PAGE 1 / 38

**FEC** 

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3A	For (	Other Than An A	Authorized	I Commit	ttee		Office Use	Only	
NAME OF COMMITTEE (in f		E OR PRINT ▼		mple: If typer the lines.	oing, type	12FE4M	15		
NATIONAL HEA	ALTH COR	RPORATION P	OLITICAI	L ACTIC	ON COMM	ITTEE			
ADDRESS (number and ▼		O. BOX 1398							
Check if diffe than previous reported. (AC	ly M	URFREESBORO				TN	37130		
2. FEC IDENTIFICA	ATION NUMBI	ER ▼	CITY 🛦			STATE <b></b>	Z	IP CODE	<b>A</b>
C C00153445		3	3. IS THIS REPORT		NEW (N) OR	X AI	MENDED .)		
4. TYPE OF REP (Choose One)  (a) Quarterly Rep		D) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) Jun 20 (M6)	Sep	20 (M8) 20 (M9)	(Noi Yea De (Noi	v 20 (M11) n-Election r Only) c 20 (M12) n-Election r Only)
July 15	Report (Q1)	(c) 12-Day  PRE-Election		Primary (12	Jul 20 (M7) 2P)	Oct General	20 (M10) (12G)	-	n 31 (YE) noff (12R)
October		Report for th		Convention	(12C)	Special	(12S)		
January 3	Report (Q3) 31 Report (YE)	EI	ection on	M = M	/ D   D   /	Y   Y   Y   Y   Y		in the State of	
Year Only	lon-election /) (MY)	(d) 30-Day POST-Election Report for the		General (3	0G)	Runoff (	30R)	Spe	ecial (30S)
Terminatio (TER)	on Report	El	ection on	M = M	/ D = D /	Y . Y . Y . Y		in the State of	
5. Covering Period	01 /	01 / 20	21	through	M M M	30	2021		
I certify that I have example or Print Name of	SI	eport and to the bes helly, Tim, , ,	st of my know	wledge and	d belief it is tro	ue, correct ar	d complete	ł.	
Signature of Treasurer	Shelly, Tim	,,,		[Electronica	illy Filed] [	Date 10	M / 18		021
NOTE: Submission of fa	ulse, erroneous,	or incomplete inform	nation may su	bject the pe	erson signing t	his Report to	the penalties	s of 52 U.S	S.C. § 3010
Office Use								FORM ev. 05/2016	3X

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>3</b> .	(a) Cash on Hand January 1, 2021		255714.99
	(b) Cash on Hand at Beginning of Reporting Period	255714.99	
	(c) Total Receipts (from Line 19)	45074.99	45074.99
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	300789.98	300789.98
·.	Total Disbursements (from Line 31)	18776.00	18776.00
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	282013.98	282013.98
	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

#### 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:		06 30 2021				
	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)	23086.80	23086.80				
	(ii) Unitemized(iii) TOTAL (add	8221.26	8221.26				
	Lines 11(a)(i) and (ii)	31308.06	31308.06				
	(b) Political Party Committees	0.00	0.00				
	(c) Other Political Committees (such as PACs)	0.00	0.00				
	11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)▶	31308.06	31308.06				
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00				
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
	to Federal Candidates and Other Political Committees	0.00	0.00				
	Other Federal Receipts (Dividends, Interest, etc.)	13766.93	13766.93				
	(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))▶	45074.99	45074.99				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	45074.99	45074.99				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

Total This Period	Calendar Year-to-Date
0.00	0.00
0.00	0.00
0.00	0.00
200	0.00
0.00	0.00
0.00	0.00
18500.00	18500.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
	1 1 1 1 1 1 1 1
0.00	0.00
0.00	0.00
276.00	276.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
18776.00	18776.00
18776.00	18776.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0

#### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 31308.06 31308.06 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 31308.06 31308.06 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 0.00 0.00 (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 0.00 0.00 (subtract Line 37 from Line 36) ......

					PAGE		6	OF	38	
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any persone name and address of any political committee t	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION COM	MMITTEE
Full Name of Individual (Last, First, Middle In Anderson, Zach, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 2403 Battlefield Pkwy.	06 22 / Y Y Y Y Y Y	
City	State Zip Code	Transaction ID : SA11AI.4265
Ft. Oglethorpe	GA 30742	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	240.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	Administrator	_
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	240.00	
Full Name of Individual (Last, First, Middle In Bartlett, Tyler, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 2230 Ashley Crossing Dr.		06 22 2021
City	State Zip Code	Transaction ID : SA11AI.4266
Charleston	SC 29414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	240.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
Full Name of Individual (Last, First, Middle In Bidwell, Greg, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 420 N. University St.		06 22 2021
City	State Zip Code	Transaction ID : SA11AI.4153
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer (for Individual) NHC	Occupation (for Individual) SVP-Central	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify)	700.00	
	7 7 7	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1180.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER:					PAGE		7	OF	38	
(check only one)										
	X	11a		11b		11c		12	2	
		13		14		15		16	6	17

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pe the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPC	PRATION POLITICAL ACTION CO	MMITTEE					
Full Name of Individual (Last, First, Middle Bidwell, Scott, , ,  Mailing Address 993 E. College St.	Initial) or Full Organization Name	Date of Receipt					
		06 22 2021					
City							
Pulaski	Pulaski TN 38478						
FEC ID number of contributing federal political committee.	C	280.00					
Name of Employer (for Individual) NHC	Occupation (for Individual)  SVP-South Central	Memo Item					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  280.00						
Full Name of Individual (Last, First, Middle Bryant, Jennifer, , ,  Mailing Address 100 E. Vine St.	Initial) or Full Organization Name	Date of Receipt					
	06 22 2021						
City	State Zip Code TN 37130	Transaction ID : SA11AI.4267					
Murfreesboro	TN 37130	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů						
Name of Employer (for Individual) NHC	Occupation (for Individual) DON	Memo Item					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00						
Full Name of Individual (Last, First, Middle <b>Bumgardaner</b> , Kelley, , ,	Initial) or Full Organization Name	Date of Receipt					
Mailing Address 100 E. Vine St.		06 22 2021					
City	State Zip Code	Transaction ID : SA11AI.4268					
Murfreesboro	TN 37130	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	240.00					
Name of Employer (for Individual) NHC	Occupation (for Individual) DON	Memo Item					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify)	240.00						
SUBTOTAL of Receipts This Page (optional)		760.00					
TOTAL This Period (last page this line numb	per only)						

