FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **TYPE OR PRINT ▼** — Example: If typing, type over the lines. 12FE4M5

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

ADDRESS (number and street) ▼ 4000 Meridian Blvd

☐ Check if different than previously reported. (ACC)

Franklin | TN | 37067 –

CITY ▲ | STATE ▲ | ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00485896

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

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 08 / 01 / 2026 through 08 / 31 / 2026

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: Pitt, Justin, D., ,

Signature of Treasurer: *Pitt, Justin, D., ,* Date: 09 / 16 / 2026

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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

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

Report Covering the Period: From: 08 / 01 / 2026 To: 08 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		143497.99
(b) Cash on Hand at Beginning of Reporting Period	55287.18	
(c) Total Receipts (from Line 19)	10534.50	102149.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	65821.68	245647.13
7. Total Disbursements (from Line 31)	31159.27	210984.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34662.41	34662.41
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

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

Report Covering the Period: From: 08 / 01 / 2026 To: 08 / 31 / 2026

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)	9473.22	62090.79
(ii) Unitemized	1061.28	40058.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	10534.50	102149.14
(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) ▶	10534.50	102149.14
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	10534.50	102149.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	10534.50	102149.14

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	159.27	1484.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	159.27	1484.72
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	31000.00	209500.00
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)	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	31159.27	210984.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	31159.27	210984.72

DETAILED SUMMARY PAGE
of Disbursements

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)	10534.50	102149.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10534.50	102149.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	159.27	1484.72
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	159.27	1484.72

Image# 202609159904214267

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 6 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Adkins, Tyler, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779809

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780012

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 1329 Highway 64 W

City: Shelbyville | State: TN | Zip Code: 37160

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Vice President, Information Systems

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779862

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 97.75

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

Image# 202609159904214268

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allred, Aaron, , ,

Mailing Address 1329 Highway 64 W

City: Shelbyville | State: TN | Zip Code: 37160

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Vice President, Information Systems

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780065

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 2430 W. Pierce

City: Carlsbad | State: NM | Zip Code: 88220

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Carlsbad Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779857

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 2430 W. Pierce

City: Carlsbad | State: NM | Zip Code: 88220

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Carlsbad Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780060

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 136.21

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

Image# 202609159904214269

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

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

Banks, Matthew, , ,

Mailing Address One Hospital Drive SW

City	State	Zip Code
Huntsville	MS	35801

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual)	Occupation (for Individual)
Crestwood Medical Center	CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 583.38

Date of Receipt: 08 / 14 / 2026

Transaction ID : A2026-1779803

Amount of Each Receipt this Period: 41.67

☐ Memo Item

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

Banks, Matthew, , ,

Mailing Address One Hospital Drive SW

City	State	Zip Code
Huntsville	MS	35801

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual)	Occupation (for Individual)
Crestwood Medical Center	CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 625.05

Date of Receipt: 08 / 28 / 2026

Transaction ID : A2026-1780006

Amount of Each Receipt this Period: 41.67

☐ Memo Item

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

Barnhart, Cody, , ,

Mailing Address 300 Kimball Drive Suite 101

City	State	Zip Code
Parsippany	NJ	07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual)	Occupation (for Individual)
CHSPSC	Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026

Transaction ID : A2026-1779886

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 102.57

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

Image# 202609159904214270

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Barnhart, Cody, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780089

Amount of Each Receipt this Period: 19.23

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bivacca, Donald, J, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Operations Division

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779843

Amount of Each Receipt this Period: 20.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bivacca, Donald, J, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Operations Division

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780046

Amount of Each Receipt this Period: 20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 59.23

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

Image# 202609159904214271

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blakeney, Amy, , ,

Mailing Address 403 Viale Bond

City: Roswell | State: NM | Zip Code: 88201

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eastern New Mexico Medical Center
Occupation (for Individual): Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779792

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 403 Viale Bond

City: Roswell | State: NM | Zip Code: 88201

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eastern New Mexico Medical Center
Occupation (for Individual): Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779995

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 103 Carlyle Drive

City: Madison | State: MS | Zip Code: 39110

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Project Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 625.05

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779808

Amount of Each Receipt this Period: 41.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 99.37

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blaylock, Dwayne, , ,

Mailing Address 103 Carlyle Drive

City: Madison | State: MS | Zip Code: 39110

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Project Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 666.72

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780011

Amount of Each Receipt this Period: 41.67

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & CISO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779860

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & CISO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780063

Amount of Each Receipt this Period: 62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 166.67

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

Image# 202609159904214273

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brewster, Alison, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 321.15

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779882

Amount of Each Receipt this Period: 17.76

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 338.91

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780085

Amount of Each Receipt this Period: 17.76

☐ Memo Item

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

Mailing Address 7950 W. Jefferson Blvd

City: Fort Wayne | State: IN | Zip Code: 46804

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779873

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 54.75

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

Image# 202609159904214274

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brooks, David, , ,

Mailing Address 7950 W. Jefferson Blvd

City: Fort Wayne | State: IN | Zip Code: 46804

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780076

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 3690 Grandview Pkwy

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779784

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 3690 Grandview Pkwy

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779987

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.93

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

Image# 202609159904214275

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) for each category of the Detailed Summary Page

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Buffington, Edna, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Revenue Cycle

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 375.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779729

Amount of Each Receipt this Period: 25.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Revenue Cycle

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 400.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779934

Amount of Each Receipt this Period: 25.00

☐ Memo Item

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

Mailing Address 146 Benachi Ave.

