PAGE 1 / 43

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIM 37	For	Other Than	An Authoriz	ed Commi	ttee		Office Use	Only	
NAME OF COMMITTEE (PE OR PRINT	_	Example: If ty over the lines.		12FE4M	15		
NATIONAL H	EALTH CO	RPORATIO	ON POLITIC	CAL ACTION	ON COMM	IITTEE			
ADDRESS (number		P.O. BOX 1398							
Check if d than previous reported. (ously	MURFREESBOR	RO			TN	37130		
2. FEC IDENTIF	CATION NUME	BER ▼	CITY 🛦			STATE A	Z	IP CODE	A
C C00153	445		3. IS THIS		NEW (N) OR	X A	MENDED		
4. TYPE OF RI (Choose One) (a) Quarterly F	leports:	(b) Monthly Report Due On:	Feb 20 (M Mar 20 (M Apr 20 (M	N3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	(Non Year Dec (Non Year	/ 20 (M11) I-Election Only) C 20 (M12) I-Election Only) I 31 (YE)
July 1 Quarte Octob Quarte	erly Report (Q1) 5 erly Report (Q2) er 15 erly Report (Q3)	(c) 12-Day PRE-E Report		Primary (1		General Special	(12S)	Run n the	off (12R)
Year-E July 3 Repor	ind Report (YE) 1 Mid-Year t (Non-election Only) (MY) nation Report		Election on Felection For the:	General (3	90G)	Runoff ((30R) i	State of Spe n the State of	cial (30S)
5. Covering Perior	d 07	01	2021	through	M M M	31	2021	T Y	
I certify that I have Type or Print Name	;	Report and to the Shelly, Tim, , ,	he best of my k	nowledge and	d belief it is tr	ue, correct ar	nd complete		
Signature of Treasu	Shelly, Ti	m, , ,		[Electronico	ally Filed]	Date 03	M / D 1)22
NOTE: Submission of	f false, erroneous	s, or incomplete	information may	subject the p	erson signing t	his Report to	the penalties	of 52 U.S.	.C. § 30109
Office Use								FORM 3	3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE

07 01 2021 12 31 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 255714.99 January 1. 2021 (b) Cash on Hand at 282013.98 Beginning of Reporting Period..... 4648.43 49723.42 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 305438.41 286662.41 6(a) and 6(c) for Column B)..... 59000.00 77776.00 7. Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 227662.41 227662.41 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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:		12 31 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	0000.70	
	(i) Itemized (use Schedule A)	2999.70	26086.50
	(ii) Unitemized(iii) TOTAL (add	1635.67	9856.93
	Lines 11(a)(i) and (ii)	4635.37	35943.43
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4635.37	35943.43
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.) Transfers from Non-Federal and Levin Funds	13.06	13779.99
	(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))▶	4648.43	49723.42
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	4648.43	49723.42

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schoolule H4)	Total Tills Fellou	Calcilual Teal-tu-Date
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees		77500.00
and Other Political Committees Independent Expenditures	59000.00	77500.00
(use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4 4	4 4 4
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
	4 4	
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
Than I shilled committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
	45. 45.	4 4
Other Disbursements (Including Non-Federal Donations)	0.00	276.00
NOT-1 ederal bortalions)	0.00	270.00
Federal Election Activity (52 U.S.C. § 30101(2	0))	
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
		4 4
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	50000.00	77770 00
	59000.00	77776.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	50000 00	
nom Emo or,	59000.00	77776.00

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) 4635.37 35943.43 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 4635.37 35943.43 (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)

FEC ID number of contributing

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

federal political committee.

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

F	FOR LINE NUMBER:						6	OF	43
(0	che	ck only							
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

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 Anderson, Zach, , , Date of Receipt Mailing Address 2403 Battlefield Pkwy. 2021 City State Zip Code Transaction ID: SA11AI.4527 GA Ft. Oglethorpe 30742 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

В.	Bartlett, Tyler, , ,			Date of Receipt					
	Mailing Address 2230 Ashley Crossing Dr.	Mailing Address 2230 Ashley Crossing Dr.							
	City	State	Zip Code	Transaction ID : SA11AI.4528					
	Charleston	SC	29414	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		30.00					
	Name of Employer (for Individual) NHC		ation (for Individual) nistrator	Memo Item Contribution					
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 270.00						
С .	Full Name of Individual (Last, First, Middle Inite Bebber, Leigh, , ,	tial) or Full Orga	anization Name	Date of Receipt					
	Mailing Address 1501 E. Greenville St.			07 06 7 2021					
	City	State	Zip Code	Transaction ID : SA11AI.4566					
	Anderson	SC	29621	Amount of Each Receipt this Period					

Name of Employer (for Individual)
NHC
Regional Nurse

Receipt For:
Primary
Other (specify)

SUBTOTAL of Receipts This Page (optional)

Occupation (for Individual)
Regional Nurse

Aggregate Year-to-Date ▼

225.00

Memo Item
Contribution

C

25.00

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

F	OR	LINE	NU	MBER	:	PAGE	7	OF	43
(check only one)									
	X	11a		11b		11c	12	!	
		13		14		15	16	;	17

Memo Item

Contribution

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 Bidwell, Greg, , , Date of Receipt Mailing Address 420 N. University St. 2021 City State Zip Code Transaction ID: SA11AI.4486 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) SVP-Central NHC Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bidwell, Scott, , , Date of Receipt Mailing Address 993 E. College St. 07 2021 City State Zip Code Transaction ID: SA11AI.4514 Pulaski TN 38478 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee.

Occupation (for Individual)

SVP-South Central

Aggregate Year-to-Date ▼

Other (specify) \blacktriangledown	4	315.00	
Full Name of Individual (Last, First, Middle In Bryant, Jennifer, , ,	nitial) or Full Org	anization Name	Date of Receipt
Mailing Address 100 E. Vine St.			07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.4529
Murfreesboro	TN	37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual)	Occup	eation (for Individual)	Memo Item
NHC	DON		Contribution
Receipt For: Primary General Other (specify)	Aggregate Yo	ear-to-Date ▼ 270.00	
			165.00

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

F	OR	LINE	NU	MBER	:	PAGE	8	OF	43	
(check only one)										
	X	11a		11b		11c	12			
		13		14		15	16	;	17	

Memo Item

Contribution

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 Bumgardaner, Kelley, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4530 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) DON Contribution NHC Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Burke, Brigitte, , , Date of Receipt Mailing Address 100 E. Vine St. 07 2021 City State Zip Code Transaction ID: SA11AI.4567 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee.