					PAGE		8	OF	38	
(check only one)										
	X	11a		11b		11c		12		
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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to					
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION COM	MITTEE				
Full Name of Individual (Last, First, Middle In Burgess, Ernest, , ,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 7097 Franklin Rd.		03 31 2021				
City	State Zip Code	Transaction ID : SA11AI.4120				
Murfreesboro	TN 37128	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
NHC	Board Member					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	500.00					
Full Name of Individual (Last, First, Middle In Burwin, Allison, , ,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.	06 22 2021					
City	State Zip Code					
Murfreesboro	TN 37130	Transaction ID : SA11AI.4246  Amount of Each Receipt this Period				
	555	Amount of Lacif necelpt this relied				
FEC ID number of contributing federal political committee.	C	315.00				
Name of Employer (for Individual) NHC	Occupation (for Individual) SVP-Northeast	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00					
Full Name of Individual (Last, First, Middle In Butler, Addison, , ,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.		06 22 2021				
City	State Zip Code	Transaction ID : SA11AI.4269				
Murfreesboro	TN 37130	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	210.00				
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	210.00					
SUBTOTAL of Receipts This Page (optional)	·····	1025.00				
TOTAL This Period (last page this line number	only)					

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

FOR LINE NUMBER:					PAGE		9	OF	38	
(C	(check only one)									
	X	11a		11b		11c		12		
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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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coggin, Robert, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4239 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Director of Safety NHC Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Colley, Jaine, , , Date of Receipt Mailing Address 1321 Cedar Ln. 06 2021 City State Zip Code Transaction ID: SA11AI.4270 Tullahoma TN 37388 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼		240.00	
Full Name of Individual (Last, First, Middle In Crotts, Jeanie, , ,  Mailing Address 100 E. Vine St.	Date of Receipt  O6 22 2021		
City	State	Zip Code	Transaction ID : SA11AI.4248
Murfreesboro	TN	37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC	Occupa Adminis	ation (for Individual)	320.00 Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 320.00	
SUBTOTAL of Receipts This Page (optional)			960.00

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

Name of Employer (for Individual)

General

SUBTOTAL of Receipts This Page (optional).....

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

NHC

C.

Receipt For:

Primary

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

FOR LINE NUMBER:						PAGE	•	10	OF		38
(0	(check only one)										
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		13		14		15		16			17

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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Kathryn, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4271 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Administrator NHC 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.** Davis, Samantha, , , Date of Receipt Mailing Address 100 E. Vine St. 06 2021 City State Zip Code Transaction ID: SA11AI.4272 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee. Memo Item

Occupation (for Individual)

Administrator

Aggregate Year-to-Date ▼

Other (specify) ▼		240.00	
Full Name of Individual (Last, First, Middle In Dean, Malcolm, , ,  Mailing Address 100 E. Vine St.	itial) or Full Orga	anization Name	Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA11AI.4273  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		210.00
Name of Employer (for Individual) NHC	Occupa Admini	ation (for Individual) strator	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 210.00	
			690.00

		LINE	PAGE	•	11	OF	38		
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		13	14		15		16	6	17

	Statements may not be sold or used by any pentent he name and address of any political committee	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION CC	DMMITTEE
Full Name of Individual (Last, First, Middle I Dodson, Vicki, , ,  Mailing Address 100 E. Vine St.  City	State Zip Code	Date of Receipt  06 22 2021  Transaction ID : SA11AI.4234
Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For:  □ Primary □ General  Other (specify) ▼	TN 37130  C  Occupation (for Individual)  VP  Aggregate Year-to-Date ▼  800.00	Amount of Each Receipt this Period  800.00  Memo Item
Full Name of Individual (Last, First, Middle I Flatt, Andy, , ,  Mailing Address 100 E. Vine St.  City  Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary General Other (specify) ▼	or Full Organization Name    State	Date of Receipt  06
Full Name of Individual (Last, First, Middle I Flatt, Steve, , ,  Mailing Address 100 E. Vine St.  City Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For: Primary General Other (specify)	State Zip Code TN 37130  C  Occupation (for Individual) CEO  Aggregate Year-to-Date   400.00	Date of Receipt  Mo6 22 2021  Transaction ID: SA11AI.4241  Amount of Each Receipt this Period  400.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	·····	1600.00
TOTAL This Period (last page this line number	er only)	

		LINE	PAGE	 12	OF	38			
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16		17

	statements may not be sold or used by any perse name and address of any political committee to							
NAME OF COMMITTEE (In Full)	ATION POLITICAL ACTION COM							
Full Name of Individual (Last, First, Middle Ini Garrity, Michelle, , ,  Mailing Address 100 E. Vine St.	itial) or Full Organization Name	Date of Receipt						
		06 22 2021						
City	State Zip Code	Transaction ID : SA11AI.4254						
Murfreesboro	TN 37130	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	245.00							
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item						
NHC	Administrator	_						
Receipt For:	Aggregate Year-to-Date ▼							
Primary General  Other (specify) ▼	245.00							
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt						
Mailing Address 608 E. 8th Ave.		06 22 2021						
City	State Zip Code	Transaction ID : SA11Al.4255						
Springfield	Springfield TN 37172							
FEC ID number of contributing federal political committee.	C	280.00						
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  280.00							
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt						
Mailing Address 139 Chestnut Oak		06 22 2021						
City	State Zip Code	Transaction ID : SA11AI.4100						
Smithville	TN 37166	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	240.00						
Name of Employer (for Individual) NHC	Occupation (for Individual) Director of Government Relations	Memo Item						
Receipt For:	Aggregate Year-to-Date ▼	]						
Primary General Other (specify)	240.00							
SUBTOTAL of Receipts This Page (optional)	<b></b>	765.00						
TOTAL This Period (last page this line number	only)							

F	OR	LINE	PAGE	 13	OF	38			
(c	he	ck only	or	ne)					
	<b>X</b> 11a 11b						12		
		13		14		15	16		17

	ny information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORA	TION PO	LITICAL ACTION COM	MMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial Harbin, Holly, , , ,  Mailing Address 350 Austin Graybill Rd.	al) or Full Orga	anization Name	Date of Receipt  06 22 2021
	City	State	Zip Code	Transaction ID : SA11AI.4235
	North Augusta	SC	29860	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	800.00		
	Name of Employer (for Individual) NHC		ation (for Individual) istrator	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 800.00	
В.	Full Name of Individual (Last, First, Middle Initia Harris, Hunter, , ,  Mailing Address 500 Elmington Ave.	al) or Full Orga	anization Name	Date of Receipt
				06 22 2021
	City	State	Zip Code	Transaction ID : SA11AI.4274
	Nashville	TN	37205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		240.00
	Name of Employer (for Individual) NHC		ation (for Individual) nistrator	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 240.00	
<del>С</del> .	Full Name of Individual (Last, First, Middle Initia Hassan, Emil, , ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 100 E. Vine St.			03 31 2021
	City Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA11AI.4121  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) NHC	1 '	ation (for Individual) Member	Memo Item
	Receipt For:  Primary  General	Aggregate Ye	ear-to-Date ▼	
	Other (specify)	7	250.00	
H	SUBTOTAL of Receipts This Page (optional)		<u> </u>	1290.00
1 '	<b>TOTAL</b> This Period (last page this line number or	ııy)		