City: Biloxi | State: MS | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779807

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 88.46

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

Image# 202609159904214276

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bullard, Brandon, , ,

Mailing Address 146 Benachi Ave.

City: Biloxi | State: MS | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780010

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779811

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780014

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 96.16

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

Image# 202609159904214277

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bull, Gary, , ,

Mailing Address 1800 University Boulevard

City: Durant | State: OK | Zip Code: 74701

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AllianceHealth Durant & Madill
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779781

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 1499 Fair Road

City: Statesboro | State: GA | Zip Code: 30458

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): East Georgia Regional Medical Ctr
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779804

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 1499 Fair Road

City: Statesboro | State: GA | Zip Code: 30458

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): East Georgia Regional Medical Ctr
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780007

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 115.39

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

Image# 202609159904214278

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Burns, Brian, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779772

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779976

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Prod & Labor Mgmt

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779801

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Burton, Evan, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Prod & Labor Mgmt

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780004

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 327.08

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779825

Amount of Each Receipt this Period: 19.24

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 346.32

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780028

Amount of Each Receipt this Period: 19.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 59.31

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

Image# 202609159904214280

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Byrnes, Michael, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & Assoc Gen Coun

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779745

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & Assoc Gen Coun

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779950

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 850.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779794

Amount of Each Receipt this Period: 50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 91.66

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

Image# 202609159904214281

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Calderon, Amber, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 900.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779997

Amount of Each Receipt this Period: 50.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Regional President

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1562.55

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779702

Amount of Each Receipt this Period: 104.17

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Regional President

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1666.72

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779907

Amount of Each Receipt this Period: 104.17

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 258.34

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

Image# 202609159904214282

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carlisle, Gordon, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Facilities Mainten

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779728

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Facilities Mainten

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779933

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 1613 North McKenzie Street

City: Foley | State: PA | Zip Code: 36535

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): South Baldwin Regional Medical Center
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779713

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 153.85

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

Image# 202609159904214283

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chastang, Karen, , ,

Mailing Address 1613 North McKenzie Street

City: Foley | State: PA | Zip Code: 36535

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): South Baldwin Regional Medical Center
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779918

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779777

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779981

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 70.51

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

Image# 202609159904214284

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cobb, Christopher, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Legal & Corp Secretary

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779738

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Legal & Corp Secretary

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779943

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 2100 Highway 61 North

City: Vicksburg | State: MS | Zip Code: 39183

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health River Region
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779839

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 80.12

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

Image# 202609159904214285

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Conner, Amelia, , ,

Mailing Address 2100 Highway 61 North

City: Vicksburg | State: MS | Zip Code: 39183

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health River Region
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780042

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & Deputy General Couns

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779743

Amount of Each Receipt this Period: 20.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & Deputy General Couns

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 320.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779948

Amount of Each Receipt this Period: 20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 78.46

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

Image# 202609159904214286

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cotton, Michael, , ,

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779704

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779909

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779879

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 97.75

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

Image# 202609159904214287

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crane, Daniel, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780082

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Office Services

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779752

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Office Services

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779957

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cumbie, Daniel, , ,
Mailing Address 4370 West Main Street
City: Dothan | State: AL | Zip Code: 36305
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Flowers Hospital
Occupation (for Individual): CNO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779782
Amount of Each Receipt this Period: 28.85
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cumbie, Daniel, , ,
Mailing Address 4370 West Main Street
City: Dothan | State: AL | Zip Code: 36305
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Flowers Hospital
Occupation (for Individual): CNO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779985
Amount of Each Receipt this Period: 28.85
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Custer, Joshua, , ,
Mailing Address 1551 E. Tangerine Road
City: Oro Valley | State: AZ | Zip Code: 85755
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Oro Valley Hospital
Occupation (for Individual): CFO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779800
Amount of Each Receipt this Period: 19.23
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.93

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

Image# 202609159904214289

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Custer, Joshua, , ,

Mailing Address 1551 E. Tangerine Road

City: Oro Valley | State: AZ | Zip Code: 85755

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Oro Valley Hospital
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780003

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 9695 Sapphire Ct.

City: Brentwood | State: TN | Zip Code: 37027

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Anesthesiology Ops

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779876

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 9695 Sapphire Ct.

City: Brentwood | State: TN | Zip Code: 37027

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Anesthesiology Ops

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780079

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 60.89

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

Image# 202609159904214290

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Steve, , ,

Mailing Address 151 Redstone Avenue, S.E.

City: Crestview | State: FL | Zip Code: 32539-5352

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): North Okaloosa Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779700

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 151 Redstone Avenue, S.E.

