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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For	Other	Than An A	Authorized	d Commi	ttee		Office U	Jse Only	
NAME OF COMMITTEE (in		E OR PI	RINT ▼		ample: If ty er the lines		12FE	E4M5		
CHS/Commur	ity Health S	Systen	ns, Inc. P	olitical A	ction Cn	nte (CHS	PAC)			
ADDRESS (number ar		000 Merio	dian Blvd							
Check if diffication than previous reported. (A	ısly <sub>ı F</sub>	ranklin					TN	3706	67 	
2. <b>FEC IDENTIFIC</b>	ATION NUMB	ER ▼		CITY 🛦			STATE A		ZIP COD	DE 🛦
C C0048589	96		3.	. IS THIS REPORT	×	NEW (N) <b>OR</b>		AMENDED (A)	1	
4. TYPE OF RE (Choose One)  (a) Quarterly Re	ports:	b) Montl Repo Due	ort On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	Ë	May 20 (M5 Jun 20 (M6) Jul 20 (M7)		Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	ğ	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarter October Quarter January	y Report (Q1)  y Report (Q2)  15 y Report (Q3)		12-Day PRE-Election Report for the	ection on	Primary (1			neral (12G)	in the	Runoff (12R)
July 31 Report Year Or	Mid-Year (Non-election oly) (MY) tion Report		30-Day POST-Election Report for the	n 🔲	General (3	80G)	Rui	noff (30R)	_	Special (30S)
5. Covering Period	03	01	202	24	through	n 03	/ 31		)24	
I certify that I have e		eport an Pitt, Justin		t of my kno	wledge an	d belief it is t	rue, corre	ct and comple	ete.	
Signature of Treasure	er Pitt, Justin	ı, D., ,					Date	04 / D		2024
NOTE: Submission of	false, erroneous,	, or inco	mplete inform	ation may s	ubject the p	erson signing	this Repor	t to the penal	ties of 52 l	U.S.C. § 30109
Office Use Only									C FORI Rev. 05/20	

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

#### CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

2024 03 31 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 139890.28 January 1. 2024 (b) Cash on Hand at 191444.66 Beginning of Reporting Period..... 20020.00 71736.29 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 211626.57 211464.66 6(a) and 6(c) for Column B)..... 232.92 71.01 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 211393.65 211393.65 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

01 2024 03 03 31 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 10152.15 37094.58 (i) Itemized (use Schedule A)..... 29641.71 9867.85 (ii) Unitemized ..... (iii) TOTAL (add 66736.29 20020.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 5000.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 71736.29 20020.00 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 71736.29 12, 13, 14, 15, 16, 17, and 18(c))......▶ 20020.00 20. Total Federal Receipts 20020.00 71736.29 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)		2000		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	7101	200.00		
Expenditures(c) Total Operating Expenditures	71.01	232.92		
(add 21(a)(i), (a)(ii), and (b))▶	71.01	232.92		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees	4 4			
and Other Political Committees Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other	4 4			
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds		4 4 4		
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including Non-Federal Donations)	0.00	0.00		
,	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6)	0))			
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	4 4	200		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	71.01	232.92		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	71.01	000.00		
	71.01	232.92		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 20020.00 71736.29 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 71736.29 20020.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 71.01 232.92 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 71.01 232.92 (subtract Line 37 from Line 36) ......

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

FOR LINE NUMBER: PAGE 6 OF 57 (check only one)

