

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

ADDRESS (number and street) 4000 Meridian Blvd Franklin TN 37067 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00485896 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 03 / 01 / 2022 through 03 / 31 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Pitt, Justin, D., , Type or Print Name of Treasurer

Signature of Treasurer Pitt, Justin, D., [Electronically Filed] Date 05 / 20 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="259596.14"/>	<input type="text" value="259596.14"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="228379.05"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8911.83"/>	<input type="text" value="35694.74"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="237290.88"/>	<input type="text" value="295290.88"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20000.00"/>	<input type="text" value="78000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="217290.88"/>	<input type="text" value="217290.88"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

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

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4273.29	17044.24
(ii) Unitemized .....	4638.54	18650.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8911.83	35694.74
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8911.83	35694.74
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	8911.83	35694.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8911.83	35694.74

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	39000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4000.00	39000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20000.00	78000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20000.00	78000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8911.83	35694.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8911.83	35694.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

This report is being amended to correct employer information, receipts, corresponding subtotals and PAC balance.

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Banks, Matthew, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5001 Hardy Street

City Hattiesburg	State MS	Zip Code 39402
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Merit Health Wesley	Occupation (for Individual) Chief Exec Officer (CEO)
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2022

**Transaction ID : A2022-473553**

Amount of Each Receipt this Period  
57.70

Memo Item

**B. Banks, Matthew, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5001 Hardy Street

City Hattiesburg	State MS	Zip Code 39402
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Merit Health Wesley	Occupation (for Individual) Chief Exec Officer (CEO)
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2022

**Transaction ID : A2022-473955**

Amount of Each Receipt this Period  
57.70

Memo Item

**C. Boyd, Roy, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 N. River Street

City Wilkes Barre	State PA	Zip Code 18764
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) Chief Fin Officer (CFO)
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
208.35

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2022

**Transaction ID : A2022-473529**

Amount of Each Receipt this Period  
41.67

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	157.07
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Boyd, Roy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 575 N. River Street  
 City Wilkes Barre State PA Zip Code 18764  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473928**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Campbell, Chad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.85

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473884**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Campbell, Chad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893867**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.01
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Carlisle, Gordon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Facilities Mainten  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473851**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Carlisle, Gordon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Facilities Mainten  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893834**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Cobb, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Legal & Corp Secretary  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473865**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	166.67
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Cobb, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Legal & Corp Secretary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893848**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Davis, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 151 Redstone Avenue, S.E.  
 City Crestview State FL Zip Code 32539-6026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) North Okaloosa Medical Center Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 03 / 04 / 2022  
**Transaction ID : A2022-473522**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Davis, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 151 Redstone Avenue, S.E.  
 City Crestview State FL Zip Code 32539-6026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) North Okaloosa Medical Center Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473975**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Dobbs, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Operations Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473902**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Dobbs, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Operations Division  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893885**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Dooley, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2520 E. Dupont Rd  
 City Fort Wayne State IN Zip Code 46825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dupont Hospital Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2022  
**Transaction ID : A2022-473536**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	133.34
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Dooley, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2520 E. Dupont Rd  
 City Fort Wayne State IN Zip Code 46825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dupont Hospital Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 18 / 2022**  
**Transaction ID : A2022-473935**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Galin, Tomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) EVP Corp Comm Mktg & PA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt **03 / 15 / 2022**  
**Transaction ID : A2022-473879**  
 Amount of Each Receipt this Period 115.00  
 Memo Item

**C. Galin, Tomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) EVP Corp Comm Mktg & PA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt **03 / 31 / 2022**  
**Transaction ID : A2022-893862**  
 Amount of Each Receipt this Period 115.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Hatfield, Chad, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6200 N. LaCholla Blvd.

City Tucson	State AZ	Zip Code 85741
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) Chief Exec Officer (CEO)
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2022

**Transaction ID : A2022-473559**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Hatfield, Chad, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6200 N. LaCholla Blvd.