Occupation (for Individual)

VP-Dining Services

Aggregate Year-to-Date ▼

Other (specify) ▼		225.00	
Full Name of Individual (Last, First, Middle In Burwin, Allison, , , Mailing Address 100 E. Vine St.	nitial) or Full Org	ganization Name	Date of Receipt M 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.4507
Murfreesboro	TN	37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		45.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
NHC	SVP-	Northeast	Contribution
Receipt For: Primary General Other (specify)	Aggregate \	∕ear-to-Date ▼ 360.00	
LIDTOTAL of Descripts This Daws (authors)			100.00

F	OR	LINE	NU	MBER	:	PAGE	9	OF	43
(check only one)									
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	the name and address of any political committee	ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPC	PRATION POLITICAL ACTION C	OMMITTEE
Full Name of Individual (Last, First, Middle Butler, Addison, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4531
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	Administrator	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	240.00	7
Other (specify) ▼	240.00	
Full Name of Individual (Last, First, Middle 3. Coggin, Robert, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4499
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Director of Safety	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle Colley, Jaine, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 1321 Cedar Ln.		07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4532
Tullahoma	TN 37388	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	Administrator	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	270.00]
SUBTOTAL of Receipts This Page (optional)		110.00
TOTAL This Period (last page this line numb		

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

F	OR	LINE	NU	MBER	:	PAGE	 10	OF	4	3
(check only one)										
	X	11a		11b		11c	12			
		13		14		15	16		1	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 Crotts, Jeanie, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City Zip Code State Transaction ID: SA11AI.4509 TN 37130 Murfreesboro Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Contribution 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. Davis, Kathryn, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4533 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Contribution Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Davis, Samantha, , , Date of Receipt Mailing Address 100 E. Vine St. 06 2021 City Zip Code State Transaction ID: SA11AI.4534 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify)

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

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

100.00

FOR LINE NUMBER:					PAGE		11	OF	43	
((check only one)									
	X	11a		11b		11c		12	2	
		13		14		15		16	6	17

	he 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 Dean, Malcolm, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.		07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID : SA11AI.4535				
Murfreesboro	TN 37130	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	30.00				
Name of Employer (for Individual)	Name of Employer (for Individual) Occupation (for Individual)					
NHC	Administrator	Contribution				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	00 0					
Other (specify) ▼	240.00					
Full Name of Individual (Last, First, Middle In Dodson, Vicki, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.	07 06 2021					
City	State Zip Code	Transaction ID : SA11AI.4494				
Murfreesboro	TN 37130	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual) NHC	Occupation (for Individual) VP	Memo Item Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00					
Full Name of Individual (Last, First, Middle I	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.		07 06 2021				
City	State Zip Code	Transaction ID : SA11AI.4568				
Murfreesboro	TN 37130	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual) NHC	Occupation (for Individual) DON	Memo Item Contribution				
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General	00 0	1				
Other (specify)	225.00					
SUBTOTAL of Receipts This Page (optional)	•	155.00				
TOTAL This Period (last page this line numbe	r only)					

TOTT EITHE TROMBETT.					PAGE	1	12	OF	43	
(0	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	ATION POLITICAL ACTION COM	MMITTEE
Full Name of Individual (Last, First, Middle Ini Flatt, Andy, , , Mailing Address 100 E. Vine St.	itial) or Full Organization Name	Date of Receipt
		07 06 2021
City Murfreesboro	State Zip Code TN 37130	Transaction ID : SA11AI.4500
	37 130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	SVP-IT	Contribution
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4501
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) NHC	Occupation (for Individual) CEO	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4515
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	280.00	
SUBTOTAL of Receipts This Page (optional)	>	135.00
TOTAL This Period (last page this line number	only)	

					PAGE	 13	OF	43	
	(che	ck only	or	ne)					
	×	11a		11b		11c	12		
		13		14		15	16		17

	for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORA	ATION PO	OLITICAL ACTION CO	MMITTEE
Α.		al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 608 E. 8th Ave.			07 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Springfield	State TN	Zip Code 37172	Transaction ID : SA11AI.4516 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer (for Individual) NHC		pation (for Individual) inistrator	Memo Item Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 315.00	
В.	Full Name of Individual (Last, First, Middle Initi Hall, Malcolm, , , Mailing Address 139 Chestnut Oak	al) or Full Or	ganization Name	Date of Receipt
	City Smithville	State TN	Zip Code 37166	7 06 2021 Transaction ID : SA11AL4536 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) NHC		pation (for Individual) ctor of Government Relations	Memo Item Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 270.00	
С .	Full Name of Individual (Last, First, Middle Initi Harbin, Holly, , ,	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 350 Austin Graybill Rd.			07 06 2021
	City North Augusta	State SC	Zip Code 29860	Transaction ID : SA11AI.4496 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual) NHC		pation (for Individual) nistrator	Memo Item Contribution
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 900.00	
H	CUBTOTAL of Receipts This Page (optional)		<u> </u>	165.00

FO	R LINE	NUMBER	: PAG	E 14 OF	43
(ch	eck only	one)			
×	11a	11b	11c	12	
	13	14	15	16	17

or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POL	ITICAL ACTION CO	MMITTEE		
Full Name of Individual (Last, First, Middle In Harris, Hunter, , ,	nitial) or Full Organ	ization Name	Date of Receipt		
Mailing Address 500 Elmington Ave.			07 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State TN	Zip Code	Transaction ID : SA11AI.4537		
Nashville	IIN	37205	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		30.00		
Name of Employer (for Individual)	on (for Individual)	Memo Item			
NHC	Contribution				
Receipt For:	Aggregate real-to-bate v				
Primary General Other (specify) ▼		270.00			
Full Name of Individual (Last, First, Middle In Hill, Daley, , ,	nitial) or Full Organ	ization Name	Date of Receipt		
Mailing Address 370 Old Shackle Island Rd.			07 06 2021		
City	State	Zip Code	Transaction ID : SA11AI.4526		
Hendersonville	TN	37075	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		31.20		
Name of Employer (for Individual) NHC	Occupati Administ	on (for Individual) trator	Memo Item Contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate Year	r-to-Date ▼ 249.60			
Full Name of Individual (Last, First, Middle II	nitial) or Full Organ	ization Name	Date of Receipt		
Mailing Address 1501 E. Greenville St.			07 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City		Zip Code	Transaction ID : SA11AI.4525		
Anderson	SC	29621	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		30.00		
Name of Employer (for Individual)		on (for Individual)	Memo Item		
NHC Receipt For:	Administr		Contribution		
Primary General	Aggregate Year	r-to-Date ▼			
Other (specify)		270.00			
SUBTOTAL of Receipts This Page (optional)		·····	91.20		
TOTAL This Period (last page this line numbe	r only)				

	FOR LINE NUMBER:					PAGE	 15	OF	43
(C	he	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16		17

Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POI	LITICAL ACTION CO	DMMITTEE
Full Name of Individual (Last, First, Middle In Holder, Chuck, , ,	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 304 Jacobs Hwy.			07 06 2021
City Clinton	State SC	Zip Code 29325	Transaction ID : SA11AI.4538
FEC ID number of contributing federal political committee.	C	23023	Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NHC Receipt For: Primary General Other (specify) ▼	Occupa Adminis Aggregate Yea		Memo Item Contribution
Full Name of Individual (Last, First, Middle In Holland, Ben, , , Mailing Address 928 Old Smithville Rd.	Date of Receipt 07 06 2021		
City McMinnville FEC ID number of contributing federal political committee.	State TN	Zip Code 37110	Transaction ID : SA11AI.4565 Amount of Each Receipt this Period 31.00
Name of Employer (for Individual) NHC Receipt For: Primary General Other (specify) ▼	Occupa Admini Aggregate Yea		Memo Item Contribution
Full Name of Individual (Last, First, Middle In Hubbard, Debbie, , , Mailing Address 2300 Pavillion Dr.	nitial) or Full Orga	nization Name	Date of Receipt 07 06 2021 Transaction ID : SA11AI.4539
Kingsport FEC ID number of contributing federal political committee.	TN	37660	Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) NHC Receipt For: Primary General Other (specify)	Occupa Adminis Aggregate Yea		Memo Item Contribution
SUBTOTAL of Receipts This Page (optional)	1		91.00
TOTAL This Period (last page this line numbe	r only)		