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13 14 15 16 17

Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Abercrombie, Julie, , , Date of Receipt Mailing Address 1613 North McKenzie Street 2024 City Zip Code State Transaction ID: A2024-541584 AL Foley 36535 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) South Baldwin Regional Medical Center **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Arledge, Nicholas, , , Date of Receipt Mailing Address 2430 W. Pierce 03 01 2024 City State Zip Code Transaction ID: A2024-410399 Carlsbad NM 88220 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Carlsbad Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 300,00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Arledge, Nicholas, , , Date of Receipt Mailing Address 2430 W. Pierce 2024 03 15 City Zip Code Transaction ID : A2024-501241 State NM Carlsbad 88220 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Carlsbad Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) 158.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Arledge, Nicholas, , , Mailing Address 2430 W. Pierce 2024 City Zip Code State Transaction ID: A2024-541752 NM Carlsbad 88220 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Carlsbad Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Avila, Patrick, , , Date of Receipt Mailing Address 3150 Bristol St. Ste 500 03 2024 City State Zip Code Transaction ID : A2024-541587 Costa Mesa CA 92626 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief Exec Officer (CEO) Northwest Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Banks, Matthew, , , Date of Receipt Mailing Address One Hospital Drive SW 01 2024 Transaction ID : A2024-410396 City State Zip Code MS Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Crestwood Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 156.15 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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category of the Summary Page	×	<b>1</b> 1a		11b		11c		12		
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Detailed 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Banks, Matthew, , , Date of Receipt Mailing Address One Hospital Drive SW 2024 15 City Zip Code State Transaction ID: A2024-501238 MS Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Crestwood Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Banks, Matthew, , , Date of Receipt Mailing Address One Hospital Drive SW 03 29 2024 City State Zip Code Transaction ID: A2024-541749 Huntsville MS 35801 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Crestwood Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Benet, Miguel, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 01 2024 Transaction ID : A2024-410343 City State Zip Code TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Clinical Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 177.88 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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				son for the purpose of soliciting contributions o solicit contributions from such committee.			
	F COMMITTEE (In Full) Community Health Systems	s, Inc. Poli	tical Action Cmte (CH	S PAC)			
A. Benet, Mailing A  City Franklin  FEC ID r federal p  Name of CHSPSC Receipt F		Date of Receipt    M					
Full Nam B. Benet,	ner (specify) ▼  e of Individual (Last, First, Middle Initia Miguel, , , , , , , ddress 4000 Meridian Blvd.	Date of Receipt					
City Franklin FEC ID r federal p Name of CHSPSC Receipt F	number of contributing olitical committee.  Employer (for Individual) cultical cultical committee.		Zip Code 37067 tion (for Individual) inical Operations	Transaction ID : A2024-541696 Amount of Each Receipt this Period  62.50  Memo Item			
Other (specify) ▼  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Blair, Chris, , ,  Date of Receipt							
City Siloam S FEC ID r federal p Name of Siloam S Receipt F	number of contributing olitical committee.  Employer (for Individual) prings Regional Hospital	State AR  C  Occupat CAO  Aggregate Yea	Zip Code 72761  tion (for Individual)  ar-to-Date ▼  230.76	Transaction ID: A2024-541718  Amount of Each Receipt this Period  38.46  Memo Item			
	L of Receipts This Page (optional)s			163.46			