Name of Employer (for Individual)

NHC

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

FOR LINE NUMBER:						PAGE	. 1	14	OF		38
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16			17

Memo Item

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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hill, Daley, , , Date of Receipt Mailing Address 370 Old Shackle Island Rd. 2021 City State Zip Code Transaction ID: SA11AI.4263 TN Hendersonville 37075 Amount of Each Receipt this Period FEC ID number of contributing C 218.40 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 218.40 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hill, Heath, , , Date of Receipt Mailing Address 1501 E. Greenville St. 2021 City State Zip Code Transaction ID: SA11AI.4275 SC Anderson 29621 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee.

Receipt For:  Primary General	Aggregate Y	′ear-to-Date ▼	
Other (specify) ▼		240.00	
Full Name of Individual (Last, First, Middle Holder, Chuck, , ,  Mailing Address 304 Jacobs Hwy.	Initial) or Full Org	ganization Name	Date of Receipt  06 22 2021
City Clinton	State SC	Zip Code 29325	Transaction ID : SA11AI.4276  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		210.00
Name of Employer (for Individual) NHC	'	pation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	'ear-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional)			668.40

Occupation (for Individual)

Administrator

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

		LINE	PAGE	 15	OF	38			
(0	che	ck only							
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and ad	not be sold or used by any pedress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION PC	DLITICAL ACTION CO	MMITTEE				
Full Name of Individual (Last, First, Middle In Holland, Ben, , ,  Mailing Address 928 Old Smithville Rd.	nitial) or Full Orç	ganization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	Zip Code	Transaction ID : SA11AI.4363					
McMinnville	TN	37110	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	federal political committee.						
Name of Employer (for Individual) NHC	oation (for Individual) nistrator	Memo Item					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 230.00					
Full Name of Individual (Last, First, Middle I Hubbard, Debbie, , , Mailing Address 2300 Pavillion Dr.	nitial) or Full Org	ganization Name	Date of Receipt				
City	State	Zip Code	06 22 2021				
Kingsport	TN	37660	Transaction ID : SA11AI.4277  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		240.00				
Name of Employer (for Individual) NHC		pation (for Individual) nistrator	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 240.00					
Full Name of Individual (Last, First, Middle II)  C. Jackson, Scott, , ,	nitial) or Full Orç	ganization Name	Date of Receipt				
Mailing Address 100 E. Vine St.			06 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA11AI.4278				
FEC ID number of contributing federal political committee.	С	01100	Amount of Each Receipt this Period  240.00				
Name of Employer (for Individual) NHC	NHC Administrator						
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 240.00					
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	710.00				
TOTAL This Period (last page this line numbe	r only)	<u> </u>					

		LINE	PAGE	_ ′	16	OF	38			
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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION CC	DMMITTEE
Full Name of Individual (Last, First, Middle Ir Johnson, Doran, , ,  Mailing Address 100 E. Vine St.  City  Murfreesboro  FEC ID number of contributing federal political committee.	State Zip Code TN 37130	Date of Receipt  06 22 2021  Transaction ID : SA11Al.4236  Amount of Each Receipt this Period  400.00
Name of Employer (for Individual)  NHC  Receipt For:  Primary General  Other (specify) ▼	Memo Item	
Full Name of Individual (Last, First, Middle Ir Jones, Christina, , , Mailing Address 211 Cool Springs Blvd.  City Franklin	State Zip Code TN 37067	Date of Receipt  06 22 2021  Transaction ID : SA11AI.4256  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary General Other (specify) ▼	Occupation (for Individual) Assistant Administrator  Aggregate Year-to-Date   280.00	280.00  Memo Item
Full Name of Individual (Last, First, Middle In Lane, Karla, , ,  Mailing Address 122 Cavette Hill Ln.  City Knoxville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary General Other (specify)	State Zip Code TN 37934  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date  240.00	Date of Receipt  M M M / 22 / 2021  Transaction ID : SA11Al.4279  Amount of Each Receipt this Period  240.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		920.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER:						PAGE	 17	OF	38
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		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION C	COMMITTEE
Full Name of Individual (Last, First, Middle I Lutsenko, Yuriy, , , Mailing Address 3025 Fernbrook Ln.  City Nashville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For:  Primary General Other (specify)	State Zip Code TN 37214  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date ▼	Date of Receipt  M M M
Full Name of Individual (Last, First, Middle I  Manley, Michael, , ,  Mailing Address 2993 Sunset Blvd.  City  West Columbia  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary  General  Other (specify)	State Zip Code SC 29169  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date  280.00	Date of Receipt  M M
Full Name of Individual (Last, First, Middle I McCreary, Josh, , ,  Mailing Address 100 E. Vine St.  City  Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For:  Primary  General  Other (specify)	State Zip Code TN 37130  C  Occupation (for Individual) General Counsel  Aggregate Year-to-Date  240.00	Date of Receipt  M M M / 22 / 2021  Transaction ID: SA11AI.4281  Amount of Each Receipt this Period  240.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		730.00
TOTAL This Period (last page this line number	er only)	<b>•</b>

Name of Employer (for Individual)

General

NHC

C.

Receipt For:

Primary

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

FOR LINE NUMBER:							PAGE	 18	OF	38
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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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McIntosh, Bubba, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4242 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) SVP-Development NHC Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McKamey, Darrin, , , Date of Receipt Mailing Address 374 Brink St. 06 2021 City State Zip Code Transaction ID: SA11AI.4282 TN Lawrenceburg 38464 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee. Memo Item

Occupation (for Individual)

Administrator

Aggregate Year-to-Date ▼

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

Other (specify) ▼		240.00	
Full Name of Individual (Last, First, Middle In McKenzie, Dan, , ,  Mailing Address 3916 Boyds Bridge Pike  City	nitial) or Full On	rganization Name	Date of Receipt    M
Knoxville  FEC ID number of contributing federal political committee.	TN	37914	Amount of Each Receipt this Period  260.00
Name of Employer (for Individual)  NHC  Receipt For:  Primary General  Other (specify)	Adm	upation (for Individual) inistrator  Year-to-Date ▼  260.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			900.00