FOR LINE NUMBER:					PAGE	•	16	OF	43	
((check only one)									
	X	11a		11b		11c		12		
		13		14		15		16	;	17

or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPC	PRATION POLITICAL ACTION CO	OMMITTEE
Full Name of Individual (Last, First, Middle Jackson, Scott, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4540
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	Administrator	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		1
Other (specify) ▼	270.00	1
Full Name of Individual (Last, First, Middle Johnson, Doran, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4495
Murfreesboro	TN 37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) NHC	Occupation (for Individual) SVP	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle). Jones, Christina, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 211 Cool Springs Blvd.		07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4517
Franklin	TN 37067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item Contribution
NHC Receipt For:	Assistant Administrator	
Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	315.00	
SUBTOTAL of Receipts This Page (optional)		165.00
TOTAL This Period (last page this line numb	per only)	

					MBER	:	PAGE		17 C	F	43
(check only one)											
		X	11a		11b		11c		12		
		13 14					15		16		17

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any podress of any political committee	erson 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	DMMITTEE				
Full Name of Individual (Last, First, Middle In Lane, Karla, , , Mailing Address 122 Cavette Hill Ln.	nitial) or Full Org	ganization Name	Date of Receipt				
City	Stata	Zin Codo	07 06 2021				
City Knoxville	State TN	Zip Code 37934	Transaction ID : SA11AI.4541				
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 30.00				
Name of Employer (for Individual) NHC		oation (for Individual) nistrator	Memo Item Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 270.00					
Full Name of Individual (Last, First, Middle In Lutsenko, Yuriy, , , Mailing Address 3025 Fernbrook Ln.	nitial) or Full Org	ganization Name	Date of Receipt				
City Nashville	State TN	Zip Code 37214	Transaction ID : SA11AI.4542 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ÿ						
Name of Employer (for Individual) NHC		pation (for Individual)	Memo Item Contribution				
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-Date V						
Full Name of Individual (Last, First, Middle In Manley, Michael, , ,	nitial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 2993 Sunset Blvd. City	State	Zip Code	07 06 2021				
West Columbia	State	29169	Transaction ID : SA11AI.4518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		35.00				
Name of Employer (for Individual) NHC		pation (for Individual) histrator	Memo Item Contribution				
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 315.00					
SUBTOTAL of Receipts This Page (optional)		•	95.00				
TOTAL This Period (last page this line number	r only)						

F	OR	LINE	NU	MBER	:	PAGE	1	18	OF	43	
(check only one)											
	X	11a		11b		11c		12			
	13 14					15		16		17	

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION PO	LITICAL ACTION CO	DMMITTEE				
Full Name of Individual (Last, First, Middle I McCreary, Josh, , , Mailing Address 100 E. Vine St.	nitial) or Full Orga	anization Name	Date of Receipt				
City	State	Zip Code	07 06 2021				
Murfreesboro	TN	37130	Transaction ID : SA11AI.4543 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		30.00				
Name of Employer (for Individual) NHC		ation (for Individual) al Counsel	Memo Item Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 270.00					
Full Name of Individual (Last, First, Middle I McIntosh, Bubba, , , Mailing Address 100 E. Vine St.	nitial) or Full Orga	anization Name	Date of Receipt 07 06 2021				
City Murfreesboro	State	Zip Code 37130	Transaction ID : SA11AI.4502 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	0.100	50.00				
Name of Employer (for Individual) NHC		ation (for Individual) Development	Memo Item Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 450.00					
Full Name of Individual (Last, First, Middle I . McKamey, Darrin, , ,	nitial) or Full Orga	anization Name	Date of Receipt				
Mailing Address 374 Brink St.			07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Lawrenceburg	State TN	Zip Code 38464	Transaction ID : SA11AI.4544				
FEC ID number of contributing federal political committee.	C	55757	Amount of Each Receipt this Period 30.00				
Name of Employer (for Individual) NHC	Occupa Admini	ation (for Individual)	Memo Item Contribution				
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 270.00					
SUBTOTAL of Receipts This Page (optional)			110.00				
TOTAL This Period (last page this line numbe	r only)						

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

43 19 OF Use separate schedule(s) for each category of the 12 13 14 15 16

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 McKenzie, Dan, , , Date of Receipt Mailing Address 3916 Boyds Bridge Pike 2021 City Zip Code State Transaction ID: SA11AI.4523 TN Knoxville 37914 Amount of Each Receipt this Period FEC ID number of contributing C 32.50 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 292.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Michel, Anna, , , Date of Receipt Mailing Address 211 Davis Dr. 2021 City State Zip Code Transaction ID: SA11AI.4545 West Plains MO 65775 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Contribution Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Miner, Karyn, , , Date of Receipt Mailing Address 100 E. Vine St. 06 2021 City Zip Code State Transaction ID: SA11AI.4519 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) 97.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

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

				MBER	:	PAGE	2	20 C)F	43
(0	che	ck only	or	ne)						
	X	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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moore, Edward, , , Date of Receipt Mailing Address 5010 Trotwood Ave. 06 2021 City State Zip Code Transaction ID: SA11AI.4569 TN 38401 Columbia Amount of Each Receipt this Period FFC ID number of contributing В

federal political committee.	C	25.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00]
Full Name of Individual (Last, First, Middle Moore, Todd, , , Mailing Address 211 Cool Springs Blvd.	Initial) or Full Organization Name	Date of Receipt 07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4546
Franklin	TN 37067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle Moorhouse, Brad, , , Mailing Address 1501 E. Greenville St.	Initial) or Full Organization Name	Date of Receipt 07 06 2021
City Anderson	State Zip Code SC 29621	Transaction ID : SA11AI.4547 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) NHC	Occupation (for Individual) SVP-South Carolina	Memo Item Contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional).		85.00
TOTAL This Period (last page this line number	er only)	
		FEC Schedule A (Form 3X) Rev. 06/201

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

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

F	OR	LINE	NU	MBER	:	PAGE	2	21	OF	43
(0	che	ck only	or	ıe)						
	X	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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moorhouse, Bryan, , , Date of Receipt Mailing Address 1305 Boiling Springs Rd. 2021 City Zip Code State Transaction ID: SA11AI.4548 SC Greer 29650 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Administrator Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nason, Jay, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4503 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Contribution SVP-Eastern Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Norris, Chelsey, , , Date of Receipt Mailing Address 216 Fairground St. 06 2021 City State Zip Code Transaction ID: SA11AI.4549 TN Franklin 37064 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional).....

federal political committee.