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Boyd, Roy, , , Date of Receipt Mailing Address 575 North River Street 2024 29 City Zip Code State Transaction ID: A2024-541716 Wilkes-Barre PΑ 18764-0001 Amount of Each Receipt this Period FEC ID number of contributing C 38.36 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wilkes Barre General Hospital **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.16 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Brooks, David, , , Date of Receipt Mailing Address 7950 W. Jefferson Blvd 03 01 2024 City State Zip Code Transaction ID: A2024-410369 Fort Wayne IN 46804 Amount of Each Receipt this Period FEC ID number of contributing 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lutheran Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 2576.92 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brooks, David, , , Date of Receipt Mailing Address 7950 W. Jefferson Blvd 2024 15 City State Zip Code Transaction ID : A2024-501211 IN Fort Wayne 46804 Amount of Each Receipt this Period FEC ID number of contributing 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lutheran Hospital COO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 76.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Brooks, David, , , Mailing Address 7950 W. Jefferson Blvd 2024 29 City Zip Code State Transaction ID: A2024-541722 IN 46804 Fort Wayne Amount of Each Receipt this Period FEC ID number of contributing 19.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) COO Lutheran Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 2615.38 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bull, Gary, , , Date of Receipt Mailing Address 1800 University Boulevard 03 80 2024 City State Zip Code Transaction ID: A2024-371866 Durant OK 74701 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AllianceHealth Durant & Madill Receipt For: Aggregate Year-to-Date ▼ Primary General 300,00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bull, Gary, , , Date of Receipt Mailing Address 1800 University Boulevard 2024 22 Transaction ID : A2024-516337 City Zip Code State OK Durant 74701 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AllianceHealth Durant & Madill **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 139.23 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Campbell, Chad, A, , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-410288 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 416.68 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Campbell, Chad, A,, Date of Receipt Mailing Address 4000 Meridian Blvd. 03 15 2024 City State Zip Code Transaction ID: A2024-501129 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Regional President CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 520.85 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Campbell, Chad, A, , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 29 City Zip Code Transaction ID : A2024-541642 State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 625.02 Other (specify) 312.51 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Carlisle, Gordon, , , Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-410256 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC VP Facilities Mainten Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carlisle, Gordon, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 15 2024 City State Zip Code Transaction ID: A2024-501096 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **VP Facilities Mainten** CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carlisle, Gordon, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 29 City Zip Code Transaction ID : A2024-541609 State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **VP Facilities Mainten** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 187.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cobb, Christopher, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City Zip Code State Transaction ID: A2024-501107 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC VP Legal & Corp Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cobb, Christopher, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 2024 City State Zip Code Transaction ID: A2024-541620 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Legal & Corp Secretary CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Conrad, Matthew, , , Date of Receipt Mailing Address 4311 East Lohman Avenue 01 2024 Transaction ID : A2024-410418 City Zip Code State NM Las Cruces 88011 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mountainview Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 141.03 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Conrad, Matthew, , , Mailing Address 4311 East Lohman Avenue 2024 15 City Zip Code State Transaction ID: A2024-501260 NM 88011 Las Cruces Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Mountainview Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Conrad, Matthew, , Date of Receipt Mailing Address 4311 East Lohman Avenue 03 2024 City State Zip Code Transaction ID : A2024-541771 Las Cruces NM 88011 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mountainview Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cotton, Michael, , , Date of Receipt Mailing Address 3690 Grandview Parkway 2024 03 29 Transaction ID : A2024-541742 City State Zip Code ALBirmingham 35243 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Grandview Medical Center CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 153.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cova, Chuck, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-410347 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC VP Operations Division Receipt For: Aggregate Year-to-Date ▼ Primary General 416.68 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cova, Chuck, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 15 2024 City State Zip Code Transaction ID: A2024-501188 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Operations Division CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 520.85 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Cova, Chuck, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 29 Transaction ID : A2024-541700 City Zip Code State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **VP Operations Division** Receipt For: Aggregate Year-to-Date ▼ Primary General 625.02 Other (specify) 312.51 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Curran, Michael, , , Date of Receipt Mailing Address 746 Jefferson Ave. 2024 15 City Zip Code State Transaction ID: A2024-501258 PΑ Scranton 18510 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Regional Hospital of Scranton CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Curran, Michael, , , Date of Receipt Mailing Address 746 Jefferson Ave. 03 2024 City State Zip Code Transaction ID: A2024-541769 Scranton PA 18510 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Regional Hospital of Scranton Receipt For: Aggregate Year-to-Date ▼ Primary General 300,00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Steve, , , Date of Receipt Mailing Address 151 Redstone Avenue, S.E. 2024 29 City State Zip Code Transaction ID : A2024-541575 FL Crestview 32539-5352 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) North Okaloosa Medical Center **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 138.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dobbs, Steve, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City Zip Code State Transaction ID: A2024-501151 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC VP Operations Division Receipt For: Aggregate Year-to-Date ▼ Primary General 208.30 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dobbs, Steve, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 2024 City State Zip Code Transaction ID: A2024-541663 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 41.66 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Operations Division CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 249.96 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dooley, Mark, , , Date of Receipt Mailing Address 2520 E. Dupont Road 01 2024 Transaction ID : A2024-410397 City State Zip Code IN Fort Wayne 46825 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dupont Hospital** CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 141.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dooley, Mark, , , Date of Receipt Mailing Address 2520 E. Dupont Road 2024 15 City Zip Code State Transaction ID: A2024-501239 IN Fort Wayne 46825 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO **Dupont Hospital** Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dooley, Mark, , , Date of Receipt Mailing Address 2520 E. Dupont Road 03 2024 City State Zip Code Transaction ID: A2024-541750 Fort Wayne IN 46825 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dupont Hospital** Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Echavarria, Jose, , , Date of Receipt Mailing Address 609 W. Maple 2024 29 Transaction ID : A2024-541763 City State Zip Code AR Springdale 72764 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest Medical Center - Springdale CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 153.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

57 FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Emery, Andrew, , , Mailing Address 505 S. John Redditt Drive 2024 01 PO Box 150610 City State Zip Code Transaction ID: A2024-410378 Lufkin TX 75904 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Woodland Heights Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Emery, Andrew, , , Date of Receipt Mailing Address 505 S. John Redditt Drive 03 15 2024 PO Box 150610 City State Zip Code Transaction ID: A2024-501220 Lufkin  $\mathsf{TX}$ 75904 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Woodland Heights Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Emery, Andrew, , , Date of Receipt Mailing Address 505 S. John Redditt Drive 2024 03 29 PO Box 150610 City State Zip Code Transaction ID : A2024-541731 TX Lufkin 75904 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Woodland Heights Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) 173.07 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fox, David, , , Date of Receipt Mailing Address 700 W. Grove Street 2024 29 City Zip Code State Transaction ID: A2024-541757 El Dorado AR 71730 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medical Center of South Arkansas CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Galin, Tomi, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410280 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EVP Corp Comm Mktg & PA CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Galin, Tomi, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City Zip Code Transaction ID : A2024-501121 State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC EVP Corp Comm Mktg & PA Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) 288.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... \_\_\_

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for each category of the Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Galin, Tomi, , , Mailing Address 4000 Meridian Blvd. 2024 29 City Zip Code State Transaction ID: A2024-541634 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC EVP Corp Comm Mktg & PA Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gordon, Steve, , , Date of Receipt Mailing Address 2901 N. Fourth Street 03 01 2024 PO Box 14000 City State Zip Code Transaction ID : A2024-410407 Longview IL 75605 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Longview Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gordon, Steve, , , Date of Receipt Mailing Address 2901 N. Fourth Street 2024 15 PO Box 14000 Transaction ID : A2024-501249 City State Zip Code ILLongview 75605 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Longview Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240.38 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

