

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 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A. Christy Green
Full Name (Last, First, Middle Initial)

Mailing Address 330 Seven Springs Way

City Brentwood State TN Zip Code 37027

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

Name of Employer LifePoint Health Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.9509

Amount of Each Receipt this Period
 500.00

B. Nan Gregg
Full Name (Last, First, Middle Initial)

Mailing Address 900 LaVilleta St

City Mexia State TX Zip Code 76667

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

Name of Employer Parkview Regional Occupation CNO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.9506

Amount of Each Receipt this Period
 400.00

C. Tommy Haggard
Full Name (Last, First, Middle Initial)

Mailing Address 3704 Ansley Ct

City Lexington State KY Zip Code 40509

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

Name of Employer Georgetown Community Occupation Assistant Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2015

Transaction ID : SA11AI.9484

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1900.00
TOTAL This Period (last page this line number only).....▶	