NHC

Receipt For:

Name of Employer (for Individual)

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

FOR	PAGE	2	22	OF	43				
(che	ck only	or	ne)						
×	11a		11b		11c		12		
	13		14		15		16		17

Memo Item

Contribution

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 Parenti, Karen, , , Date of Receipt Mailing Address 140 Thorne Blvd. 2021 City State Zip Code Transaction ID: SA11AI.4550 TN 37066 Gallatin Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NHC Regional Nurse Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peimann, Seth, , , Date of Receipt Mailing Address 35 Sugar Maple Ln. 2021 City State Zip Code Transaction ID: SA11AI.4551 St. Charles MO 63303 Amount of Each Receipt this Period FEC ID number of contributing 30.00

Primary General Other (specify) ▼	1 ggregate 1	270.00	
Full Name of Individual (Last, First, Middle Perry, Kellie, , , Mailing Address 100 E. Vine St.	Initial) or Full Orga	anization 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 Murfreesboro	State TN	Zip Code 37130	Transaction ID : SA11AI.4510 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer (for Individual) NHC		ation (for Individual) istrator	Memo Item Contribution
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 360.00	
UDTOTAL of Descints This Dans (outlines)			100.00

Occupation (for Individual)

Administrator

Aggregate Year-to-Date ▼

F	OR	LINE	NU	MBER	:	PAGE	2	23 OF	=	43
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	ATION POLITICAL ACTION CON	MITTEE				
Full Name of Individual (Last, First, Middle Ini Pudlowski, Jackie, , ,	tial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.		07 06 2021				
City Murfreesboro	State Zip Code TN 37130	Transaction ID : SA11AI.4552				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period				
Name of Employer (for Individual) NHC Receipt For:	Occupation (for Individual) Administrator	Memo Item Contribution				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00					
Full Name of Individual (Last, First, Middle Ini Raffa, Tony, , , Mailing Address 2700 Parkwood Ave.	tial) or Full Organization Name	Date of Receipt				
City Chattanooga	07 06 2021 Transaction ID : SA11AI.4553 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	TN 37404	30.00				
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00					
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt				
Mailing Address 100 E. Vine St.		07 06 2021				
City Murfreesboro	State Zip Code TN 37130	Transaction ID : SA11AI.4504 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) NHC	Occupation (for Individual) SVP-Missouri	Memo Item Contribution				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 450.00					
SUBTOTAL of Receipts This Page (optional)	>	110.00				
TOTAL This Period (last page this line number	only)					

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

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

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE	2	24	OF	43
(0	che	ck only	or	ne)						
	×	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 Roberts, Meadow, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City Zip Code State Transaction ID: SA11AI.4570 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) AVP NHC Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rumsey, Whitney, , , Date of Receipt Mailing Address 101 Walnut Ln. 2021 City State Zip Code Transaction ID: SA11AI.4554 TN Columbia 38401 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Contribution Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Salyers, Marinda, , , Date of Receipt Mailing Address 1425 McFarland Ave. 06 2021 City State Zip Code Transaction ID: SA11AI.4555 GΑ Rossville 30741 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution NHC Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 85.00

NHC

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

							PAGE	2	25	OF	4	3
(check only one)												
		X	11a		11b		11c		12			
	(check only one)						15		16		1	7

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 Sellars, Alex, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City Zip Code State Transaction ID: SA11AI.4513 TN 37130 Murfreesboro Amount of Each Receipt this Period FEC ID number of contributing C 38.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Administrator Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 342.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sellars, Gideon, , , Date of Receipt Mailing Address 437 E. Cambridge Ave. 2021 City State Zip Code Transaction ID: SA11AI.4556 SC Greenwood 29646 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Contribution Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sellars, Rick, , , Date of Receipt Mailing Address 437 E. Cambridge Ave. 06 2021 City State Zip Code Transaction ID: SA11AI.4557 SC Greenwood 29646 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 270.00										
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)										
TOTAL This Period (last page this line number	OTAL This Period (last page this line number only)										

VP-AI

Contribution

FC	LINE	PAGE	2	26	OF	43				
(check only one)										
X 11a 11b				11c		12				
ΙΓ		13		14		15		16		17

	y 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 CO	MMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial Shearer, Jacob, , , Mailing Address 7601 Parklane Rd.	al) or Full Orga	anization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Columbia	State SC	Zip Code 29223	Transaction ID : SA11AI.4558
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 30.00
	Name of Employer (for Individual) NHC Receipt For:		ation (for Individual) istrator ear-to-Date ▼	Memo Item Contribution
	Primary General Other (specify) ▼	4	270.00	
В.	Full Name of Individual (Last, First, Middle Initial Shearer, Rickie, , , Mailing Address 379 Pinehaven St.	al) or Full Orga	anization Name	Date of Receipt
	City	State	Zip Code	07 06 2021 Transaction ID : SA11AL4559
	Eaurens FEC ID number of contributing federal political committee.	sc C	29360	Amount of Each Receipt this Period 30.00
	Name of Employer (for Individual) NHC		ation (for Individual) istrator	Memo Item Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Shelley, Karin, , ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 100 E. Vine St.			07 06 / Y Y 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.4508 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer (for Individual) NHC Receipt For:	Admini		Memo Item Contribution
	Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 405.00	
H	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			105.00

							PAGE	2	27 OF	43
(check only one)										
		X	11a		11b		11c		12	
(check only one)						15		16	17	

	the name and ad	dress of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Shelly, Tim, , , Mailing Address 140 Thorne Blvd.	Initial) or Full Org	ganization Name	Date of Receipt 07 06 2021
City Gallatin FEC ID number of contributing	State TN	Zip Code 37066	Transaction ID : SA11AI.4487 Amount of Each Receipt this Period
federal political committee. Name of Employer (for Individual)	C	pation (for Individual)	30.00 Memo Item
NHC Receipt For: Primary General Other (specify) ▼	SVP-	Metro Year-to-Date ▼ 240.00	Contribution
Full Name of Individual (Last, First, Middle Shuford, Brad, , , Mailing Address 809 E. Emerald Ave.	Initial) or Full Org	ganization Name	Date of Receipt 07 06 2021
City Knoxville	State TN	Zip Code 37917	Transaction ID : SA11AI.4560 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer (for Individual) NHC		oation (for Individual) nistrator	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle Skafas, Beth, , ,	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 100 E. Vine St.			07 06 Y Y 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.4520 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.00
Name of Employer (for Individual) NHC Receipt For:	Admir	oation (for Individual) nistrator	Memo Item Contribution
Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (optional)			95.00

	FOR LINE NUMBER:					PAGE	2	28	OF	43
(check only one)										
	×	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) NATIONAL HEALTH CORPOR	ATION POLITICAL ACTION COM	MMITTEE
Full Name of Individual (Last, First, Middle In Smith, Jeff, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 100 E. Vine St.		07 06 7 2021
City Murfreesboro	State Zip Code TN 37130	Transaction ID : SA11AI.4561
	37130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
NHC	Treasurer	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	270.00	
Full Name of Individual (Last, First, Middle In Stallings, Keely, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 300 Hospital St.		07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4562
Moulton	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name of Individual (Last, First, Middle In Stephens, Joan, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 245 North St.		07 06 2021
City	State Zip Code	Transaction ID : SA11AI.4563
Bristol	VA 24201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) NHC	Occupation (for Individual) Administrator	Memo Item Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	270.00	
SUBTOTAL of Receipts This Page (optional)	>	90.00
TOTAL This Period (last page this line number	only)	

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

FOR	R LINE	NUMBER	: PAGE	E 29 OF	43
(che	eck 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stoner, Jeremy, , , Date of Receipt Mailing Address 815 S. Walnut Ave. 2021 City State Zip Code Transaction ID: SA11AI.4511 Cookeville TN 38501 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Administrator Contribution NHC 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.** Taylor, Susan, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4524 Murfreesboro TN 37130 Amount of Each Receipt this Period FEC ID number of contributing 32.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Administrator Contribution

Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 288.00	
Full Name of Individual (Last, First, Middle In Ussery, Marshall, , , Mailing Address 8353 Hwy. 100 City	Date of Receipt 07 06 2021 Transaction ID: SA11AI.4506		
Nashville FEC ID number of contributing federal political committee.	State TN	Zip Code 37221	Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NHC Receipt For: Primary General Other (specify)	Admin	ation (for Individual) istrator ear-to-Date ▼ 450.00	Memo Item Contribution
UBTOTAL of Receipts This Page (optional)	122.00		