57 FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gordon, Steve, , , Date of Receipt Mailing Address 2901 N. Fourth Street 2024 29 PO Box 14000 City State Zip Code Transaction ID: A2024-541760 IL 75605 Longview Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Longview Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hayes, James, M, Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410252 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EVP, CHRO CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hayes, James, M, , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 15 City State Zip Code Transaction ID : A2024-501092 TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC EVP, CHRO Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) 307.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hayes, James, M, , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 29 City Zip Code State Transaction ID: A2024-541605 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC EVP, CHRO Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hester, Joey, , , Date of Receipt Mailing Address 400 North Edwards Street 03 2024 City State Zip Code Transaction ID : A2024-541754 Enterprise TN 36330 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medical Center Enterprise Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Horrar, James, L, , Date of Receipt Mailing Address 4000 Meridian Blvd. 01 2024 Transaction ID : A2024-410299 City State Zip Code TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Managed Care** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 225.96 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Horrar, James, L, , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City Zip Code State Transaction ID: A2024-501140 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Managed Care** Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Horrar, James, L,, Date of Receipt Mailing Address 4000 Meridian Blvd. 03 2024 City State Zip Code Transaction ID: A2024-541653 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **SVP Managed Care** CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Jason, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 01 2024 Transaction ID : A2024-410287 City State Zip Code TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP CAO** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 187.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Jason, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City Zip Code State Transaction ID: A2024-501128 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC SVP CAO Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Jason, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 2024 City State Zip Code Transaction ID: A2024-541641 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **SVP CAO** CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jones, Sherry, , , Date of Receipt Mailing Address One Hospital Drive SW 01 2024 Transaction ID : A2024-410394 City State Zip Code ALHuntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Crestwood Medical Center **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 187.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jones, Sherry, , , Date of Receipt Mailing Address One Hospital Drive SW 2024 15 City Zip Code State Transaction ID: A2024-501236 AL Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Crestwood Medical Center **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jones, Sherry, , , Date of Receipt Mailing Address One Hospital Drive SW 03 2024 City State Zip Code Transaction ID : A2024-541747 Huntsville AL 35801 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Crestwood Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Josey, Charles, , , Date of Receipt Mailing Address 2101 East DuBois Drive 2024 29 City State Zip Code Transaction ID : A2024-541738 IN Warsaw 46580 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lutheran Hospital **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 163.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Junkins, Curt, , , Mailing Address 7201 East State Highway 2024 City Zip Code State Transaction ID: A2024-410225 Granbury TX 76048 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lake Granbury Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Junkins, Curt, , , Date of Receipt Mailing Address 7201 East State Highway 03 15 2024 City State Zip Code Transaction ID: A2024-501065 Granbury  $\mathsf{TX}$ 76048 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lake Granbury Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Junkins, Curt, , , Date of Receipt Mailing Address 7201 East State Highway 2024 29 Transaction ID : A2024-541578 City State Zip Code TX Granbury 76048 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lake Granbury Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) 173.07 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Killion, Scott, , , Mailing Address 3150 Bristol St. Ste 500 2024 29 City Zip Code State Transaction ID: A2024-541765 CA Costa Mesa 92626 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevarro Regional Hospital Chief Fin Officer (CFO) Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Leal, Jorge, , , Date of Receipt Mailing Address 1700 East Saunders 03 01 2024 City State Zip Code Transaction ID : A2024-410237 Laredo  $\mathsf{TX}$ 78041 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Laredo Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Leal, Jorge, , , Date of Receipt Mailing Address 1700 East Saunders 2024 15 City State Zip Code Transaction ID : A2024-501077 TX Laredo 78041 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Laredo Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) 153.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Leal, Jorge, , , Mailing Address 1700 East Saunders 2024 29 City State Zip Code Transaction ID: A2024-541590 TX 78041 Laredo Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Laredo Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Leger, Bernard, , , Date of Receipt Mailing Address 506 E. San Antonio Street 03 01 2024 City State Zip Code Transaction ID: A2024-410403 Victoria  $\mathsf{TX}$ 77901 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Detar Hospital** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Leger, Bernard, , , Date of Receipt Mailing Address 506 E. San Antonio Street 2024 15 City State Zip Code Transaction ID : A2024-501245 TX Victoria 77901 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Detar Hospital CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) 173.07 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... \_\_\_