City: Crestview | State: FL | Zip Code: 32539-5352

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): North Okaloosa Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779905

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Financial Tax

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779740

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 97.75

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

Image# 202609159904214291

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dreiman, Jay, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Financial Tax

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779945

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 1241 North Nassau Circle

City: Mesa | State: AZ | Zip Code: 85205

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Project Chief Nursing Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779703

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 1241 North Nassau Circle

City: Mesa | State: AZ | Zip Code: 85205

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Project Chief Nursing Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779908

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

Image# 202609159904214292

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Durham, Paula, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP CBO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779732

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP CBO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779937

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 350 Crossgates Boulevard

City: Brandon | State: MS | Zip Code: 39042

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Rankin
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779767

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 70.51

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ellis, Cynthia, , ,
Mailing Address 350 Crossgates Boulevard
City: Brandon | State: MS | Zip Code: 39042
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Merit Health Rankin
Occupation (for Individual): CNO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 519.30
Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779971
Amount of Each Receipt this Period: 28.85
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ellison, Keith, , ,
Mailing Address 2901 N. Fourth Street
PO Box 14000
City: Longview | State: TX | Zip Code: 75605
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): CNO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 461.60
Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779779
Amount of Each Receipt this Period: 28.85
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ellison, Keith, , ,
Mailing Address 2901 N. Fourth Street
PO Box 14000
City: Longview | State: TX | Zip Code: 75605
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): CNO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 490.45
Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779983
Amount of Each Receipt this Period: 28.85
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 86.55

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

Image# 202609159904214294

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) for each category of the Detailed Summary Page

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Estes, Steven, , ,

Mailing Address 2813 Windemere Dr.

City: Nashville | State: TN | Zip Code: 37214

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Business Development

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 750.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779872

Amount of Each Receipt this Period: 50.00

☐ Memo Item

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

Mailing Address 2813 Windemere Dr.

City: Nashville | State: TN | Zip Code: 37214

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Business Development

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 800.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780075

Amount of Each Receipt this Period: 50.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & Assoc Gen Coun

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779835

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 120.83

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

Image# 202609159904214295

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fenelon, Frances, , ,
Mailing Address 4000 Meridian Blvd.
City: Franklin | State: TN | Zip Code: 37067
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP & Assoc Gen Coun
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780038
Amount of Each Receipt this Period: 20.83
☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Flatt, Ethan, G, ,
Mailing Address 4000 Meridian Blvd.
City: Franklin | State: TN | Zip Code: 37067
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Vice President, Acquisitions & Develop
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779833
Amount of Each Receipt this Period: 20.83
☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Flatt, Ethan, G, ,
Mailing Address 4000 Meridian Blvd.
City: Franklin | State: TN | Zip Code: 37067
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Vice President, Acquisitions & Develop
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780036
Amount of Each Receipt this Period: 20.83
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

Image# 202609159904214296

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ford, Jarvis, , ,

Mailing Address P.O. Box 3

City: Natchez | State: MS | Zip Code: 39121

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Natchez
Occupation (for Individual): Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779760

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address P.O. Box 3

City: Natchez | State: MS | Zip Code: 39121

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Natchez
Occupation (for Individual): Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779965

Amount of Each Receipt this Period: 19.23

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Galbreath, Patricia, O, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: PA | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Access Center Services
Occupation (for Individual): Sr Dir Transfer Center

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779823

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 57.69

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

Image# 202609159904214297

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Galbreath, Patricia, O, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: PA | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Access Center Services
Occupation (for Individual): Sr Dir Transfer Center

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780026

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): EVP Corp Comm Mktg & PA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1500.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779754

Amount of Each Receipt this Period: 100.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): EVP Corp Comm Mktg & PA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1600.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779959

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 219.23

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Galloway, David, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: PA | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eligibility Screening Ser
Occupation (for Individual): VP ESS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779708

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: PA | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eligibility Screening Ser
Occupation (for Individual): VP ESS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779913

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 1007 Goodyear Avenue

City: Gadsden | State: AL | Zip Code: 35903

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Gadsden Regional Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779770

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.92

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

Image# 202609159904214299

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garmany, Kandi, , ,

Mailing Address 1007 Goodyear Avenue

City: Gadsden | State: AL | Zip Code: 35903

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Gadsden Regional Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779974

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Sr Employment Couns

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779721

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Sr Employment Couns

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779926

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 80.12

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

Image# 202609159904214300

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Golden, Tyler, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Corporate Compliance

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779789

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Corporate Compliance

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779992

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 2901 N. Fourth Street
PO Box 14000

City: Longview | State: IL | Zip Code: 75605

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779854

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 99.35

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

Image# 202609159904214301

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gordon, Steve, , ,

Mailing Address 2901 N. Fourth Street
PO Box 14000

City: Longview | State: IL | Zip Code: 75605

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780057

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): VP Business Development

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779786

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): VP Business Development

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779989

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 96.15

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

Image# 202609159904214302

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Graves, Eric, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Sr Dir Revenue Mgt

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779735

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Sr Dir Revenue Mgt

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779940

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779883

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 70.51

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

Image# 202609159904214303

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Griffin, Barbara, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780086

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 1119 Simonton Ln.

City: Key West | State: FL | Zip Code: 33040

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lower Keys Medical Center
Occupation (for Individual): Chief Nrsg Officer (CNO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779881

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 1119 Simonton Ln.