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

								3	30	OF	43
(check only one)											
X 11a 11b					11c		12				
l ` ′ ′					15		16		17		

	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORA	ATION PO	OLITICAL ACTION COI	MMITTEE
Α.	Full Name of Individual (Last, First, Middle Initi Ussery, Mike, , ,	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 100 E. Vine St.			07 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.4497
	Murfreesboro	TN	37130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	NHC		ident	Contribution
	Receipt For:			
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		900.00	
В.	Full Name of Individual (Last, First, Middle Initi Vincent, Brandon, , ,	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 812 N. Charlotte St.			07 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA11AI.4564
	Dickson	TN	37055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) NHC		upation (for Individual) ninistrator	Memo Item Contribution
	Receipt For:	Aggregate `	Year-to-Date ▼	
	Primary General Other (specify) ▼		270.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initi Waddell, Robert, , ,	al) or Full O	rganization Name	Date of Receipt
٠.	Mailing Address 100 E. Vine St.			07 06 2021
	City	State	Zip Code	Transaction ID : SA11AI.4512
	Murfreesboro	TN	37130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer (for Individual)		pation (for Individual)	Memo Item Contribution
	Receipt For:			-
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		360.00	
S	SUBTOTAL of Receipts This Page (optional)		>	170.00
Т	TOTAL This Period (last page this line number of	only)		

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

					PAGE	: 3	31	OF	43		
	(check only one)										
		X	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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name West, Chris, , , Date of Receipt Mailing Address 100 E. Vine St. 2021 City State Zip Code Transaction ID: SA11AI.4498 TN Murfreesboro 37130 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) VP-Human Resources Contribution NHC Receipt For: Aggregate Year-to-Date ▼ Primary General 675.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Williams, Tyler, , , Date of Receipt Mailing Address 3209 Bristol Hwy. 2021 City State Zip Code Transaction ID: SA11AI.4571 Johnson City TN 37601 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NHC Contribution Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼		225.00	
Full Name of Individual (Last, First, Middle In Wrather, Tim, , , Mailing Address 2120 Highland Ave.	nitial) or Full Org	ganization Name	Date of Receipt 07 06 2021
City Knoxville	State TN	Zip Code 37916	Transaction ID : SA11AI.4521 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.00
Name of Employer (for Individual) NHC		pation (for Individual) nistrator	Memo Item Contribution
Receipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 315.00	
AIDTOTAL of Descripto This Descriptoral			135.00

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

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

١	I OIT LINE HOMBLIN				PAGE	3	32	OF	43		
١	(check only one)										
		X	11a		11b		11c		12		
			13		14		15		16		17

Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPOR	RATION POI	LITICAL ACTION CO	DMMITTEE
Full Name of Individual (Last, First, Middle I Wright, James, , , Mailing Address 1000 St. Luke Dr.			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Nashville	State TN	Zip Code 37205	Transaction ID : SA11AI.4573 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	Kan Han In P. L. P.	30.00
Name of Employer (for Individual) NHC Receipt For:	Aggregate Yea		Contribution
Primary General Other (specify) ▼	-	240.00	
Full Name of Individual (Last, First, Middle II Mailing Address	nitial) or Full Orga	nization Name	Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼	
Full Name of Individual (Last, First, Middle I	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address	l c: :	7: O. d.	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		
Name of Employer (for Individual) Receipt For:		tion (for Individual)	Memo Item
Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼]
SUBTOTAL of Receipts This Page (optional))	30.00
TOTAL This Period (last page this line numbe	r only)		2999.70

ľ

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 33			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORATI	ON POLITICAL ACT	TON COM	MITTEE		
Full Name (Last, First, Middle Initial) A. ADRIAN SMITH FOR CONGRESS	3		Date of Disbursement		
Mailing Address 1126 AVENUE A STE 6			12 27 2021		
SCOTTSBLUFF Purpose of Disbursement	State Zip Code NE 69361		FEC Identification Number		
Contribution Candidate Name		Category/	Transaction ID : SB23.4430 Amount of Each Disbursement this Period		
Senate President	nent For: 2022 Primary General Other (specify) ▼	Туре	2500.00 Memo Item		
State: District: Full Name (Last, First, Middle Initial) B. AMERICAN HEALTH CARE ASSOCIATION Mailing Address PO BOX 33079	N POLITICAL ACTION CO	DMMITTEE	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
,	State Zip Code DC 20033		FEC Identification Number		
Candidate Name		Category/ Type	Transaction ID : SB23.4432 Amount of Each Disbursement this Period		
Senate x	nent For: 2022 Primary General Other (specify)		5000.00 Memo Item		
Full Name (Last, First, Middle Initial) C. BLACKBURN TENNESSEE VICTO	DRY FUND		Date of Disbursement		
Mailing Address PO BOX 3750			08 13 2021		
,	State Zip Code TN 37024		FEC Identification Number		
Candidate Name		Category/ Type	Transaction ID: SB23.4434 Amount of Each Disbursement this Period		
Senate	nent For: 2024 Primary General Other (specify) ▼	,	1000.00 Memo Item		
SUBTOTAL of Disbursements This Page (optional)			8500.00		
TOTAL This Period (last page this line number only).					

ľ

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 34 OF 43			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	NOMBELL.		
Any information copied from such Reports and States					
or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORAT					
Full Name (Last, First, Middle Initial)					
A- BURCHETT FOR CONGRESS Mailing Address PO BOX 51345			Date of Disbursement 12 15 2021		
KNOXVILLE	State Zip Code TN 37950		FEC Identification Number		
Purpose of Disbursement Contribution			Transaction ID : SB23.4436		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate President	ment For: 2022 Primary General Other (specify) ▼		2000.00		
State: District:			Memo Item		
B. CHUCK FLEISCHMANN FOR CO Mailing Address P.O. BOX 11091		TEE, INC.	Date of Disbursement 12 27 2021		
CHATTANOOGA Purpose of Disbursement	State Zip Code TN 37401		FEC Identification Number		
Contribution Candidate Name		Category/ Type	Transaction ID : SB23.4438 Amount of Each Disbursement this Period		
Office Sought: House Senate President Disburser	ment For: 2022 Primary General Other (specify)	76.	2000.00		
State: District:	C (C. P. C)		Memo Item		
Full Name (Last, First, Middle Initial) C. COOPER FOR CONGRESS			Date of Disbursement		
Mailing Address P.O. BOX 198497			10 27 2021		
NASHVILLE	State Zip Code TN 37219		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name		Category/ Type	Transaction ID: SB23.4440 Amount of Each Disbursement this Period		
Office Sought: House Senate President Disburse	ment For: 2022 Primary General Other (specify)	-380	2000.00 Memo Item		
State: District:			memo nom		
SUBTOTAL of Disbursements This Page (optional)		>	6000.00		
TOTAL This Period (last page this line number only))		1		