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Leger, Bernard, , , Date of Receipt Mailing Address 506 E. San Antonio Street 2024 29 City Zip Code State Transaction ID: A2024-541756 TX Victoria 77901 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO **Detar Hospital** Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lomicka, Ted, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410259 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Strategic Analysis CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lomicka, Ted, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City State Zip Code Transaction ID : A2024-501099 TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC VP Strategic Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) 182.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lomicka, Ted, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 29 City Zip Code State Transaction ID: A2024-541612 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC VP Strategic Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lynd, Michael, , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410272 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **SVP Financial Services** CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lynd, Michael, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 15 City Zip Code Transaction ID : A2024-501113 State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Financial Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) 187.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lynd, Michael, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-541626 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Financial Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mason, Drew, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410255 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Regional President CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 416.68 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mason, Drew, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 15 Transaction ID : A2024-501095 City Zip Code State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 520.85 Other (specify) 270.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mason, Drew, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-541608 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 625.02 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** May, Garrett, , , Date of Receipt Mailing Address 54 Sergeant Prentiss Dr. 03 2024 City State Zip Code Transaction ID: A2024-541748 Natchez MS 39120 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Merit Health Natchez Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McKinney, Daniel, , , Date of Receipt Mailing Address 3690 Grandview Parkway 01 2024 Transaction ID : A2024-410390 City State Zip Code ALBirmingham 35243 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Grandview Medical Center** CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 200.32 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt McKinney, Daniel, , , Mailing Address 3690 Grandview Parkway 2024 15 City Zip Code State Transaction ID: A2024-501232 AL Birmingham 35243 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Grandview Medical Center** CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McKinney, Daniel, , , Date of Receipt Mailing Address 3690 Grandview Parkway 03 2024 City State Zip Code Transaction ID: A2024-541743 Birmingham AL 35243 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Grandview Medical Center** Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McWhorter, Juli, , , Date of Receipt Mailing Address 4301 Greathouse Springs Rd. 2024 29 P.O. Box 544 City State Zip Code Transaction ID : A2024-541729 PΑ Johnson 72741 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest Medical Center - Willow Cree CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 153.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Medley, Mark, , , Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-410333 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 416.68 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Medley, Mark, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 15 2024 City State Zip Code Transaction ID: A2024-501174 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Regional President CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 520.85 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Medley, Mark, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 29 Transaction ID : A2024-541686 City State Zip Code TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 625.02 Other (specify) 312.51 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mergen, Lynn, , , Mailing Address 2101 East DuBois Drive 2024 City Zip Code State Transaction ID: A2024-410386 PΑ Warsaw 46580 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO Lutheran Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mergen, Lynn, , , Date of Receipt Mailing Address 2101 East DuBois Drive 03 15 2024 City State Zip Code Transaction ID : A2024-501228 Warsaw PA 46580 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lutheran Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mergen, Lynn, , , Date of Receipt Mailing Address 2101 East DuBois Drive 2024 29 City State Zip Code Transaction ID : A2024-541739 PA Warsaw 46580 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lutheran Hospital CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) 173.07 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Millsaps, Jarrett, , , Mailing Address 3150 Bristol St. Ste 500 2024 City Zip Code State Transaction ID: A2024-410241 CA Costa Mesa 92626 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Cleveland Chief Exec Officer (CEO) Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Millsaps, Jarrett, , , Date of Receipt Mailing Address 3150 Bristol St. Ste 500 03 15 2024 City State Zip Code Transaction ID: A2024-501081 Costa Mesa CA 92626 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief Exec Officer (CEO) Tennova Cleveland Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Millsaps, Jarrett, , , Date of Receipt Mailing Address 3150 Bristol St. Ste 500 2024 29 Transaction ID : A2024-541594 City State Zip Code CA Costa Mesa 92626 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Cleveland Chief Exec Officer (CEO) Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) 173.07 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Momany, Craig, , , Mailing Address 4309 Essex Terrace Cir. 2024 City Zip Code State Transaction ID: A2024-516334 FL Pace 32571 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Santa Rosa Medical Center Chief Fin Officer (CFO) Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Morrison, Kevin, , , Date of Receipt Mailing Address 10820 Parkside Drive 03 01 2024 City State Zip Code Transaction ID : A2024-410317 Knoxville TN 37934 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MKT CFO OPS Tennova Healthcare, Turkey Creek Med C Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Morrison, Kevin, , , Date of Receipt Mailing Address 10820 Parkside Drive 2024 15 City Zip Code Transaction ID : A2024-501158 State TN Knoxville 37934 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Healthcare, Turkey Creek Med C MKT CFO OPS Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) 153.