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	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION CO	MMITTEE
Full Name of Individual (Last, First, Middle In Michel, Anna, , ,  Mailing Address 211 Davis Dr.  City West Plains  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For:  Primary General Other (specify)	State Zip Code 65775  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date   240.00	Date of Receipt  Mo6 22 2021  Transaction ID: SA11AI.4283  Amount of Each Receipt this Period  240.00  Memo Item
Full Name of Individual (Last, First, Middle In Miner, Karyn, , , Mailing Address 100 E. Vine St.  City  Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary  General  Other (specify)	State Zip Code 37130  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date   280.00	Date of Receipt  M M / 22 2021  Transaction ID: SA11Al.4258  Amount of Each Receipt this Period  280.00  Memo Item
Full Name of Individual (Last, First, Middle In Moore, Todd, , , Mailing Address 211 Cool Springs Blvd.  City Franklin  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For:  Primary General Other (specify)	State Zip Code TN 37067  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date   240.00	Date of Receipt  Mod / 22 / 2021  Transaction ID : SA11AI.4284  Amount of Each Receipt this Period  240.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	760.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER:						PAGE	2	20 OF	38
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and ad	dress of any political committee					
angle NATIONAL HEALTH CORPC	RATION PO	DLITICAL ACTION CO	DMMITTEE				
Full Name of Individual (Last, First, Middle Moorhouse, Brad, , ,  Mailing Address 1501 E. Greenville St.	Initial) or Full Org	ganization Name	Date of Receipt				
Maining Address 1501 E. Greenville St.			06 22 2021				
City	State	Zip Code	Transaction ID : SA11AI.4285				
Anderson	SC	29621	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		210.00				
Name of Employer (for Individual) NHC		pation (for Individual) South Carolina	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 210.00					
Full Name of Individual (Last, First, Middle Moorhouse, Bryan, , ,	Initial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 1305 Boiling Springs Rd.			06 22 2021				
City	State SC	Zip Code	Transaction ID : SA11AI.4286				
Greer  FEC ID number of contributing federal political committee.	29650	Amount of Each Receipt this Period					
Name of Employer (for Individual) NHC		pation (for Individual) inistrator	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 240.00					
Full Name of Individual (Last, First, Middle . Nason, Jay, , ,	Initial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 100 E. Vine St.			06 22 2021				
City Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA11AI.4243  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		350.00				
Name of Employer (for Individual) NHC		pation (for Individual) Eastern	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 350.00					
SUBTOTAL of Receipts This Page (optional)	'		800.00				

F	OR	LINE	PAGE	2	21	OF	38			
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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any pedress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPO	RATION PC	DLITICAL ACTION CC	MMITTEE
Full Name of Individual (Last, First, Middle Norris, Chelsey, , ,  Mailing Address 216 Fairground St.	Initial) or Full Org	anization Name	Date of Receipt
City	State	Zip Code	06 22 2021
Franklin	TN 37064		Transaction ID : SA11AI.4287  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		240.00
Name of Employer (for Individual) NHC		ation (for Individual) nistrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼			
Full Name of Individual (Last, First, Middle  Parenti, Karen, , ,  Mailing Address 140 Thorne Blvd.	Initial) or Full Org	anization Name	Date of Receipt
City Gallatin	State TN	Zip Code 37066	Transaction ID : SA11AI.4288  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		240.00
Name of Employer (for Individual) NHC		oation (for Individual) onal Nurse	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle Peimann, Seth, , ,	Initial) or Full Org	anization Name	Date of Receipt
Mailing Address 35 Sugar Maple Ln.			06 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City St. Charles	State MO	Zip Code 63303	Transaction ID : SA11AI.4289
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period  240.00
Name of Employer (for Individual) NHC	'	pation (for Individual) histrator	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional).		·····	720.00
TOTAL This Period (last page this line numb	er only)		

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

					PAGE	2	22	OF	38	
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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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Perry, Kellie, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4249 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 320.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pudlowski, Jackie, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City Zip Code State Transaction ID: SA11AI.4290 Murfreesboro ΤN 37130 Amount of Each Receipt this Period FEC ID number of contributing C 240.00

Name of Employer (for Individual)  NHC  Occupation (for Individual)  Administrator	lemo Item
Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  240.00	
Mailing Address 2700 Parkwood Ave.  Mailing Address 2700 Parkwood Ave.	f Receipt
Chattanana TNI 07404	saction ID : SA11AI.4291
FEC ID number of contributing federal political committee.	t of Each Receipt this Period 240.00  lemo Item
SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	7 7 7
	FEC Schedule A (Form 3X) Rev. 06/20

				PAGE	2	23	OF	38		
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Any information copied from such Reports and or for commercial purposes, other than using t			
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPO	RATION PC	DLITICAL ACTION CO	MMITTEE
Full Name of Individual (Last, First, Middle Rector, Mel, , ,  Mailing Address 100 E. Vine St.	Initial) or Full Orç	ganization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.4244
Murfreesboro	TN	37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		400.00
Name of Employer (for Individual) NHC		oation (for Individual) Missouri	Memo Item
Receipt For:  Primary General  Other (specify) ▼	'ear-to-Date ▼ 400.00		
Full Name of Individual (Last, First, Middle Rumsey, Whitney, , , Mailing Address 101 Walnut Ln.	Initial) or Full Org	ganization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbia	Zip Code 38401	Transaction ID : SA11AI.4292  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		240.00
Name of Employer (for Individual) NHC		pation (for Individual) nistrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle Salyers, Marinda, , ,	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 1425 McFarland Ave.			06 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rossville	State GA	Zip Code 30741	Transaction ID : SA11AI.4293
FEC ID number of contributing federal political committee.	С	30741	Amount of Each Receipt this Period  240.00
Name of Employer (for Individual) NHC	pation (for Individual)	Memo Item	
Receipt For: Primary General Other (specify)	'ear-to-Date ▼ 240.00		
SUBTOTAL of Receipts This Page (optional).		·····	880.00
TOTAL This Period (last page this line number	er only)		

FOR LINE NUMBER:					PAGE	2	24	OF	38	
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	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION CON	MMITTEE
Full Name of Individual (Last, First, Middle In Sauer, David, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		06 22 2021
City Murfreesboro	State Zip Code TN 37130	Transaction ID : SA11AI.4264
	3/130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	218.40
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	218.40	
Full Name of Individual (Last, First, Middle In Sellars, Alex, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		06 22 2021
City	State Zip Code TN 37130	Transaction ID : SA11Al.4252
Murfreesboro	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	304.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00	
Full Name of Individual (Last, First, Middle In Sellars, Gideon, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 437 E. Cambridge Ave.		06 22 2021
City	State Zip Code	Transaction ID : SA11AI.4294
Greenwood	SC 29646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	240.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)		
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	762.40
TOTAL This Period (last page this line number	only)	