City: Key West | State: FL | Zip Code: 33040

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lower Keys Medical Center
Occupation (for Individual): Chief Nrsg Officer (CNO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780084

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 86.55

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

Image# 202609159904214304

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hall, Charles, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779796

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779999

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779815

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 57.69

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

Image# 202609159904214305

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hamilton, Debra, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780018

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 6169 Woodstone Dr

City: Naples | State: FL | Zip Code: 34112

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): COLLIER PHYSICIANS REGIONAL
Occupation (for Individual): Chief Nursing Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779718

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 6169 Woodstone Dr

City: Naples | State: FL | Zip Code: 34112

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): COLLIER PHYSICIANS REGIONAL
Occupation (for Individual): Chief Nursing Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779923

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.93

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

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

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): EVP, CHRO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1562.55

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779726

Amount of Each Receipt this Period: 104.17

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): EVP, CHRO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1666.72

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779931

Amount of Each Receipt this Period: 104.17

☐ Memo Item

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

Mailing Address 3150 Bristol St. Ste 500

City: Costa Mesa | State: CA | Zip Code: 92626

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Woodland Heights Medical Center
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779705

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 246.80

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

Image# 202609159904214307

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hendren, Kenneth, , ,

Mailing Address 3150 Bristol St. Ste 500

City: Costa Mesa | State: CA | Zip Code: 92626

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Woodland Heights Medical Center
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779910

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Nursing Operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779867

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Nursing Operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780070

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 80.12

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

Image# 202609159904214308

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hester, Joey, , ,

Mailing Address 400 North Edwards Street

City: Enterprise | State: TN | Zip Code: 36330

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medical Center Enterprise
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779783

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 400 North Edwards Street

City: Enterprise | State: TN | Zip Code: 36330

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medical Center Enterprise
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779986

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 435 Second Street

City: Newport | State: TN | Zip Code: 37821

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare - Newport Medical Ce
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 245.14

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779816

Amount of Each Receipt this Period: 14.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 91.34

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

Image# 202609159904214309

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, Deanna, , ,

Mailing Address 435 Second Street

City: Newport | State: TN | Zip Code: 37821

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare - Newport Medical Ce
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 259.56

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780019

Amount of Each Receipt this Period: 14.42

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Horrar, James, L, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP Managed Care

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779790

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP Managed Care

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779993

Amount of Each Receipt this Period: 62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 139.42

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

Image# 202609159904214310

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Huffine, Daniel, , ,

Mailing Address 1809 Barton Hills Drive

City: Austin | State: TX | Zip Code: 78704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): Market Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779763

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 1809 Barton Hills Drive

City: Austin | State: TX | Zip Code: 78704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): Market Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779968

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779880

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 105.77

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

Image# 202609159904214311

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hughes, Ben, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780083

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance Region

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779731

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance Region

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779936

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 70.51

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

Image# 202609159904214312

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jamison, Ashley, , ,

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: PA | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: – 500.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779791

Amount of Each Receipt this Period: – 500.00

☐ Memo Item

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

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: PA | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: – 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779994

Amount of Each Receipt this Period: – 500.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP CAO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 2500.05

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779695

Amount of Each Receipt this Period: 166.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ – 833.33

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

Image# 202609159904214313

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Jason, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP CAO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2666.72

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779900

Amount of Each Receipt this Period: 166.67

☐ Memo Item

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

Mailing Address 85 East US Highway 6

City: Valparaiso | State: IN | Zip Code: 46383

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwest Health - Porter
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779827

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 85 East US Highway 6

City: Valparaiso | State: IN | Zip Code: 46383

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwest Health - Porter
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780030

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 208.33

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

Image# 202609159904214314

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Junkins, Curt, , ,

Mailing Address 7201 East State Highway

City: Granbury | State: TX | Zip Code: 76048

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lake Granbury Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779780

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 7201 East State Highway

City: Granbury | State: TX | Zip Code: 76048

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lake Granbury Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779984

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 19074 Whispering Woods Trail

City: Kirksville | State: MO | Zip Code: 63501

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northeast Regional Medical Center
Occupation (for Individual): Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779691

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 153.84

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kay, Elliott, , ,

Mailing Address 19074 Whispering Woods Trail

City	State	Zip Code
Kirksville	MO	63501

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Northeast Regional Medical Center	Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026

Transaction ID : A2026-1779896

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 3150 Bristol St. Ste 500

City	State	Zip Code
Costa Mesa	CA	92626

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Navarro Regional Hospital	Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026

Transaction ID : A2026-1779877

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 3150 Bristol St. Ste 500

City	State	Zip Code
Costa Mesa	CA	92626

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Navarro Regional Hospital	Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026

Transaction ID : A2026-1780080

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 115.38

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

Image# 202609159904214316

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Knight, Wesley, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779799

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780002

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 5001 Hardy Street

City: Hattiesburg | State: MS | Zip Code: 39402

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Wesley
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779785

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 96.15

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

Image# 202609159904214317

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kolaczek, Richard, , ,

Mailing Address 5001 Hardy Street

City: Hattiesburg | State: MS | Zip Code: 39402

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Wesley
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779988