SCHEDULE B (FEC Form 3X)	Hee	د ۲ - ان او مواد	FOR LINE N	_		
ITEMIZED DISBURSEMENTS	Use separate s		(check only	nly one)		
	Detailed Summ		21b 28a	22 x 23 28b 28b		
Any information copied from such Reports and State	ments may not be	sold or used				
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)		.				
NATIONAL HEALTH CORPORAT	ION POLITION	CAL ACT	ION COM	MITTEE		
Full Name (Last, First, Middle Initial)						
A. DESJARLAIS, SCOTT HON.				Date of Disbur	rsement	
Mailing Address COO CWEETENC COVE DD					17 2024	
Mailing Address 639 SWEETENS COVE RD				12	17 2021	
City		Code		FEC Identificat	ion Number	
SOUTH PITTSBURG	TN 37:	380				
Purpose of Disbursement Contribution		Г		C		
Candidate Name			Category/		on ID : SB23.4442 ch Disbursement this Period	
			Type	Amount of Edu	on Dispursement tills Fellou	
	ment For: 2022				3000.00	
Senate x	Other (specify)	General				
State: District:	Other (specify)	▼		Memo Iten	n	
Full Name (Last, First, Middle Initial)						
B. DIANA FOR CONGRESS				Date of Disbur	rsement	
				M M / D D / Y Y Y Y		
Mailing Address PO BOX 7208				11	30 2021	
City		Code		FEC Identificat	ion Number	
KINGSPORT Purpose of Disbursement	37	664		С		
Check never cashed			: :	Transaction ID : SB23.4482 Amount of Each Disbursement this Period		
Candidate Name			Category/			
DIANA FOR CONGRESS	mont For cas-		Туре		- 1000.00	
Office Sought: House Disburse Senate	ment For: 2020 Primary	General		<u> </u>	- 1000.00	
President	Other (specify)	Sonoral		Man II	_	
State: District:	,			Memo Iter	TI	
Full Name (Last, First, Middle Initial)						
C. DIANA FOR CONGRESS				Date of Disbur		
Mailing Address PO BOX 7208				12 D	07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
O't.	04-4-	01-				
City KINGSPORT	l .	Code 664		FEC Identificat	ion Number	
Purpose of Disbursement				С		
Contribution		[on ID : SB23.4443	
Candidate Name			Category/	Amount of Eac	ch Disbursement this Period	
Office Sought: House Disburse	ment For: 2022		Туре		2000.00	
Senate x	Primary	General		7	7 7	
President	Other (specify)	▼		Memo Iten	n	
State: District:				Ц		
SUPTOTAL of Dishuranments This Daws (antique)					4000.00	
SUBTOTAL of Disbursements This Page (optional).			············		.555.55	
TOTAL This Period (last page this line number only)					

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 OF			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORATION	ON POLITICAL ACT	ION COM	MITTEE		
Full Name (Last, First, Middle Initial) A. FRIENDS OF SCHUMER Mailing Address 192 LEXINGTON AVENUE			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
SUITE 1001	Tin Codo		00 02 2021		
NEW YORK	State Zip Code NY 10016		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name		Category/	Transaction ID : SB23.4445 Amount of Each Disbursement this Period		
Senate x	nent For: 2022 Primary General Other (specify) ▼	Type	2500.00 Memo Item		
B. FRIENDS OF SCHUMER Mailing Address 192 LEXINGTON AVENUE			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
,	State Zip Code NY 10016		FEC Identification Number		
Contribution Candidate Name		Category/ Type	Transaction ID : SB23.4446 Amount of Each Disbursement this Period		
Senate X	nent For: 2022 Primary General Other (specify)	7,	1000.00 Memo Item		
Full Name (Last, First, Middle Initial) C. JAKE AUCHINCLOSS FOR CONG	RESS		Date of Disbursement		
Mailing Address P.O. BOX 600698			09 21 2021		
,	State Zip Code MA 02460		FEC Identification Number		
Contribution Candidate Name		Category/ Type	Transaction ID: SB23.4448 Amount of Each Disbursement this Period		
Senate President	nent For: 2022 Primary General Other (specify) ▼		1000.00 Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			4500.00		

S П

SCHEDULE B (FEC Form 3X)	Han annual colorabile ()	FOR LINE NUMBER: PAGE			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one) 21b 22 x 23 26	eck only one)		
	Detailed Summary Page	21b 22 x 23 26 28c 29	30b		
Any information copied from such Reports and Statem	ents may not be sold or used	by any person for the purpose of soliciting of	contributions		
or for commercial purposes, other than using the nam	e and address of any political	committee to solicit contributions from such o	committee.		
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORATION		TON COMMITTEE			
NATIONAL HEALTH CORPORATION	ON POLITICAL ACT	ION COMMITTEE			
Full Name (Last, First, Middle Initial)		5. (5.)			
A. JASON SMITH FOR CONGRESS		Date of Disbursement			
Mailing Address PO BOX 1324			2021		
-					
,	State Zip Code MO 63702	FEC Identification Number			
Purpose of Disbursement	10.02	C			
Contribution		Transaction ID : SB23.44	450		
Candidate Name		Category/ Type Amount of Each Disbursement	nt this Period		
Office Sought: House Disbursem	nent For: 2022	Туре	2500.00		
	Primary General				
State: President State:	Other (specify) ▼	Memo Item			
Full Name (Last, First, Middle Initial)					
B. JEFF DUNCAN FOR CONGRESS		Date of Disbursement			
Martin or Address - To Double			Y Y Y Y Y Y Y Y Y Y		
Mailing Address PO BOX 845		07 27	2021		
,	State Zip Code	FEC Identification Number			
LAURENS Purpose of Disbursement	SC 29360				
Contribution		C Towns (in ID 0000 4	450		
Candidate Name	,	Category/ Amount of Each Disbursement			
Office Sought: House Disbursem	nent For: 2022	Type	3000.00		
	Primary General	7	3000.00		
	Other (specify)	Memo Item			
State: District:		I wienie item			
Full Name (Last, First, Middle Initial) C. JEFFRIES FOR CONGRESS		Date of Disbursement			
JEFFRIES FOR CONGRESS			YYY		
Mailing Address 910 17TH ST NW		11 16	2021		
STE 925 City S	state Zip Code				
WASHINGTON	DC 20006	FEC Identification Number			
Purpose of Disbursement Contribution		C			
Candidate Name	l	Category/ Amount of Each Disbursemen			
		Category/ Amount of Each Disbursement	it this renou		
Canata	nent For: 2022		2000.00		
	Primary General Other (specify) ▼	п.,			
State: District:	€ III.61 (€ € € € € € € € € €	Memo Item			
			7500.00		
SUBTOTAL of Disbursements This Page (optional)		······································	7500.00		
TOTAL This Period (last page this line number only).					

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORATION	ON POLITICAL ACT	ION COM	MITTEE	
Full Name (Last, First, Middle Initial) A. JOHN ROSE FOR TENNESSEE Mailing Address PO BOX 2404			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code		FEC Identification Number	
COOKEVILLE Purpose of Disbursement	TN 38502			
Contribution Candidate Name	[Category/	Transaction ID : SB23.4456 Amount of Each Disbursement this Period	
Senate President	nent For: 2022 Primary General Other (specify)	Type	2000.00 Memo Item	
State: District: Full Name (Last, First, Middle Initial) B. JOHN ROSE FOR TENNESSEE Mailing Address PO BOX 2404		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
,	State Zip Code TN 38502		FEC Identification Number	
Candidate Name		Category/ Type	Transaction ID : SB23.4457 Amount of Each Disbursement this Period	
Senate X	nent For: 2022 Primary General Other (specify)		1000.00 Memo Item	
Full Name (Last, First, Middle Initial) C. KATHERINE CLARK FOR CONGR	RESS		Date of Disbursement	
Mailing Address PO BOX 159			12 27 2021	
BELMONT	State Zip Code MA 02478		FEC Identification Number	
Purpose of Disbursement Contribution Candidate Name	Category/ Type	Transaction ID: SB23.4459 Amount of Each Disbursement this Period		
Senate President	nent For: 2022 Primary General Other (specify)		2500.00 Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			5500.00	

