Virginia Association of Health Plans (PAC-12-00623)

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
OptimaHealth 4417 Corporation Lane Virginia Beach, 23462	1. 2.Health Plan 3.Virginia Beach, Virginia	07/30/2012	$18,000.00	$0.00

No Schedule B results to display.

No Schedule E-1 results to display.	