

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
Sky Mall LLC 105 W Main Street Suite 200 Charlottesville, VA 22902-5530	1. 2.Social Lounge 3.Charlottesville, VA	01/10/2026	\$2,000.00	\$0.00

No Schedule B results to display.

No Schedule E-1 results to display.