ľ

TEMIZED DISBURSEMENTS	SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 39 OF 43			
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 Ful) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. KUSTOFF FOR CONGRESS Mailing Address 1661 AARON BRENNER DR STE 300 City Office Sought:	ITEMIZED DISBURSEMENTS	for each category of the) (check only	one) 22 x 23 26 27		
NAME OF COMMITTEE (in Full) NATIONAL HEALTH CORPORATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) KUSTOFF FOR CONGRESS Mailing Address 1661 AARON BRENNER DR STE 300 City MEMPHIS TIN 38120 Purpose of Dibbursement Contribution Candidate Name Office Sought: VI House Senate President Contribution Category MEMPHIS TIN State: TIN						
A. KUSTOFF FOR CONGRESS Mailing Address 1661 AARON BRENNER DR STE 300 City State State State Senate President State Senate Senate President State: IN District: 08 State: TN District: 08 Full Name (Last, First, Middle Initial) Candidate Name Office Sought: X House Disbursement For: 2022 MEMPHIS State: TN District: 08 Full Name (Last, First, Middle Initial) Contribution Candidate Name Office Sought: X House Disbursement For: 2022 MEMPHIS State: TN District: 08 Category/ Office Sought: X House Disbursement For: 2022 X Primary General President Other (specify) State: TN District: 08 Category/ Office Sought: X House Disbursement For: 2022 Transaction ID : SB23.4462 Amount of Each Disbursement This Period Candidate Name Candidate Name City Concord NH 03302 FEC Identification Number C Coopsily: Y 2021 FEC Ident	NAME OF COMMITTEE (In Full)					
STE 300 City MEMPHIS Purpose of Disbursement Contribution Candidate Name Office Sought:	A. KUSTOFF FOR CONGRESS			M M / D D / Y Y Y Y		
MEMPHIS Purpose of Disbursement Contribution Candidate Name Category/ Type Disbursement For: 2022 Senate President STE 300 City MemPHIS Purpose of Disbursement Contribution Category/ Type Disbursement This Period Memo Item FEC Identification Number Category/ Type Disbursement This Period Transaction ID: SB23.4460 Amount of Each Disbursement Inis Period Memo Item Date of Disbursement Category/ Type This Purpose of Disbursement Contribution Candidate Name Disbursement For: 2022 X Primary General Cotter (specify) FEC Identification Number Category/ Type Disbursement For: 2022 X Primary General Cotter (specify) Memo Item FEC Identification Number Category/ Type Date of Disbursement Inis Period Memo Item FEC Identification Number Category/ Type Date of Disbursement Date of Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Date of Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Category/ Type Date of Disbursement Date of Dis	STE 300	State Zip Code		EEC Identification Number		
Contribution Candidate Name Category/ Type Transaction ID : SB23.4460 Amount of Each Disbursement this Period Office Sought:		TN 38120				
Office Sought:	Contribution			Transaction ID : SB23.4460		
Full Name (Last, First, Middle Initial) B. KUSTOFF FOR CONGRESS Mailing Address 1661 AARON BRENNER DR STE 300 City MEMPHIS Purpose of Disbursement Contribution Candidate Name Office Sought: X House President State: TN District: 08 Full Name (Last, First, Middle Initial) C. MAGGIE FOR NH Mailing Address PO BOX 298 City Concord Chripose of Disbursement For: 2022 State TN District: 08 State Zip Code Transaction ID: \$823.4461 Amount of Each Disbursement this Period Memo Item FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type Date of Disbursement this Period Memo Item FEC Identification Number Category/ Type Date of Disbursement this Period Memo Item FEC Identification Number Category/ Type Transaction ID: \$823.4462 Amount of Each Disbursement this Period Office Sought: House President State: NH District: 00 Subtrotal of Disbursement For: 2022 X Primary General President State: NH District: 00 Subtrotal of Disbursement This Page (optional)	Senate	Primary General	Туре			
B. KUSTOFF FOR CONGRESS Mailing Address 1661 AARON BRENNER DR STE 300 City MEMPHIS Purpose of Disbursement Contribution Candidate Name Disbursement For: 2022 Senate President State: TN District: 08 Full Name (Last, First, Middle Initial) C. MAGGIE FOR NH Mailing Address PO BOX 298 City CONCORD NH Mailing Address PO BOX 298 City CONCORD Office Sought: X Senate Contribution Candidate Name Disbursement For: 2022 Transaction ID: SB23.4462 Amount of Each Disbursement Memo Item FEC Identification Number Category/ Type Date of Disbursement Memo Item FEC Identification Number Category/ Type Transaction ID: SB23.4462 Amount of Each Disbursement Contribution Candidate Name Office Sought: X Senate President State: NH District: 00 Disbursement For: 2022 Memo Item SUBTOTAL of Disbursements This Page (optional)		Curior (opeony) •		Memo Item		
City MEMPHIS Purpose of Disbursement Contribution Candidate Name Category/ Type District: 08 Full Name (Last, First, Middle Initial) C. MAGGIE FOR NH Mailing Address PO BOX 298 City CONCORD Purpose of Disbursement Contribution Candidate Name City Concord Contribution Candidate Name City Concord Contribution Candidate Name Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type FEC Identification Number C C00588772 Transaction ID : SB23.4462 Amount of Each Disbursement this Period Memo Item Subtrotal of Disbursements This Page (optional)	B. KUSTOFF FOR CONGRESS Mailing Address 1661 AARON BRENNER DR		M = M / D = D / Y = Y = Y			
Candidate Name Category/ Type	City MEMPHIS Purpose of Disbursement	l '		C C00614826		
C. MAGGIE FOR NH Mailing Address PO BOX 298 City CONCORD Purpose of Disbursement Contribution Candidate Name Category/ Type Office Sought: House President State: NH District: 00 Date of Disbursement M M M 12 27 2021 FEC Identification Number C C00588772 Transaction ID: SB23.4462 Amount of Each Disbursement this Period Memo Item SUBTOTAL of Disbursements This Page (optional)	Office Sought: X House Disburse Senate President	Primary General		Amount of Each Disbursement this Period 1000.00		
City CONCORD Purpose of Disbursement Contribution Candidate Name Candidate Name Office Sought: House President President State: NH District: 00 State				M M / D D / Y Y Y Y		
CONCORD Purpose of Disbursement Contribution Candidate Name Category/ Type Office Sought: House President State: NH District: 00 NH 03302 Category/ Type Category/ Type Category/ Type Category/ Type Memo Item SUBTOTAL of Disbursements This Page (optional)	Mailing Address PO BOX 298			12 27 2021		
Office Sought: House Disbursement For: 2022 X Senate Primary General Other (specify) ▼ Substract: NH District: 00 Substract: NH Disbursements This Page (optional)	CONCORD Purpose of Disbursement Contribution	'		C C00588772 Transaction ID : SB23.4462		
SOBTOTAL OF DISDUISEMENTS THIS Fage (Optional)	Senate President	Primary General	71.2			
TOTAL This Period (last page this line number only)				5000.00		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 40 OF 43			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(origon oriny	nly one)		
	Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Stater	nonto mov not be cold or us				
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
NATIONAL HEALTH CORPORATI	ION POLITICAL AC	TION COM	MITTEE		
Full Name (Last, First, Middle Initial)					
A. MARK GREEN FOR CONGRESS			Date of Disbursement		
Mailing Address PO BOX 2706			11 10 2021		
City BRENTWOOD	State Zip Code TN 37024		FEC Identification Number		
Purpose of Disbursement	37024				
Contribution			C		
Candidate Name		Category/	Transaction ID : SB23.4464 Amount of Each Disbursement this Period		
		Type			
	ment For: 2022		2000.00		
Senate x	Primary General Other (specify) ▼		п		
State: District:	cuiei (epeeiij) V		Memo Item		
Full Name (Last, First, Middle Initial)					
B. MARK KELLY FOR SENATE			Date of Disbursement		
Mailing Address DO DOV 2700			M = M / D = D / Y = Y = Y		
Mailing Address PO BOX 27202			12 27 2021		
,	State Zip Code		FEC Identification Number		
TUCSON Purpose of Disbursement	AZ 85726				
Contribution			C		
Candidate Name		Category/	Transaction ID : SB23.4466 Amount of Each Disbursement this Period		
		Type			
	ment For: 2022		2500.00		
	Other (specify) General				
State: District:	Carlor (opcony)		Memo Item		
Full Name (Last, First, Middle Initial)					
C. MCCARTHY VICTORY FUND			Date of Disbursement		
Mailing Address PO BOX 30844			08 13 2021		
Mailing Address FO BOX 30044			30 10 2021		
	State Zip Code		FEC Identification Number		
BETHESDA Purpose of Disbursement	MD 20824				
Contribution			Transaction ID : SB23,4468		
Candidate Name		Category/	Amount of Each Disbursement this Period		
		Туре	2522.22		
Camata	ment For: 2022 Primary General		2500.00		
President	Other (specify)		п		
State: District:	(-		Memo Item		
SUBTOTAL of Disbursements This Page (optional)		·····•	7000.00		
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)	Hee consists sale-dut-()	FOR LINE NUMBER: PAGE 41 OF 43
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one) 21b 22 x 23 26 27
	Detailed Summary Page	28a 28b 28c 29 30b
		ed by any person for the purpose of soliciting contributions
	ne and address of any politica	al committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL HEALTH CORPORATI	ON POLITICAL ACT	TION COMMITTEE
Full Name (Last, First, Middle Initial)		Date (201
A. SCALISE LEADERSHIP FUND	Date of Disbursement	
Mailing Address 320 FIRST ST SE		10 20 2021
City WASHINGTON	State Zip Code 20003	FEC Identification Number
Purpose of Disbursement Contribution		C
Candidate Name		Category/ Amount of Each Disbursement this Period
Office Sought: House Disburser	nent For: 2022	Type 2000.00
	Primary General Other (specify) ▼	
State: District:	outer (specify) ▼	Memo Item
Full Name (Last, First, Middle Initial)		
B. STEPHEN LYNCH FOR CONGRE	SS	Date of Disbursement
Mailing Address 169 W 8TH ST		09 / 21 / 2021
City SOUTH BOSTON	State Zip Code MA 02127	FEC Identification Number
Purpose of Disbursement Contribution	02.2.	C
Candidate Name		Category/ Type Transaction ID: SB23.4472 Amount of Each Disbursement this Period
Office Sought: House Disburser	nent For: 2022	1000.00
	Primary General Other (specify)	п
State: District:		Memo Item
Full Name (Last, First, Middle Initial) C. TEAM HAGERTY		Date of Disbursement
Mailing Address 4515 HARDING PIKE STE 110		08 / 27 / 2021
City NASHVILLE	State Zip Code TN 37205	FEC Identification Number
Purpose of Disbursement Contribution	37233	C
Candidate Name		Category/ Amount of Each Disbursement this Period
Canada	ment For: 2020	Type 2500.00
Senate President	Primary General Other (specify) ▼	Memo Item
State: District:		
SUBTOTAL of Disbursements This Page (optional)		5500.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER: PAGE 42 OF 43
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	ho (one on	<i>`</i>
	Detailed Summary Page		22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State	ments may not be sold o		
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
$ \; angle$ NATIONAL HEALTH CORPORAT	ION POLITICAL A	ACTION CON	MMITTEE
Full Name (Last, First, Middle Initial)			
A. TEAM RAND			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 190			11 10 2021
City	State Zip Code		FEC Identification Number
NEWPORT	KY 41072		
Purpose of Disbursement Contribution			C
Candidate Name			Transaction ID : SB23.4476
Sandidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For: 2022	.,,,,	2000.00
Senate x	Primary General	al	
State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. TOM RICE FOR CONGRESS			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO BOX 70098			08 05 2021
City	State Zip Code		FEC Identification Number
MYRTLE BEACH Purpose of Disbursement	SC 29572		
Contribution			C
Candidate Name		Category/	Transaction ID : SB23.4478 Amount of Each Disbursement this Period
		Type	100000
	ment For: 2022	o.l	1000.00
Senate Primary General Other (specify)			
State: District:	(-)		Memo Item
Full Name (Last, First, Middle Initial)			
C. WILLIAM TIMMONS FOR CONGR	RESS		Date of Disbursement
Mailing Address PO BOX 3416			12 17 2021
CREENVILLE	State Zip Code SC 29602		FEC Identification Number
GREENVILLE Purpose of Disbursement	SC 29602		C
Contribution			Transaction ID : SB23.4479
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse	mont For: 0000	Туре	1000.00
Office Sought: House Disburse Senate	ment For: 2022 Primary General	al	1000.00
President	Other (specify) ▼		Memo Item
State: District:	· · · · · · · · · · · · · · · · · · ·		I Metrio Iferit
			4000.00
SUBTOTAL of Disbursements This Page (optional).		······	4000.00
TOTAL This Period (last page this line number only	r)		