Amount of Each Receipt this Period: 19.23

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Komoll, Michael, S, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Risk Mgmt

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779845

Amount of Each Receipt this Period: 20.83

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Komoll, Michael, S, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Risk Mgmt

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780048

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 60.89

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kovalcik, Jennifer, L, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Tech Int Property Coun

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779829

Amount of Each Receipt this Period: 20.83

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kovalcik, Jennifer, L, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Tech Int Property Coun

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780032

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 2101 East DuBois Drive

City: Warsaw | State: IN | Zip Code: 46580

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779826

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 60.89

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kurgan, Ivy, , ,

Mailing Address 2101 East DuBois Drive

City	State	Zip Code
Warsaw	IN	46580

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Lutheran Hospital	ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780029

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 1700 East Saunders

City	State	Zip Code
Laredo	TX	78041

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Laredo Medical Center	CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779788

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 1700 East Saunders

City	State	Zip Code
Laredo	TX	78041

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Laredo Medical Center	CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779991

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 134.61

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Brett, , ,

Mailing Address 16260 S. Rancho Blvd.

City	State	Zip Code
Sahuarita	TN	85629

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Northwest Medical Center - Sahuarita	CAO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779858

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 16260 S. Rancho Blvd.

City	State	Zip Code
Sahuarita	TN	85629

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Northwest Medical Center - Sahuarita	CAO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780061

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd

City	State	Zip Code
Franklin	TN	37067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
CHSPSC LLC	VP Operations Division

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779875

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 97.75

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lind, Richard, , ,

Mailing Address 4000 Meridian Blvd

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Operations Division

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780078

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Corporate Communic

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779725

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Corporate Communic

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779930

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

Image# 202609159904214322

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lomicka, Ted, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Strategic Analysis

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779730

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Strategic Analysis

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779935

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 347.74

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779742

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 144.23

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Luke, Leslie, , ,

Mailing Address 300 Kimball Drive Suite 101

City	State	Zip Code
Parsippany	NJ	07054

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 366.97

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779947

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City	State	Zip Code
Franklin	TN	37067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP Financial Services

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779746

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City	State	Zip Code
Franklin	TN	37067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP Financial Services

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779951

Amount of Each Receipt this Period: 62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 144.23

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Manolakis, John, , ,

Mailing Address 3201 W. Highway 22

City: Corsicana | State: TX | Zip Code: 75110

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Navarro Regional Hospital
Occupation (for Individual): ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779859

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 3201 W. Highway 22

City: Corsicana | State: TX | Zip Code: 75110

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Navarro Regional Hospital
Occupation (for Individual): ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780062

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Behavioral Health

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 450.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779861

Amount of Each Receipt this Period: 30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 68.46

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

Image# 202609159904214325

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Martin, Drew, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Behavioral Health

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 480.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780064

Amount of Each Receipt this Period: 30.00

☐ Memo Item

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

Mailing Address 3150 Bristol St. Ste 500

City: Costa Mesa | State: CA | Zip Code: 92626

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): Chief Nrsg Officer (CNO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779778

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 3150 Bristol St. Ste 500

City: Costa Mesa | State: CA | Zip Code: 92626

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): Chief Nrsg Officer (CNO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779982

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 87.70

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

Image# 202609159904214326

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maxfield, Brett, , ,

Mailing Address 150 Reynoir Street

City: Biloxi | State: MS | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779814

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 150 Reynoir Street

City: Biloxi | State: MS | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780017

Amount of Each Receipt this Period: 19.23

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McClure, Jennifer, K, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Access Center Services
Occupation (for Individual): VP Access & Transfer Ctr

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779820

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 57.69

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McClure, Jennifer, K, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Access Center Services
Occupation (for Individual): VP Access & Transfer Ctr

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780023

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 400 North Edwards Street

City: Enterprise | State: AL | Zip Code: 36330

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medical Center Enterprise
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 245.14

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779717

Amount of Each Receipt this Period: 14.42

☐ Memo Item

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

Mailing Address 400 North Edwards Street

City: Enterprise | State: AL | Zip Code: 36330

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Medical Center Enterprise
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 259.56

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779921

Amount of Each Receipt this Period: 14.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 48.07

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

Image# 202609159904214328

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McKinney, Daniel, , ,

Mailing Address 3690 Grandview Parkway

City: Birmingham | State: AL | Zip Code: 35243

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Grandview Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779715

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Regional President

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1562.55

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779842

Amount of Each Receipt this Period: 104.17

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Regional President

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1666.72

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780045

Amount of Each Receipt this Period: 104.17

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 266.03

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Meurer, Bryan, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Operations Support

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 625.05

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779733

Amount of Each Receipt this Period: 41.67

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Operations Support

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 666.72

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779938

Amount of Each Receipt this Period: 41.67

☐ Memo Item

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

Mailing Address 1700 East Saunders

City: Laredo | State: TX | Zip Code: 78041

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): AS

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779865

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 102.57

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

Image# 202609159904214330

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Minarelli, Jordan, , ,

Mailing Address 1700 East Saunders

City: Laredo | State: TX | Zip Code: 78041

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): AS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780068

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 4309 Essex Terrace Cir.

