurse Executive 3.VA	10/24/2025	\$2,500.00	\$2,500.00

No Schedule B results to display.

No Schedule E-1 results to display.