S П

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 43 OF 43
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem	ponte may not be cold or us		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
NATIONAL HEALTH CORPORATION	ON POLITICAL AC	TION COM	1MITTEE
Full Name (Last, First, Middle Initial)			
A. WILLIAM TIMMONS FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 3416			12 31 2021
City	State Zip Code		FEC Identification Number
0.1.2_1.1.1_2_	SC 29602		
Purpose of Disbursement Check never cashed			C
Candidate Name Category/			Transaction ID: SB23.4483 Amount of Each Disbursement this Period
WILLIAM TIMMONS FOR CONGR		Type	
	nent For: 2020		- 1000.00
	Primary General		
State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. WYDEN FOR SENATE			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 232 NE 9TH AVENUE			09 21 2021
,	State Zip Code OR 97232		FEC Identification Number
PORTLAND Purpose of Disbursement	OR 97232		С
Contribution			Transaction ID : SB23.4481
Candidate Name Category/			Amount of Each Disbursement this Period
		Type	0500.00
	nent For: 2022		2500.00
	Primary General Other (specify)		
State: District:	Carlor (opcony)		Memo Item
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address			
City	State Zip Code		FEC Identification Number
Purpose of Disbursement			
Fulpose of Disbulsement			C
Candidate Name Category/			Amount of Each Disbursement this Period
		Type	or Each Distriction tills I clied
Office Sought: House Disbursem			4 4
	Primary General		
State: District:	Other (specify) ▼		Memo Item
State. District.			
SUBTOTAL of Disbursements This Page (optional)			1500.00
j /			5000000
TOTAL This Period (last page this line number only).			59000.00