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Morrison, Kevin, , , Mailing Address 10820 Parkside Drive 2024 29 City Zip Code State Transaction ID: A2024-541670 Knoxville 37934 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Healthcare, Turkey Creek Med C MKT CFO OPS Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Naegler, Rick, , , Date of Receipt Mailing Address 3100 Oak Grove Road 03 01 2024 City State Zip Code Transaction ID : A2024-410375 Poplar Bluff MO 63902 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Poplar Bluff Regional Medical Ctr. Receipt For: Aggregate Year-to-Date ▼ Primary General 769.20 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Naegler, Rick, , , Date of Receipt Mailing Address 3100 Oak Grove Road 2024 15 City State Zip Code Transaction ID : A2024-501217 MO Poplar Bluff 63902 Amount of Each Receipt this Period FEC ID number of contributing C 192.30 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Poplar Bluff Regional Medical Ctr. CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 961.50 Other (specify) 442.29 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Naegler, Rick, , , Mailing Address 3100 Oak Grove Road 2024 City Zip Code State Transaction ID: A2024-541728 63902 MO Poplar Bluff Amount of Each Receipt this Period FEC ID number of contributing C 192.30 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Poplar Bluff Regional Medical Ctr. CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1153.80 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nalls, Jacqueline, , , Date of Receipt Mailing Address 3150 Bristol St. Ste 500 03 2024 City State Zip Code Transaction ID : A2024-541768 Costa Mesa CA 92626 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief Financial Officer (CFO) Scranton Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Parsons, Brent, , , Date of Receipt Mailing Address 2735 Silver Creek Road 01 2024 Transaction ID : A2024-410227 City State Zip Code MO **Bullhead City** 86442 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Western Arizona Regional Medical Cente CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 288.45 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Parsons, Brent, , , Mailing Address 2735 Silver Creek Road 2024 15 City Zip Code State Transaction ID: A2024-501067 MO **Bullhead City** 86442 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Western Arizona Regional Medical Cente CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Parsons, Brent, , , Date of Receipt Mailing Address 2735 Silver Creek Road 03 29 2024 City State Zip Code Transaction ID: A2024-541580 **Bullhead City** MO 86442 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Western Arizona Regional Medical Cente Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pennington, Stephen, , , Date of Receipt Mailing Address 1499 Fair Road 2024 03 08 City Transaction ID : A2024-371845 State Zip Code GΑ Statesboro 30458 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) East Georgia Regional Medical Ctr CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) 173.07 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Pennington, Stephen, , , Mailing Address 1499 Fair Road 2024 City Zip Code State Transaction ID: A2024-516316 GΑ Statesboro 30458 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) East Georgia Regional Medical Ctr CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pickard, Craig, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410253 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **SVP Corporate Taxation** CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pickard, Craig, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 15 City State Zip Code Transaction ID : A2024-501093 TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Corporate Taxation** Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) 182.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Pickard, Craig, , , Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-541606 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC **SVP Corporate Taxation** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rich, Kenneth, , , Date of Receipt Mailing Address 7565 Dannaher Dr 03 80 2024 City State Zip Code Transaction ID: A2024-371849 Powell TN 37849 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chief Exec Officer (CEO) Tennova Healthcare - North Knoxville M Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rich, Kenneth, , , Date of Receipt Mailing Address 7565 Dannaher Dr 2024 22 City Zip Code Transaction ID : A2024-516320 State TN Powell 37849 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Healthcare - North Knoxville M Chief Exec Officer (CEO) Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) 177.88 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 45 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Ridder, Benjamin, , , Mailing Address 110 Hospital Drive 2024 City Zip Code State Transaction ID: A2024-516327 Jefferson City 37934 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Healthcare - Jefferson Memoria CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rodriguez, Marco, , , Date of Receipt Mailing Address 1700 East Saunders 03 29 2024 City State Zip Code Transaction ID: A2024-541589 Laredo PA 78041 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Laredo Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Roley, Margaret, , , Date of Receipt Mailing Address 1613 North McKenzie Street 01 2024 City Zip Code Transaction ID : A2024-410230 State TN Foley 36535 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) South Baldwin Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 134.61 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Roley, Margaret, , , Mailing Address 1613 North McKenzie Street 2024 15 City Zip Code State Transaction ID: A2024-501070 Foley 36535 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) South Baldwin Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Roley, Margaret, , , Date of Receipt Mailing Address 1613 North McKenzie Street 03 29 2024 City State Zip Code Transaction ID: A2024-541583 Foley TN 36535 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) South Baldwin Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Samrow, Kevin, , , Date of Receipt Mailing Address 1800 University Boulevard 2024 29 City Zip Code Transaction ID : A2024-541724 State OK Durant 74701 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AllianceHealth Durant & Madill CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 153.84 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schneider, Brian, , , Date of Receipt Mailing Address 2520 E. Dupont Road 2024 29 City Zip Code State Transaction ID: A2024-541734 Fort Wayne IN 46825 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CFO Dupont Hospital** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schrupp, Susan, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 01 2024 City State Zip Code Transaction ID : A2024-410327 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP Chief Purch Officer CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schrupp, Susan, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 15 City State Zip Code Transaction ID : A2024-501168 TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC SVP Chief Purch Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) 163.