				PAGE	2	25	OF	38		
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Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION PO	LITICAL ACTION CO	MMITTEE
Full Name of Individual (Last, First, Middle In Sellars, Rick, , ,  Mailing Address 437 E. Cambridge Ave.	nitial) or Full Orga	anization Name	Date of Receipt  06 22 2021
City	State	Zip Code	Transaction ID : SA11AI.4295
Greenwood	SC	29646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		240.00
Name of Employer (for Individual) NHC	Occupa VP-AL	ation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	ar-to-Date ▼ 240.00		
Full Name of Individual (Last, First, Middle In Shearer, Jacob, , , Mailing Address 7601 Parklane Rd.	nitial) or Full Orga	anization Name	Date of Receipt  06 22 2021
City Columbia	State SC	Zip Code 29223	Transaction ID : SA11AI.4296
FEC ID number of contributing federal political committee.	C	ESEES	Amount of Each Receipt this Period  240.00
Name of Employer (for Individual) NHC		ation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle In Shearer, Rickie, , ,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 379 Pinehaven St.			06 22 Y Y Y Y Y
City	State SC	Zip Code	Transaction ID : SA11AI.4297
Laurens	30	29360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		240.00
Name of Employer (for Individual) NHC	Occupa Admini	ation (for Individual) strator	Memo Item
Receipt For: Primary General Other (specify)	ar-to-Date ▼ 240.00		
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	720.00
TOTAL This Period (last page this line number	r only)		

Gallatin

NHC

FEC ID number of contributing

Name of Employer (for Individual)

federal political committee.

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

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

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	X	11a		11b		11c		12		
		13		14		15		16		17

Amount of Each Receipt this Period

Memo Item

210.00

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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Shelley, Karin, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4247 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing C 360.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Shelly, Tim, , , Date of Receipt Mailing Address 140 Thorne Blvd. 06 2021 City State Zip Code Transaction ID: SA11AI.4298

37066

Occupation (for Individual)

TN

SUBTOTAL of Receipts This Page (optional).....

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

	NHC  Receipt For:  Primary General  Other (specify) ▼	SVP-M Aggregate Ye		
c.	Full Name of Individual (Last, First, Middle In Shelton, Joe, , ,  Mailing Address 308 Lake Sr.  City Somerville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary General Other (specify)	State TN	Zip Code 38068 ation (for Individual)	Date of Receipt  06

780.00

NHC

Receipt For:

Primary

Other (specify)

General

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

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

FOR LINE NUMBER:					PAGE	2	27	OF	38	
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	X	11a		11b		11c		12		
		13		14		15		16		17

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) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Shuford, Brad, , , Date of Receipt Mailing Address 809 E. Emerald Ave. 2021 City Zip Code State Transaction ID: SA11AI.4300 TN Knoxville 37917 Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator 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. Skafas, Beth, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4259 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing 280.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Smith, Jeff, , , Date of Receipt Mailing Address 100 E. Vine St. 22 2021 City Zip Code State Transaction ID: SA11AI.4301 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

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240.00

Treasurer

Aggregate Year-to-Date ▼

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		1.0
	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION COM	MMITTEE
Full Name of Individual (Last, First, Middle In Stallings, Keely, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 300 Hospital St.		06 22 2021
City Moulton	State Zip Code AL 35650	Transaction ID : SA11AI.4302  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	240.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
Full Name of Individual (Last, First, Middle In Stephens, Joan, , ,  Mailing Address 245 North St.	nitial) or Full Organization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bristol	State Zip Code VA 24201	Transaction ID : SA11AI.4303  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	240.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
Full Name of Individual (Last, First, Middle In Stoner, Jeremy, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 815 S. Walnut Ave.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cookeville	State Zip Code TN 38501	Transaction ID : SA11AI.4250  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	320.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  320.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	800.00
TOTAL This Period (last page this line number	r only).	

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	Statements may not be sold or used by any perse name and address of any political committee t	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POLITICAL ACTION COM	MMITTEE
Full Name of Individual (Last, First, Middle In Taylor, Susan, , ,  Mailing Address 100 E. Vine St.  City  Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For:  Primary General Other (specify)	State Zip Code TN 37130  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date  256.00	Date of Receipt  06
Full Name of Individual (Last, First, Middle In Ussery, Marshall, , ,  Mailing Address 8353 Hwy. 100  City  Nashville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary  General  Other (specify)	State Zip Code TN 37221  C  Occupation (for Individual) Administrator  Aggregate Year-to-Date   400.00	Date of Receipt  M M M / D D / 2021  Transaction ID: SA11AI.4245  Amount of Each Receipt this Period  400.00  Memo Item
Full Name of Individual (Last, First, Middle In Ussery, Mike, , , Mailing Address 100 E. Vine St.  City Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  NHC  Receipt For: Primary General Other (specify)	State Zip Code TN 37130  C  Occupation (for Individual) President  Aggregate Year-to-Date  800.00	Date of Receipt  06
SUBTOTAL of Receipts This Page (optional)	<b></b>	1456.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION PC	DLITICAL ACTION CO	MMITTEE
Full Name of Individual (Last, First, Middle II) Vincent, Brandon, , ,  Mailing Address 812 N. Charlotte St.	nitial) or Full Org	ganization Name	Date of Receipt
City	04-4-	7in Code	06 22 2021
City Dickson	State TN	Zip Code 37055	Transaction ID : SA11AI.4304
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period  240.00
Name of Employer (for Individual) NHC		oation (for Individual) nistrator	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 240.00	
Full Name of Individual (Last, First, Middle II  Waddell, Robert, , ,  Mailing Address 100 E. Vine St.	nitial) or Full Org	ganization Name	Date of Receipt  06 22 2021
City Murfreesboro	State	Zip Code 37130	Transaction ID : SA11AI.4251
FEC ID number of contributing federal political committee.	C	0.100	Amount of Each Receipt this Period  320.00
Name of Employer (for Individual) NHC		pation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 320.00	
Full Name of Individual (Last, First, Middle In West, Chris, , ,	nitial) or Full Org	ganization Name	Date of Receipt
Mailing Address 100 E. Vine St.			06 / 22 / 2021
City Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA11AI.4238
FEC ID number of contributing federal political committee.	C	07130	Amount of Each Receipt this Period  600.00
Name of Employer (for Individual) NHC		pation (for Individual) uman Resources	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	1160.00
TOTAL This Period (last page this line number	r only)		