City: Pace | State: FL | Zip Code: 32571

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Santa Rosa Medical Center
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779716

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 4309 Essex Terrace Cir.

City: Pace | State: FL | Zip Code: 32571

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Santa Rosa Medical Center
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779920

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 96.15

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Morrison, Kevin, , ,

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): MKT CFO OPS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779824

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): MKT CFO OPS

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780027

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 2901 N. Fourth Street
PO Box 14000

City: Longview | State: TX | Zip Code: 75605

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): ACNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779868

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 70.51

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

Image# 202609159904214332

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Murphy, Laura, , ,

Mailing Address 2901 N. Fourth Street
PO Box 14000

City: Longview | State: TX | Zip Code: 75605

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): ACNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780071

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779870

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780073

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 86.55

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

Image# 202609159904214333

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Norton, Tricia, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP CDI

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779711

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP CDI

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779916

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance Budgeting

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 324.36

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779748

Amount of Each Receipt this Period: 17.56

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 59.22

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

Image# 202609159904214334

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pace, Hugh, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance Budgeting

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 341.92

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779953

Amount of Each Receipt this Period: 17.56

☐ Memo Item

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

Mailing Address 5 Twin Berry Ct

City: Roswell | State: NM | Zip Code: 88201

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eastern New Mexico Medical Center
Occupation (for Individual): Assistant Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779758

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 5 Twin Berry Ct

City: Roswell | State: NM | Zip Code: 88201

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Eastern New Mexico Medical Center
Occupation (for Individual): Assistant Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779963

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 56.02

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

Mailing Address 2735 Silver Creek Road

City: Bullhead City | State: MO | Zip Code: 86442

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Western Arizona Regional Medical Cente
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779798

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 2735 Silver Creek Road

City: Bullhead City | State: MO | Zip Code: 86442

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Western Arizona Regional Medical Cente
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780001

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 1499 Fair Road

City: Statesboro | State: GA | Zip Code: 30458

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): East Georgia Regional Medical Ctr
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779769

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 173.07

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

Image# 202609159904214336

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pennington, Stephen, , ,

Mailing Address 1499 Fair Road

City: Statesboro | State: GA | Zip Code: 30458

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): East Georgia Regional Medical Ctr
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779973

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): ATA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 307.68

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779851

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): ATA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780054

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 96.15

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pettit, Matt, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779869

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780072

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Strategic Plng & Mktg

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779819

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 59.29

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

Image# 202609159904214338

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Strategic Plng & Mktg

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780022

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 8404 Sebastian Lake Dr.

City: Hackett | State: AR | Zip Code: 72937

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Shared Services Center-Fort Smith
Occupation (for Individual): VP Shared Service Ctr

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779813

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 8404 Sebastian Lake Dr.

City: Hackett | State: AR | Zip Code: 72937

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Shared Services Center-Fort Smith
Occupation (for Individual): VP Shared Service Ctr

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 365.37

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780016

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 59.29

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

Image# 202609159904214339

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pickard, Craig, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP Corporate Taxation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779727

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): SVP Corporate Taxation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779932

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): EVP Gen Counsel Ass't Sec

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1875.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779744

Amount of Each Receipt this Period: 125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pitt, Justin, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): EVP Gen Counsel Ass't Sec

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779949

Amount of Each Receipt this Period: 125.00

☐ Memo Item

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

Mailing Address 161 River Oaks Drive
PO Box 1607

City: Canton | State: MS | Zip Code: 39046

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Madison
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779697

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 161 River Oaks Drive
PO Box 1607

City: Canton | State: MS | Zip Code: 39046

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Madison
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779902

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 182.70

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Posey, Phillip, A, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779847

Amount of Each Receipt this Period: 20.83

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Posey, Phillip, A, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780050

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779874

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 60.89

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

Image# 202609159904214342

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ravula, Hrudhaysimha, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780077

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779889

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780092

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 57.69

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

Image# 202609159904214343

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Redmond III, Richard, J, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CH AVIATION
Occupation (for Individual): VP Flight Operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779846

Amount of Each Receipt this Period: 20.83

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Redmond III, Richard, J, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CH AVIATION
Occupation (for Individual): VP Flight Operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780049

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP, HR

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779734

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

Image# 202609159904214344

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
CHS/Community Health Systems, Inc. Political Action Cmte (CHS PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Reeves, Leanne, C, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP, HR

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779939

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 110 Hospital Drive

City: Jefferson City | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare - Jefferson Memoria
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779818

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 110 Hospital Drive

City: Jefferson City | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare - Jefferson Memoria
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780021

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 136.21

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rizley, Nicholas, , ,

Mailing Address 5530 Entrada Ultima

City: Tucson | State: AZ | Zip Code: 85718

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwest Medical Center
Occupation (for Individual): Chief Operating Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779890

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 5530 Entrada Ultima

City: Tucson | State: AZ | Zip Code: 85718

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Northwest Medical Center
Occupation (for Individual): Chief Operating Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780093

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 1700 East Saunders

City: Laredo | State: PA | Zip Code: 78041

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779787

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.92

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rodriguez, Marco, , ,

Mailing Address 1700 East Saunders

City	State	Zip Code
Laredo	PA	78041

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Laredo Medical Center	CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779990