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schrupp, Susan, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 29 City Zip Code State Transaction ID: A2024-541680 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC SVP Chief Purch Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Serrano, Justin, , , Date of Receipt Mailing Address 6002 Berryhill Road 03 80 2024 City State Zip Code Transaction ID: A2024-371864 FL Milton 32570 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Santa Rosa Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Serrano, Justin, , , Date of Receipt Mailing Address 6002 Berryhill Road 2024 22 City State Zip Code Transaction ID : A2024-516335 FL Milton 32570 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Santa Rosa Medical Center COO Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) 177.88 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 49 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Simon, Lynn, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 City Zip Code State Transaction ID: A2024-410257 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 208.33 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC President Clin Ops & CMO Receipt For: Aggregate Year-to-Date ▼ Primary General 833.32 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Simon, Lynn, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 15 2024 City State Zip Code Transaction ID : A2024-501097 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 208.33 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President Clin Ops & CMO CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 1041.65 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Simon, Lynn, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 29 City Zip Code Transaction ID : A2024-541610 State TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 208.33 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC President Clin Ops & CMO Receipt For: Aggregate Year-to-Date ▼ Primary General 1249.98 Other (specify) 624.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sisson, Travis, , , Date of Receipt Mailing Address 150 Reynoir Street 2024 15 City Zip Code State Transaction ID: A2024-501255 Biloxi TX 39530 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Merit Health Biloxi CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sisson, Travis, , , Date of Receipt Mailing Address 150 Reynoir Street 03 2024 City State Zip Code Transaction ID: A2024-541766 Biloxi  $\mathsf{TX}$ 39530 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Merit Health Biloxi Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sistrunk, Heather, , , Date of Receipt Mailing Address 350 Crossgates Boulevard 2024 22 City Zip Code Transaction ID : A2024-516331 State MS Brandon 39042 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Merit Health Rankin CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 118.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Stockton, Kevin, , , Mailing Address 4000 Meridian Blvd. 2024 01 City Zip Code State Transaction ID: A2024-410292 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 416.68 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stockton, Kevin, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 15 2024 City State Zip Code Transaction ID: A2024-501133 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Regional President CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 520.85 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stockton, Kevin, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 03 29 Transaction ID : A2024-541646 City State Zip Code TN Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC Regional President Receipt For: Aggregate Year-to-Date ▼ Primary General 625.02 Other (specify) 312.51 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Turner, Amie, , , Mailing Address 1310 Paluxy Road 2024 City Zip Code State Transaction ID: A2024-541577 Granbury TX 76048 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lake Granbury Medical Center **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wallace, David, , , Date of Receipt Mailing Address 2500 S. Woodworth Loop (P.O. Box 1 03 01 2024 City State Zip Code Transaction ID : A2024-410417 Palmer ΑK 99645 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mat-Su Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 232.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wallace, David, , , Date of Receipt Mailing Address 2500 S. Woodworth Loop (P.O. Box 1 2024 03 15 City Zip Code Transaction ID : A2024-501259 State  $\mathsf{AK}$ Palmer 99645 Amount of Each Receipt this Period FEC ID number of contributing C 58.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mat-Su Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 154.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Wallace, David, , , Mailing Address 2500 S. Woodworth Loop (P.O. Box 1 2024 29 City Zip Code Transaction ID: A2024-541770 ΑK 99645 Palmer Amount of Each Receipt this Period FEC ID number of contributing 58.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mat-Su Regional Medical Center CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 348.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. White, Tammy, , , Date of Receipt Mailing Address 1030 River Oak Dr. 03 2024 City State Zip Code Transaction ID : A2024-541755 Flowood MS 39232-0000 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Occupation (for Individual) Name of Employer (for Individual) Chief Fin Officer (CFO) Merit Health River Oaks Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Williams, Scott, , , Date of Receipt Mailing Address 435 Second Street 2024 22 Transaction ID : A2024-516325 City Zip Code State TN Newport 37821 Amount of Each Receipt this Period FEC ID number of contributing C 38.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tennova Healhcare - Newport Medical Ce CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 230.76 Other (specify) 134.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 54 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X   11a				
Any information copied from such Reports and State or for commercial purposes, other than using the r							
NAME OF COMMITTEE (In Full) CHS/Community Health Systems							
Full Name of Individual (Last, First, Middle Initial  A. Williams, Shelton, , ,  Mailing Address 1700 East Saunders  City Laredo  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Laredo Medical Center  Receipt For:  Primary General Other (specify)	State TX  C  Occu COO  Aggregate	Zip Code 78041 Ipation (for Individual) Year-to-Date ▼	Date of Receipt  03 08 2024  Transaction ID: A2024-371867  Amount of Each Receipt this Period  57.69  Memo Item				
Full Name of Individual (Last, First, Middle Initial Williams, Shelton, , , Mailing Address 1700 East Saunders  City Laredo  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Laredo Medical Center  Receipt For:  Primary General Other (specify)	State TX  C Occurrence COO	Zip Code 78041	Date of Receipt  May 22 2024  Transaction ID: A2024-516338  Amount of Each Receipt this Period  57.69  Memo Item				
Full Name of Individual (Last, First, Middle Initial Witte, Beth, , ,  Mailing Address 4000 Meridian Blvd.  City Franklin  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  CHSPSC LLC  Receipt For:  Primary General Other (specify)	State TN  C Occusive	Zip Code 37067  Ipation (for Individual) Corp Compl & Priv Off  Year-to-Date ▼  250.00	Date of Receipt  Mo3				
SUBTOTAL of Receipts This Page (optional)		·····	177.88				
TOTAL This Period (last page this line number or	nly)						