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

F	OR	LINE	NU	MBER	:	PAGE	3	31	OF	38
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE    Full Name of Individual (Last, First, Middle Initial) or Full Organization Name   Date of Receipt	or for commercial purposes, other than usin	g the name and address of any political committee	
Date of Receipt	NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORP	ORATION POLITICAL ACTION CO	MMITTEE
State   Zip Code   TN   37916   Transaction ID : SA11AL4260   Amount of Each Receipt this Period   260.00	Wrather, Tim, , ,	le Initial) or Full Organization Name	- · · · · · · · · · · · · · · · · · · ·
Amount of Each Receipt this Period   280.00			
FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC City Name of Employer (for Individual) NHC City Primary General Other (specify) ▼ City Primary General Other (specify) ▼ Cocupation (for Individual) NHC Name of Individual) NHC Name of Individual (Last, First, Middle Initial) or Full Organization Name  Date of Receipt  Tanasaction ID: SA11AL4305  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Individual (Last, First, Middle Initial) or Full Organization Name  Aggregate Year-to-Date ▼ Other (specify) ▼  State Zip Code  Tanasaction ID: SA11AL4305  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Aggregate Year-to-Date ▼  Date of Receipt  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  Memo Item  Aggregate Year-to-Date ▼  Primary General Other (specify)  Aggregate Year-to-Date ▼  Primary General Other (specify)  Aggregate Year-to-Date ▼  Primary General Other (specify)  Aggregate Year-to-Date ▼	•		
Receipt For:		114 3/310	Amount of Each Receipt this Period
NHC Receipt For:  Primary General Other (specify) ▼ 280.00  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Wright, James, , Mailing Address 1000 St. Luke Dr.  City State Zip Code Transaction ID: SA11AL4305  Aggregate Year-to-Date ▼  Transaction ID: SA11AL4305  Amount of Each Receipt this Period  Memo Item  Mailing Address  City State Zip Code  Transaction ID: SA11AL4305  Amount of Each Receipt this Period  Memo Item  Date of Receipt  Transaction ID: SA11AL4305  Amount of Each Receipt this Period  Primary General Other (specify) ▼ 210.00  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  Memo Item  Memo Item  Memo Item  Memo Item  Memo Item  Memo Item	•	C	280.00
Receipt For:   Primary   General   Other (specify)   Other (specify)   Primary   General   Other (specify)   Occupation (for Individual)   Occupation (for Individual)   Other (specify)   Occupation (for Individual)   Occupation (for Individual)   Other (specify)   Occupation (for Individual)   Occupation (for Individual)   Other (specify)   Other (specify)   Occupation (for Individual)   Occupation (for Individual)   Occupation (for Individual)   Other (specify)   Other (specify)   Other (specify)   Other (specify)   Occupation (for Individual)   Occupation (for Indiv	Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Primary General Other (specify) ▼ 280.00  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Administrator	
Other (specify) ▼  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Wright, James, , ,  Mailing Address 1000 St. Luke Dr.  City State Zip Code Transaction ID : SA11AL4305  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Mailing Address  City State Zip Code  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  City State Zip Code  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AL4305  Amount of Each Receipt this Period  Memo Item  Date of Receipt  Aggregate Year-to-Date ▼  Other (specify) ▼  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Other (specify)		Aggregate Year-to-Date ▼	
Mailing Address 1000 St. Luke Dr.  City  Nashville  TN  State  Tip Code  TN  37205  Amount of Each Receipt this Period  EC  Primary  Other (specify) ▼  Mailing Address  City  FEC ID number of contributing federal political committee.  City  State  Zip Code  Transaction ID: SA11Al.4305  Amount of Each Receipt this Period  Administrator  Aggregate Year-to-Date ▼  Primary  General  Other (specify) ▼  State  Zip Code  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.4305  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.4305  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.4305  Amount of Each Receipt this Period  Date of Receipt  Memo Item  Amount of Each Receipt this Period  C  Amount of Each Receipt this Period  C  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Memo Item  Memo Item  Memo Item  Aggregate Year-to-Date ▼  Primary  General  Other (specify)  Aggregate Year-to-Date ▼  Primary  General  Other (specify)  Aggregate Year-to-Date ▼  Primary  General  Other (specify)  Aggregate Year-to-Date ▼		280.00	
City Nashville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC Receipt For: Primary General Other (specify)  Malling Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Administrator  Receipt For: Primary General Other (specify)  State Zip Code  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date ▼  Primary General Other (specify)  Subtotal of Receipts This Page (optional)		le Initial) or Full Organization Name	Date of Receipt
Nashville  TN 37205  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Date of Receipt  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  M=M / D=D / Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y=Y			
FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NHC Receipt For: Primary General Other (specify)    Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  City State Zip Code  Amount of Each Receipt this Period  Aggregate Year-to-Date   Amount of Each Receipt this Period  Aggregate Year-to-Date   Primary General Other (specify)  Subtotal of Receipts This Page (optional)	City		Transaction ID : SA11AI.4305
Name of Employer (for Individual)   Name of Employer (for Individual)   Name of Employer (for Individual)   Administrator   Aggregate Year-to-Date ▼	Nashville	TN   37205	Amount of Each Receipt this Period
NHC Receipt For:	•	C	210.00
Primary General Other (specify) ▼  210.00  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date ▼  Substotal of Receipts This Page (optional)	NHC		Memo Item
Other (specify) ▼  Pull 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 federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General  Other (specify)  Aggregate Year-to-Date ▼  Substotal of Receipts This Page (optional)		Aggregate Year-to-Date ▼	
Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional)  Page of Receipt  Amount of Each Receipt this Period		210.00	
Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)  Aggregate Year-to-Date ▼  SUBTOTAL of Receipts This Page (optional)	Full Name of Individual (Last, First, Midd	le Initial) or Full Organization Name	Date of Receipt
Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date   SUBTOTAL of Receipts This Page (optional).	Mailing Address		┥
Name of Employer (for Individual)   Occupation (for Individual)   Memo Item	City	State Zip Code	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional)  Aggregate Year-to-Date   490.00	· · · · · · · · · · · · · · · · · · ·	C	
Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional)	Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
SUBTUTAL of neceipts This Page (optional)	Primary General	Aggregate Year-to-Date ▼	
	SUBTOTAL of Receipts This Page (optional	al)	490.00
			23086.80

	F	OR	LINE	NU	MBER	:	PAGE	. (	32	OF		38
Use separate schedule(s) for each category of the	(0	he	ck only	or	ne)							
Detailed Summary Page			11a		11b		11c		12			
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Ang or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may name and add	not be sold or used by any per lress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORA	TION PO	LITICAL ACTION COI	MMITTEE
Α.	Full Name of Individual (Last, First, Middle Initia National Health Corporation Missouri Fede			Date of Receipt
	Mailing Address PO Box 1398			01 31 2021
	City Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA17.4420  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		13734.40
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item  Refund-Close Account
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 13734.40	
В.	Full Name of Individual (Last, First, Middle Initia	l) or Full Orga	anization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		Amount of Each recorpt this Feriod
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼	
<u>С</u> .	Full Name of Individual (Last, First, Middle Initia	l) or Full Orga	anization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		Amount of Lacif Necept tills i endu
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼	
SI	JBTOTAL of Receipts This Page (optional)			13734.40
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Form/Schedule: SA17 Transaction ID: SA17.4420