City Tucson	State AZ	Zip Code 85741
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) Chief Exec Officer (CEO)
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2022

**Transaction ID : A2022-473961**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Hayes, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4000 Meridian Blvd

City Franklin	State TN	Zip Code 37067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) EVP CHRO
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2022

**Transaction ID : A2022-473846**

Amount of Each Receipt this Period  
125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Hayes, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) EVP CHRO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 03 / 31 / 2022  
**Transaction ID : A2022-893829**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**B. Jalil, Sohail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Medical Center Drive  
 City Victoria State TX Zip Code 77904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt  
 03 / 18 / 2022  
**Transaction ID : A2022-473942**  
 Amount of Each Receipt this Period  
 38.46  
 Memo Item

**C. Johnson, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP CAO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt  
 03 / 15 / 2022  
**Transaction ID : A2022-473883**  
 Amount of Each Receipt this Period  
 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.96
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Johnson, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP CAO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893866**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Junkins, Curt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7201 East State Highway  
 City Corsicana State TX Zip Code 75110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Hospital CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473949**  
 Amount of Each Receipt this Period 57.69  
 Memo Item

**C. Leal, Jorge, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 East Saunders Avenue  
 City Laredo State TX Zip Code 78041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 288.50

Date of Receipt 03 / 04 / 2022  
**Transaction ID : A2022-473524**  
 Amount of Each Receipt this Period 57.70  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	177.89
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Leal, Jorge, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 East Saunders Avenue  
 City Laredo State TX Zip Code 78041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.20

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473977**  
 Amount of Each Receipt this Period 57.70  
 Memo Item

**B. Lomicka, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Strategic Analysis  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473854**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Lomicka, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Strategic Analysis  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893837**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	182.70
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Mason, Austen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2022  
**Transaction ID : A2022-473850**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**B. Mason, Austen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2022  
**Transaction ID : A2022-893833**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**C. Medley, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2022  
**Transaction ID : A2022-473917**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	312.51
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Medley, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893900**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Naegler, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2620 North Westwood Blvd  
 City Poplar Bluff State MO Zip Code 63901-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 03 / 11 / 2022  
**Transaction ID : A2022-473583**  
 Amount of Each Receipt this Period 77.00  
 Memo Item

**C. Naegler, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2620 North Westwood Blvd  
 City Poplar Bluff State MO Zip Code 63901-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 03 / 25 / 2022  
**Transaction ID : A2022-893816**  
 Amount of Each Receipt this Period 77.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	258.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Novak, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Information Systems  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473920**  
 Amount of Each Receipt this Period 63.00  
 Memo Item

**B. Novak, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Information Systems  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893903**  
 Amount of Each Receipt this Period 63.00  
 Memo Item

**C. Parsons, Brent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1515 Union Avenue  
 City Moberly State MO Zip Code 65270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 03 / 04 / 2022  
**Transaction ID : A2022-473521**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	167.67
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Parsons, Brent, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1515 Union Avenue

City Moberly	State MO	Zip Code 65270
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) Chief Exec Officer (CEO)
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2022

**Transaction ID : A2022-473974**

Amount of Each Receipt this Period  
41.67

Memo Item

**B. Peters, Sherrill, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4000 Meridian Blvd

City Franklin	State TN	Zip Code 37067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) Sr Dir Clinical Risk
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2022

**Transaction ID : A2022-473844**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Peters, Sherrill, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4000 Meridian Blvd

City Franklin	State TN	Zip Code 37067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) Sr Dir Clinical Risk
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2022

**Transaction ID : A2022-893827**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	141.67
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Pickard, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP Corporate Taxation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473847**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Pickard, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP Corporate Taxation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893830**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Reyes, Rogelio, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 East Saunders Avenue  
 City Laredo State TX Zip Code 78041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 03 / 04 / 2022  
**Transaction ID : A2022-473525**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	166.67
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Reyes, Rogelio, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 East Saunders Avenue  
 City Laredo State TX Zip Code 78041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473978**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Schneider, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2520 E. Dupont Rd  
 City Fort Wayne State IN Zip Code 46825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473932**  
 Amount of Each Receipt this Period 38.46  
 Memo Item

**C. Schrupp, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP Chief Purch Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 288.50

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473913**  
 Amount of Each Receipt this Period 57.70  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	137.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Schrupp, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP Chief Purch Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.20

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893896**  
 Amount of Each Receipt this Period 57.70  
 Memo Item

**B. Simon, Lynn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) President Clin Ops & CMO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1041.65