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for each category of the Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Witte, Beth, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 2024 15 City Zip Code State Transaction ID: A2024-501089 Franklin 37067 Amount of Each Receipt this Period FEC ID number of contributing C 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CHSPSC LLC SVP Corp Compl & Priv Off Receipt For: Aggregate Year-to-Date ▼ Primary General 312.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Witte, Beth, , , Date of Receipt Mailing Address 4000 Meridian Blvd. 03 2024 City State Zip Code Transaction ID : A2024-541602 Franklin TN 37067 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP Corp Compl & Priv Off CHSPSC LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wood, Clyde, , , Date of Receipt Mailing Address 7950 W. Jefferson Blvd. 2024 03 08 City Zip Code Transaction ID : A2024-371869 State NC Fort Wayne 46804 Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lutheran Hospital CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 288.45 Other (specify) 182.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 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) CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wood, Clyde, , , Date of Receipt Mailing Address 7950 W. Jefferson Blvd. 2024 City Zip Code State Transaction ID: A2024-516340 NC 46804 Fort Wayne Amount of Each Receipt this Period FEC ID number of contributing C 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO Lutheran Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 346.14 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 57.69 SUBTOTAL of Receipts This Page (optional)..... 10152.15 TOTAL This Period (last page this line number only).....

# 17

SCHEDULE B (FEC Form 3X)	I I loo concrete cohedulo(s) I			NUMBER: PAGE 57 OF 57						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only							
		Summary Page	X 21b 28a	22 28b	23 28c		27 30b			
Any information copied from such Reports and Statem	nents may n	ot be sold or use	ed by any pers	on for the pur	pose of so	liciting cont	tribution	ıs		
or for commercial purposes, other than using the nam	e and addre	ess of any politica	al committee to	solicit contrib	outions fron	n such com	nmittee.			
NAME OF COMMITTEE (In Full)		· 1 A 4' - 4	O (OLI)	D D 4 C'						
CHS/Community Health Systems, I	nc. Polit	ical Action (	Jmte (CHS	S PAC)						
Full Name (Last, First, Middle Initial)  A. Wolle Forge				Date of Disbursement						
A. Wells Fargo				Man / Dan / Yayayay						
Mailing Address PO Box 63020	03 11 2024									
,	State	Zip Code		FEC Identi	fication Nu	mber				
San Francisco Purpose of Disbursement	CA 94163									
Bank Service Charge			001	C						
Candidate Name			Category/	Amount of	action ID : Each Disb		his Peri	iod		
			Type				-			
	ment For: 2024  Primary General  Other (specify) ▼  Not Applicable			71.01						
				П.,						
State: District:				Memo Item						
Full Name (Last, First, Middle Initial)										
В.				Date of Disbursement						
Mailing Address					M M / D D / Y Y Y Y Y					
City	state	ate Zip Code		FEO Harriston N. J.						
	2.5 0000			FEC Identification Number						
Purpose of Disbursement	Purpose of Disbursement				C					
Candidate Name					Amount of Fook Dishursons at this Povind					
	Category/ Type					Amount of Each Disbursement this Period				
Office Sought: House Disbursem	Primary General				,	7	-46-			
State: District:	State: District: Other (specify)			Memo Item						
Full Name (Last, First, Middle Initial)										
C.				Date of Disbursement						
Mailing Address				M M / D D / Y Y Y Y						
City	state	Zip Code		FEC Identi	fication Nu	mber				
Purpose of Disbursement					C					
Candidate Name  Category/ Type					Amount of Each Disbursement this Period					
Office Sought: House Disbursement For:						45				
	Primary General Other (specify) ▼									
State: District:			Memo Item							
State. District.								_		
SUBTOTAL of Disbursements This Page (optional)							71.01			
				-	7	7	-	一		
TOTAL This Period (last page this line number only).				1			71.01	. 1		