

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LifePoint Health, Inc. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		165200.51
(b) Cash on Hand at Beginning of Reporting Period.....	227657.72	
(c) Total Receipts (from Line 19)	0.00	174343.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	227657.72	339543.51
7. Total Disbursements (from Line 31).....	20314.49	132200.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	207343.23	207343.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

LifePoint Health, Inc. PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	161378.00
(ii) Unitemized	0.00	12965.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	174343.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	174343.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	174343.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	174343.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	14.49	250.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14.49	250.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	93700.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2300.00	38250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20314.49	132200.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20314.49	132200.28

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	174343.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	174343.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	14.49	250.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14.49	250.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LifePoint Health, Inc. PAC

Full Name (Last, First, Middle Initial)

A. Regions (formerly AmSouth)

Mailing Address 915 Deaderick Street

City
Nashville

State
TN

Zip Code
37237

Purpose of Disbursement
account analysis charge

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	6

FEC Identification Number

C []

Transaction ID : SB21B.10541

Amount of Each Disbursement this Period

[] 14.49

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 14.49

[] 14.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LifePoint Health, Inc. PAC

Full Name (Last, First, Middle Initial) A. ALEXANDER FOR SENATE 2020 INC		Date of Disbursement MM / DD / YYYY 09 / 14 / 2016
Mailing Address 228 S WASHINGTON STREET SUITE 115		FEC Identification Number C00383745 Transaction ID : SB23.10547 Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement fund raiser		Category/ Type
Candidate Name ALEXANDER, LAMAR, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FRIENDS OF MICHELLE		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address P.O. BOX 25422		FEC Identification Number C00501254 Transaction ID : SB23.10551 Amount of Each Disbursement this Period 2500.00
City ALBUQUERQUE	State NM	Zip Code 87125
Purpose of Disbursement fund raiser		Category/ Type
Candidate Name GRISHAM, MICHELLE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. GRASSLEY COMMITTEE		Date of Disbursement MM / DD / YYYY 09 / 08 / 2016
Mailing Address PO BOX 1000		FEC Identification Number C00230482 Transaction ID : SB23.10544 Amount of Each Disbursement this Period 3000.00
City DES MOINES	State IA	Zip Code 50304
Purpose of Disbursement fund raiser		Category/ Type
Candidate Name GRASSLEY, CHARLES E SENATOR, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 00	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LifePoint Health, Inc. PAC

A. MARSHA BLACKBURN FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 682185

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

City Franklin State TN Zip Code 37068

FEC Identification Number

Purpose of Disbursement
fund raiser

C	C00376939
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Candidate Name
BLACKBURN, MARSHA MRS., , ,

Transaction ID : SB23.10549

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: TN District: 07

5000.00

Memo Item

B. MCCARTHY VICTORY FUND

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 30844

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

City BETHESDA State MD Zip Code 20824

FEC Identification Number

Purpose of Disbursement
fund raiser

C	C00541011
---	-----------

Transaction ID : SB23.10542

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 23

1000.00

Memo Item

C. WYDEN FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 232 NE 9TH AVENUE

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

City PORTLAND State OR Zip Code 97232

FEC Identification Number

Purpose of Disbursement
fund raiser

C	C00308676
---	-----------

Transaction ID : SB23.10546

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: OR District: 00

1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

7500.00

TOTAL This Period (last page this line number only).....▶

18000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LifePoint Health, Inc. PAC

Full Name (Last, First, Middle Initial) A. Committee to Elect John O'Neal		Date of Disbursement MM / DD / YYYY 09 / 26 / 2016
Mailing Address 8 Oriole Place		FEC Identification Number C [] Transaction ID : SB29.10556 Amount of Each Disbursement this Period [] 250.00
City Beckley	State WV	Zip Code 25801
Purpose of Disbursement campaign contribution		Category/ Type []
Candidate Name Committee to Elect John O'Neal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV	District: 28	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Rupie Phillips		Date of Disbursement MM / DD / YYYY 09 / 20 / 2016
Mailing Address PO Box 194		FEC Identification Number C [] Transaction ID : SB29.10552 Amount of Each Disbursement this Period [] 250.00
City Lorado	State WV	Zip Code 25630
Purpose of Disbursement campaign contribution		Category/ Type []
Candidate Name Committee to Re-Elect Rupie Phillips		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV	District: 24	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Mia for Senate		Date of Disbursement MM / DD / YYYY 09 / 26 / 2016
Mailing Address PO Box 290692		FEC Identification Number C [] Transaction ID : SB29.10564 Amount of Each Disbursement this Period [] 1000.00
City Columbia	State SC	Zip Code 29229
Purpose of Disbursement campaign contribution		Category/ Type []
Candidate Name Mia for Senate		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 22	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1500.00
TOTAL This Period (last page this line number only).....▶	[] 1500.00