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 2520 E. Dupont Road

City	State	Zip Code
Fort Wayne	IN	46825

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Dupont Hospital	ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779837

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 2520 E. Dupont Road

City	State	Zip Code
Fort Wayne	IN	46825

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Dupont Hospital	ACEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780040

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.92

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Roley, Margaret, , ,

Mailing Address 1613 North McKenzie Street

City: Foley | State: TN | Zip Code: 36535

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): South Baldwin Regional Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779714

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 1613 North McKenzie Street

City: Foley | State: TN | Zip Code: 36535

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): South Baldwin Regional Medical Center
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779919

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 2521 E Mtn Village Dr #B-491

City: Wasilla | State: AK | Zip Code: 99654

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mat-Su Regional Medical Center
Occupation (for Individual): Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779688

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 173.07

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

Image# 202609159904214348

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rudd, Taylor, , ,

Mailing Address 2521 E Mtn Village Dr #B-491

City: Wasilla | State: AK | Zip Code: 99654

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mat-Su Regional Medical Center
Occupation (for Individual): Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779893

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 6339 Shadow Ridge Ct.

City: Brentwood | State: TN | Zip Code: 37027

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779871

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 6339 Shadow Ridge Ct.

City: Brentwood | State: TN | Zip Code: 37027

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780074

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 99.35

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

Image# 202609159904214349

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Samrow, Kevin, , ,

Mailing Address 1800 University Boulevard

City: Durant | State: OK | Zip Code: 74701

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AllianceHealth Durant & Madill
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779806

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 1800 University Boulevard

City: Durant | State: OK | Zip Code: 74701

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): AllianceHealth Durant & Madill
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780009

Amount of Each Receipt this Period: 38.46

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Saunders, Jerri, L, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP HIM

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779836

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 97.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Saunders, Jerri, L, ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP HIM

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780039

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 5085 Rose Road

City: Plymouth | State: IN | Zip Code: 46563

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): Chief Nursing Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779765

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 5085 Rose Road

City: Plymouth | State: IN | Zip Code: 46563

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): Chief Nursing Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779892

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 59.29

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

Image# 202609159904214351

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Serrano, Justin, , ,

Mailing Address 6002 Berryhill Road

City: Milton | State: FL | Zip Code: 32570

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Santa Rosa Medical Center
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779864

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 6002 Berryhill Road

City: Milton | State: FL | Zip Code: 32570

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Santa Rosa Medical Center
Occupation (for Individual): COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780067

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 6002 Berryhill Road

City: Milton | State: FL | Zip Code: 32570

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Santa Rosa Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779712

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 134.61

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

Image# 202609159904214352

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sisk, Rodney, , ,

Mailing Address 6002 Berryhill Road

City: Milton | State: FL | Zip Code: 32570

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Santa Rosa Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779917

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 150 Reynoir Street

City: Biloxi | State: TX | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779696

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 150 Reynoir Street

City: Biloxi | State: TX | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779901

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 134.61

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

Image# 202609159904214353

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Skrzyniarz, Douglas, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Government Relations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779855

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Government Relations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780058

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance Provider Svcs

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779747

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 62.49

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

Image# 202609159904214354

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Slaughter, Nicole, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Finance Provider Svcs

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779952

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4311 East Lohman Avenue

City: Las Cruces | State: NM | Zip Code: 88011

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mountainview Regional Medical Center
Occupation (for Individual): ACNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779856

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 4311 East Lohman Avenue

City: Las Cruces | State: NM | Zip Code: 88011

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Mountainview Regional Medical Center
Occupation (for Individual): ACNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780059

Amount of Each Receipt this Period: 28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 78.53

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stockton, Kevin, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Regional President

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1875.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779768

Amount of Each Receipt this Period: 125.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): Regional President

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779972

Amount of Each Receipt this Period: 125.00

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Revenue Management

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779737

Amount of Each Receipt this Period: 62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 312.50

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

Image# 202609159904214356

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Summar, Nathaniel, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Revenue Management

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779942

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 2125 BALCONES PLACE

City: Belton | State: TX | Zip Code: 76513

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779689

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 2125 BALCONES PLACE

City: Belton | State: TX | Zip Code: 76513

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779894

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 177.88

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

Image# 202609159904214357

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thames, Suzanne, , ,

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779776

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 10820 Parkside Drive

City: Knoxville | State: TN | Zip Code: 37934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare, Turkey Creek Med C
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779980

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 3150 Bristol St. Ste 500

City: Costa Mesa | State: CA | Zip Code: 92626

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 425.00

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779698

Amount of Each Receipt this Period: 25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 101.92

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Till, Karen, , ,

Mailing Address 3150 Bristol St. Ste 500

City: Costa Mesa | State: CA | Zip Code: 92626

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): Chief Fin Officer (CFO)

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 450.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779903

Amount of Each Receipt this Period: 25.00

☐ Memo Item

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

Mailing Address 2901 N. Fourth Street
PO Box 14000

City: Longview | State: TX | Zip Code: 75605

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): ATA

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779863

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 2901 N. Fourth Street
PO Box 14000