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473852**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Simon, Lynn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) President Clin Ops & CMO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893835**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	474.36
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Stockton, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473889**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**B. Stockton, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Regional President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893872**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**C. Stockton, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6201 North Suncoast Blvd  
 City Crystal River State FL Zip Code 34428-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bravera Health - Seven Rivers Occupation (for Individual) Chief Exec Officer (CEO)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 03 / 25 / 2022  
**Transaction ID : A2022-893811**  
 Amount of Each Receipt this Period 38.46  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	248.46
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Summar, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Revenue Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473864**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Summar, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) VP Revenue Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2022  
**Transaction ID : A2022-893847**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Tefeteller, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1730 Brian Grant Court  
 City Downers Grove State IL Zip Code 60516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Market CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 03 / 04 / 2022  
**Transaction ID : A2022-473571**  
 Amount of Each Receipt this Period 76.92  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	201.92
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Teffeteller, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1730 Brian Grant Court  
 City Downers Grove State IL Zip Code 60516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) Market CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 03 / 18 / 2022  
**Transaction ID : A2022-473973**  
 Amount of Each Receipt this Period 76.92  
 Memo Item

**B. White, Tammy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1030 River Oak Dr.  
 City Flowood State MS Zip Code 39232-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Merit Health River Oaks Occupation (for Individual) Chief Fin Officer (CFO)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 03 / 25 / 2022  
**Transaction ID : A2022-893814**  
 Amount of Each Receipt this Period 38.46  
 Memo Item

**C. Witte, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 Meridian Blvd  
 City Franklin State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHSPSC Occupation (for Individual) SVP Corp Compl & Priv Off  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 15 / 2022  
**Transaction ID : A2022-473843**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	177.88
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 30
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Witte, Sandra, , ,

Mailing Address 4000 Meridian Blvd

City Franklin	State TN	Zip Code 37067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHSPSC	Occupation (for Individual) SVP Corp Compl & Priv Off
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2022

**Transaction ID : A2022-893826**

Amount of Each Receipt this Period  
62.50

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	62.50
<b>TOTAL</b> This Period (last page this line number only).....	4273.29

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Elizabeth Pannill Fletcher for Congress**

Mailing Address 3262 Westheimer Road #636

City Houston State TX Zip Code 77098

Purpose of Disbursement Contribution

Category/Type

Candidate Name

**Pannill Fletcher, Elizabeth, , ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: TX District: 07

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B812882**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of John Thune**

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement Contribution

Category/Type

Candidate Name

**Thune, John, , ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: SD District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B812883**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Haley Stevens for Congress**

Mailing Address 33717 Woodward Ave #539

City Birmingham State MI Zip Code 48009

Purpose of Disbursement Contribution

Category/Type

Candidate Name

**Stevens, Haley, , ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: MI District: 11

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B812886**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)**

**A. Vern Buchanan for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement Contribution  
Candidate Name Buchanan, Vernon, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District: 16

Date of Disbursement 03 / 08 / 2022

FEC Identification Number C00412759  
Transaction ID : B812884  
Amount of Each Disbursement this Period 5000.00

Category/Type 011

Memo Item

**B. Vern Buchanan for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement Contribution  
Candidate Name Buchanan, Vernon, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District: 16

Date of Disbursement 03 / 08 / 2022

FEC Identification Number C00412759  
Transaction ID : B812885  
Amount of Each Disbursement this Period 5000.00

Category/Type 011

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement / /

FEC Identification Number C

Amount of Each Disbursement this Period

Category/Type

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

### A. AzHHA PAC

Mailing Address 2800 North Central Ave. #1450

City  
Phoenix

State  
AZ

Zip Code  
85004

Purpose of Disbursement  
State PAC

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	2

FEC Identification Number

Transaction ID : B812622

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### B. Chuck Hall for State Senate 2022

Mailing Address PO BOX 1233

City  
Guthrie

State  
OK

Zip Code  
73044

Purpose of Disbursement  
P-2022 State Senate 20 OK

Category/  
Type

Candidate Name

Hall, Chuck, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

State: OK District: 20

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	2

FEC Identification Number

Transaction ID : B809307

Amount of Each Disbursement this Period

Void check originally dated 1/19/22

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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