Hyland for Supervisor (CC-12-00464)

Alexandria, 22307

Donor Information Employer or Business (If Corporate/Company Donor: N/A)
Type of Business(If Corporate Donor Type of Business)
Business Location Schedule A: Direct Contributions Over \$100 Aggregate Date Contribution To Date Full Name of Contributor Received This Period Mailing Address of Contributor Mirmirani, Noorieddin 1.Self 2.Psychiatrist 3.Springfield, VA \$0.00 2014 Mason Hill Dr 10/06/2015 \$500.00

Reporting Period: 10/06/2015 Through: 10/06/2015

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No Schedule B results to display.			

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No Schedule E-1 results to display.			