National Health Corporation Missouri Federal Committee (Missouri PAC) was established exclusively by disbursements from National Health Corporation Political Action Committee (NHCPAC) to make contributions to state candidates/committees in Missouri. NHCPAC made transfers totalling \$25,181.99 to Missouri PAC. These were disclosed in NHCPAC's Mid-Year 2019 Report (\$10,181.99) and the July Quarterly 2020 Report (\$15,000). The amount disclosed on this report (\$13,734.40) is a refund of the remaining balance from Missouri PAC to NHCPAC, as Missouri PAC has been closed. Please let me know if you need further information. Thank you.

Form/Schedule: Transaction ID:

#### S П

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 34 OF 38					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	ly one)					
	for each category of the Detailed Summary Page	21b	22 🗶 23 26 27					
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NAME OF COMMITTEE (In Full)	and address of any pointed	55.7	The second secon					
NATIONAL HEALTH CORPORAT	ION POLITICAL ACT	TION COM	IMITTEE					
			·············					
Full Name (Last, First, Middle Initial)								
A. BOB CASEY FOR SENATE INC			Date of Disbursement					
Mailing Address PO BOX 58746			04 20 2021					
Mailing Address 1 0 Box 30140			20 2021					
City	State Zip Code		FEC Identification Number					
PHILADELPHIA	PA 19102							
Purpose of Disbursement			C C00431056					
Candidate Name		Ostonovi	Transaction ID : SB23.4143					
BOB CASEY FOR SENATE INC		Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse	ment For: 2024		1000.00					
x Senate	Primary General							
State: PA District: 00	Other (specify) ▼		Memo Item					
State: PA District: 00  Full Name (Last, First, Middle Initial)								
B. CRAPO VICTORY COMMITTEE			Date of Disbursement					
OTO II O VIOTORT COMMITTEE			M M / D D / Y Y Y Y					
Mailing Address 228 S. WASHINGTON ST.			06 22 2021					
STE. 115								
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number					
Purpose of Disbursement	22314		C C00649574					
			Transaction ID : SB23.4149					
Candidate Name		Category/	Amount of Each Disbursement this Period					
CRAPO VICTORY COMMITTEE		Туре	1000.00					
	ment For: 2022 Primary General		1000.00					
President X	Other (specify)							
State: District:	(-		Memo Item					
Full Name (Last, First, Middle Initial)								
c. DSCC			Date of Disbursement					
Mailing Address 400 MADV( AND AVE NE			M M / D D / Y Y Y Y					
Mailing Address 120 MARYLAND AVE NE			04 20 2021					
City	State Zip Code		FEC Identification Number					
WASHINGTON	DC 20002							
Purpose of Disbursement			C C00042366					
Candidate Name			Transaction ID : SB23.4144					
DSCC		Category/ Type	Amount of Each Disbursement this Period					
	ment For: 2022		2500.00					
Senate x	Primary General							
President	Other (specify) ▼		Memo Item					
State: District:								
SUBTOTAL of Disbursements This Page (optional).			4500.00					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 35 OF 38					
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only						
		Summary Page	21b	22 🗶 23 26 27					
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NAME OF COMMITTEE (In Full)		7 1							
NATIONAL HEALTH CORPORAT	ION POL	ITICAL AC	TION COM	IMITTEE					
Full Name (Last, First, Middle Initial)									
A. KUSTOFF FOR CONGRESS				Date of Disbursement	1				
Mailing Address 1661 AARON BRENNER DR STE 300	01-1-	7:- 0-1-		04 30 2021					
City   MEMPHIS	State TN	Zip Code 38120		FEC Identification Number					
Purpose of Disbursement		00120		C C00614826					
			' '	Transaction ID : SB23,4145					
Candidate Name			Category/	Amount of Each Disbursement this Per	riod				
KUSTOFF FOR CONGRESS			Type		—				
Office Sought:    X   House   Disburse     Senate   X	ment For: 20 Primary	022 General		1000.00	Ш.				
State: TN District: 08	Other (speci	ify) ▼		Memo Item					
Full Name (Last, First, Middle Initial)									
B. MAGGIE FOR NH				Date of Disbursement					
				M = M / D = D / Y = Y = Y	1				
Mailing Address PO BOX 298				06 16 2021					
,	State NH	Zip Code		FEC Identification Number					
CONCORD Purpose of Disbursement	INIT	03302		C 000500770					
				C C00588772					
Candidate Name			Catagory	Transaction ID: SB23.4148  Amount of Each Disbursement this Per	riod				
MAGGIE FOR NH	Category/ Type			Amount of Each Disbursement this 1					
Office Sought: House Disburse	ment For: 2	022		2000.00					
x Senate x	Primary	General							
State: NH District: 00	Other (speci	ify)		Memo Item					
Full Name (Last, First, Middle Initial)				Data of Dieburgarant					
C. MARSHA FOR SENATE				Date of Disbursement	_				
Mailing Address PO BOX 3750				02 22 2021					
City	State	Zip Code		FEC Identification Number					
BRENTWOOD	TN	37024							
Purpose of Disbursement				C C00376939					
Candidate Name				Transaction ID : SB23.4141					
MARSHA FOR SENATE			Category/ Type	Amount of Each Disbursement this Per	riod				
	ment For: 20	024	Турс	2500.00					
x Senate	Primary	General		4 4					
President	Other (speci	ify) ▼		Memo Item					
State: TN District: 07				mone ton					
				5500.00	$\neg \overline{}$				
SUBTOTAL of Disbursements This Page (optional)			·····•	3300.00					
TOTAL This Period (last page this line number only	)								

