

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

National Health Corporation Political Action Committee

ADDRESS (number and street) P.O. Box 1398
Check if different than previously reported. (ACC) Murfreesboro TN 37130

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00153445

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
 Election on [MM] / [DD] / [YYYY] in the State of []

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
 Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [07] / [01] / [2017] through [12] / [31] / [2017]

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

Signature of Treasurer KINNEY, J. B., , , [Electronically Filed] Date [01] / [31] / [2018]

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

Office Use Only							
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

National Health Corporation Political Action Committee

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="2017"/>		446009.65
(b) Cash on Hand at Beginning of Reporting Period.....	455638.52	
(c) Total Receipts (from Line 19)	48336.14	93531.89
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	503974.66	539541.54
7. Total Disbursements (from Line 31).....	65718.21	101285.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	438256.45	438256.45
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

National Health Corporation Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	47831.43	93027.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	47831.43	93027.18
(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)	47831.43	93027.18
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).....	504.71	504.71
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)).....▶	48336.14	93531.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	48336.14	93531.89

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.....	65700.00	101200.00
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).....	18.21	85.09
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)) ..	65718.21	101285.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65718.21	101285.09

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	47831.43	93027.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47831.43	93027.18
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).....	504.71	504.71
38. Net Operating Expenditures (subtract Line 37 from Line 36)	- 504.71	- 504.71

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)
 11a 11b 11c 12
 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

A. Regions
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Church Street
 City Murfreesboro State TN Zip Code 37130
 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 ▼
 251.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA15.5537
 Amount of Each Receipt this Period
 251.46
 Memo Item

B. Regions
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Church Street
 City Murfreesboro State TN Zip Code 37130
 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 ▼
 504.71

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2017
Transaction ID : SA15.5538
 Amount of Each Receipt this Period
 253.25
 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 / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	504.71
TOTAL This Period (last page this line number only).....	504.71

**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)
National Health Corporation Political Action Committee

A. BURGESS, MICHAEL C. DR., , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2334

City DENTON State TX Zip Code 76202

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TX District: 26

Date of Disbursement: 09 / 12 / 2017

FEC Identification Number: C H2TX26093
Transaction ID : SB23.5514
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CORKER, ROBERT P JR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1649 MINNEKAHDA ROAD

City CHATTANOOGA State TN Zip Code 37405

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TN District: 00

Date of Disbursement: 08 / 24 / 2017

FEC Identification Number: C S6TN00216
Transaction ID : SB23.5511
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. CRAPO VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST.
STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 20 / 2017

FEC Identification Number: C C00649574
Transaction ID : SB23.5526
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8500.00

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)
National Health Corporation Political Action Committee

A. DCCC

Full Name (Last, First, Middle Initial)

Mailing Address 430 SOUTH CAPITOL STREET, SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2017

FEC Identification Number: C C00000935
Transaction ID : SB23.5517
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. DESJARLAIS, SCOTT HON., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 639 SWEETENS COVE ROAD

City SOUTH PITTSBURG State TN Zip Code 37380

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TN District: 04

Date of Disbursement: 10 / 23 / 2017

FEC Identification Number: C HOTN04195
Transaction ID : SB23.5519
Amount of Each Disbursement this Period: 2700.00

Memo Item

C. DUNCAN, JEFFREY D MR., , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 845

City LAURENS State SC Zip Code 29360

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: SC District: 03

Date of Disbursement: 08 / 01 / 2017

FEC Identification Number: C HOSC03077
Transaction ID : SB23.5507
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10200.00

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)
National Health Corporation Political Action Committee

A. NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

Mailing Address 204 S. MONROE ST.
STE 201-A

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2017

FEC Identification Number: C00544544
Transaction ID : SB23.5509
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. NRCC

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2017

FEC Identification Number: C00075820
Transaction ID : SB23.5505
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. PROSPERITY ACTION INC.

Full Name (Last, First, Middle Initial)

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2017

FEC Identification Number: C00377689
Transaction ID : SB23.5503
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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)

National Health Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. RYAN, PAUL D., , ,

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	1	7

FEC Identification Number

C H8WI01024

Transaction ID : SB23.5498

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RYAN, PAUL D., , ,

Mailing Address PO BOX 1488

City
JANESVILLE

State
WI

Zip Code
53547

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	1	7

FEC Identification Number

C H8WI01024

Transaction ID : SB23.5501

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SENATE LEADERSHIP FUND

Mailing Address 45 NORTH HILL DRIVE STE 100

City
WARRENTON

State
VA

Zip Code
20186

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
	1			2		2	0	1	7

FEC Identification Number

C C00571703

Transaction ID : SB23.5528

Amount of Each Disbursement this Period

15000.00

Memo Item

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

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

25000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Health Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. SENATE MAJORITY FUND

Mailing Address 2211 EAST HIGHLAND #210

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.5521

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WAGNER, ANN L., , ,

Mailing Address PO BOX 50

City BALLWIN State MO Zip Code 63022

Purpose of Disbursement
Check voided - never cashed

Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: MO District: 02

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB23.5533

Amount of Each Disbursement this Period

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

/ /

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)..... ▶