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the FOR LINE (check online)		NUMBER: PAGE 36 OF 38		
ITEMIZED DISBURSEMENTS			· _ ·		
		Summary Page	210 28a		27 30b
Any information copied from such Reports and State	ments mav r	not be sold or use			
or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
angle NATIONAL HEALTH CORPORAT	ION POI	LITICAL AC	TION COM	MITTEE	
Full Name (Last, First, Middle Initial)					
A. MARSHA FOR SENATE	Date of Disbursement				
Mailian Address DO DOV 2750	M M / D D / Y Y				
Mailing Address PO BOX 3750				02 22 202	
City	State	Zip Code		FEC Identification Number	
BRENTWOOD  Purpose of Dishursement	TN	37024			_
Purpose of Disbursement	Dispursement			C C00376939	
Candidate Name	Category	Transaction ID: SB23.4418 Amount of Each Disbursement tl			
MARSHA FOR SENATE  Category/ Type				Amount of Each Dispursement th	IIIS FEIIUU
	ffice Sought: House Disbursement For: 2024				00.00
X Senate	Primary	<b>★</b> General			
State: TN District: 07	Other (spec	Jily) ▼		Memo Item	
Full Name (Last, First, Middle Initial)					
B. NRSC				Date of Disbursement	
				M = M / D = D / Y = Y = 202	
Mailing Address 425 2ND STREET NE				05 21 202	
City	State	Zip Code		FEC Identification Number	
WASHINGTON DC 20002 Purpose of Disbursement					
Tarpood of Biobardonicin	C C00027466				
Candidate Name	Transaction ID: SB23.4147 Amount of Each Disbursement tl	his Period			
NRSC					
Office Sought: House Disbursement For: 2022				25	00.00
Senate Primary General Other (specify)				п.,	
State: District:				Memo Item	
Full Name (Last, First, Middle Initial)					
C. PALLONE FOR CONGRESS		Date of Disbursement			
Mailing Address PO BOX 3176				05 05 202	
City LONG BRANCH	State NJ	Zip Code 07740		FEC Identification Number	
Purpose of Disbursement				C C00226928	
				Transaction ID : SB23.4146	
Candidate Name			Category/	Amount of Each Disbursement th	
PALLONE FOR CONGRESS  Office Sought: House Disburse	ement For: 2	2022	Туре	10	00.00
Senate Disburse	Primary	2022 General		10	-5.55
President Other (specify) ▼				Memo Item	
State: NJ District: 06				LI WOME ROM	
CURTOTAL of Dishurances at This Base (				60	00.00
SUBTOTAL of Disbursements This Page (optional).			·····		30.00
TOTAL This Period (last page this line number only	/)				

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SCHEDULE B (FEC Form 3X)	HEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 37 OF 38		
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		FOR LINE NUMBER: PAGE 37 OF 38 (check only one)		
		Summary Page	21b	22 🗶 23 🔲 26 🔲 27		
			28a	28b 28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)	no and addit	oos or arry poiltie	our committee to	Sound communities non such communes.		
NATIONAL HEALTH CORPORAT	ION POI	ΙΤΙCΑΙ ΔΟ	TION COM	MITTEE		
/ WITCH CONTONAL	IOINI OL		11014 00101			
Full Name (Last, First, Middle Initial)						
A. TIM SCOTT FOR SENATE				Date of Disbursement		
Mailing Address 1405 ASHLEY RIVER RD		03 29 2021				
Mailing Address 1400 Adrice I KIVEK KD				00 20 2021		
City	State Zip Code			FEC Identification Number		
CHARLESTON	SC	29407				
Purpose of Disbursement		C C00540302				
Candidate Name	Onto the fi	Transaction ID: SB23.4142				
TIM SCOTT FOR SENATE			Category/ Type	Amount of Each Disbursement this Period		
	Office Sought:  House  Disbursement For: 2022  Senate  Primary  General			2500.00		
<u> </u>						
President President	Other (spec	ify) ▼		Memo Item		
State: SC District: 00  Full Name (Last, First, Middle Initial)						
B.				Date of Disbursement		
				M M / D D / Y Y Y		
Mailing Address						
		I				
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement		C				
Candidate Name	Amount of Each Disbursement this Period					
Office Sought: House Disburse	Туре					
Office Sought: House Disbursement For: Senate Primary General				7 7 4		
President	Other (spec			Maria Nam		
State: District:		<u> </u>		Memo Item		
Full Name (Last, First, Middle Initial)						
C.		Date of Disbursement				
Mailing Address		M M / D D / Y Y Y Y				
Mailing Address						
City	State	Zip Code		FEC Identification Number		
Purpose of Dishurasment						
Purpose of Disbursement	C					
Candidate Name Category/				Amount of Each Disbursement this Period		
	Amount of Lacit Disbursement this Fellou					
Office Sought: House Disburse	Type	45 45 45				
Senate Primary General						
President	Other (specify) ▼			Memo Item		
State: District:						
SUBTOTAL of Disbursements This Page (optional)				2500.00		
ODDIOTAL OF DISDUISEMENTS THIS Fage (optional)			·····•	4 4		
TOTAL This Period (last page this line number only	·)		·····•	18500.00		

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SCHEDULE B (FEC Form 3X)			FOD : 1115	NUMBER. PAGE 38 OF 39		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)			FOR LINE NUMBER: PAGE 38 OF 38 (check only one)		
IILIWIIZED DISBURSEIVIEN IS		for each category of the Detailed Summary Page		22 23 26 27		
	Detailed	ouninary Page	28a	28b 28c <b>x</b> 29 30b		
Any information copied from such Reports and State						
or for commercial purposes, other than using the na	me and addi	ress of any polition	cal committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)		UTIOAL AO	TION OOL			
$\left   ight>$ NATIONAL HEALTH CORPORAT	ION PO	LITICAL AC	TION COM	IMITTEE		
Full Name (Last, First, Middle Initial)						
A. US Dept. of Treasury	Date of Disbursement					
	M M / D D / Y Y Y Y					
Mailing Address 1500 Pennsylvania Ave.				03 25 2021		
City	State	Zip Code		FFO Identification Number		
Washington DC	DC	20002		FEC Identification Number		
Purpose of Disbursement Taxes						
Candidate Name		Transaction ID : SB29.4152				
Cate			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse	ement For:		. , , po	276.00		
Senate				4 4		
President	Other (spec	cify) ▼		Memo Item		
State: District:				1		
Full Name (Last, First, Middle Initial) <b>B.</b>				Date of Disbursement		
<b>5.</b>	M M / D D / Y Y Y					
Mailing Address						
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement				C		
Candidate Name	Amount of Each Disbursement this Period					
Office Sought:   House   Dishursement For:						
Office Sought: House Disbursement For: Senate Primary General				4 4 4		
President	Other (specify)			П. м н		
State: District:	J			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 Identification Number		
Purpose of Disbursement						
Tulpose of Dispulsement				C		
Candidate Name Category/				Amount of Each Disbursement this Period		
			Туре			
Office Sought: House Disbursement For:						
Senate President	Primary Other (spec	General		П.,		
State: District:	(opo	」/ ▼		Memo Item		
<u> </u>						
SUBTOTAL of Disbursements This Page (optional).			·····•	276.00		
				276.00		
TOTAL This Period (last page this line number only	/)			270.00		