City: Longview | State: TX | Zip Code: 75605

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Longview Regional Medical Center
Occupation (for Individual): ATA

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780066

Amount of Each Receipt this Period: 19.23

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 63.46

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Toungette, Kathryn, I, ,

Mailing Address 4001 Cane Ridge Pkwy

City: Antioch | State: TN | Zip Code: 37013

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): HR/PR Service Center
Occupation (for Individual): Sr Dir Regional HR

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 326.91

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779710

Amount of Each Receipt this Period: 19.23

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Toungette, Kathryn, I, ,

Mailing Address 4001 Cane Ridge Pkwy

City: Antioch | State: TN | Zip Code: 37013

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): HR/PR Service Center
Occupation (for Individual): Sr Dir Regional HR

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779915

Amount of Each Receipt this Period: 19.23

☐ Memo Item

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

Mailing Address 1310 Paluxy Road

City: Granbury | State: TX | Zip Code: 76048

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lake Granbury Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779766

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 76.92

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Turner, Amie, , ,

Mailing Address 1310 Paluxy Road

City: Granbury | State: TX | Zip Code: 76048

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lake Granbury Medical Center
Occupation (for Individual): CFO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779970

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 2000 Aureum Drive
Apartment 743

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Vice President, Information Systems

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779690

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 2000 Aureum Drive
Apartment 743

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Vice President, Information Systems

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779895

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 80.12

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Villarreal, Norma, , ,

Mailing Address 48 Finca Loop

City: Laredo | State: TX | Zip Code: 78045

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): Chief Medical Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 490.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779764

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 48 Finca Loop

City: Laredo | State: TX | Zip Code: 78045

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Laredo Medical Center
Occupation (for Individual): Chief Medical Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 519.30

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779969

Amount of Each Receipt this Period: 28.85

☐ Memo Item

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

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779694

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 96.16

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Warren, Terri, , ,

Mailing Address 300 Kimball Drive Suite 101

City: Parsippany | State: NJ | Zip Code: 07054

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Executive

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779899

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 2 Darwin Ct

City: Columbia | State: IL | Zip Code: 62236

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare - Jefferson Memoria
Occupation (for Individual): Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779762

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 2 Darwin Ct

City: Columbia | State: IL | Zip Code: 62236

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennova Healthcare - Jefferson Memoria
Occupation (for Individual): Chief Executive Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779967

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 115.38

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weese, Heather, , ,

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Pharmacy Operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779771

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Pharmacy Operations

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779975

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 150 Reynoir Street

City: Biloxi | State: MS | Zip Code: 39530

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Merit Health Biloxi
Occupation (for Individual): CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 245.14

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779810

Amount of Each Receipt this Period: 14.42

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 56.08

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Rachael, , ,

Mailing Address 150 Reynoir Street

City	State	Zip Code
Biloxi	MS	39530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Merit Health Biloxi	CNO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 259.56

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780013

Amount of Each Receipt this Period: 14.42

☐ Memo Item

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

Mailing Address 435 Second Street

City	State	Zip Code
Newport	TN	37821

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Tennova Healhcare - Newport Medical Ce	CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 653.82

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779852

Amount of Each Receipt this Period: 38.46

☐ Memo Item

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

Mailing Address 435 Second Street

City	State	Zip Code
Newport	TN	37821

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual)	Occupation (for Individual)
Tennova Healhcare - Newport Medical Ce	CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1780055

Amount of Each Receipt this Period: 38.46

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 91.34

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

Image# 202609159904214365

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 104 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

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

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 937.50

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779723

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd.

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

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

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779928

Amount of Each Receipt this Period: 62.50

☐ Memo Item

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

Mailing Address 7950 W. Jefferson Blvd.

City: Fort Wayne | State: NC | Zip Code: 46804

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 980.73

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779707

Amount of Each Receipt this Period: 57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 182.69

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

Image# 202609159904214366

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 105 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wood, Clyde, , ,

Mailing Address 7950 W. Jefferson Blvd.

City: Fort Wayne | State: NC | Zip Code: 46804

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): CEO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1038.42

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779912

Amount of Each Receipt this Period: 57.69

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Hospital Ops

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779706

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 4000 Meridian Blvd

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC LLC
Occupation (for Individual): VP Hospital Ops

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779911

Amount of Each Receipt this Period: 20.83

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 99.35

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

Image# 202609159904214367

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 106 OF 112

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zeynalov, Vugar, , ,

Mailing Address 6043 Lookaway Cir

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Vice President, Chief Information Offi

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 312.45

Date of Receipt: 08 / 14 / 2026
Transaction ID : A2026-1779891

Amount of Each Receipt this Period: 20.83

☐ Memo Item

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

Mailing Address 6043 Lookaway Cir

City: Franklin | State: TN | Zip Code: 37067

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHSPSC
Occupation (for Individual): Vice President, Chief Information Offi

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 333.28

Date of Receipt: 08 / 28 / 2026
Transaction ID : A2026-1779922

Amount of Each Receipt this Period: 20.83

☐ 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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 41.66

TOTAL This Period (last page this line number only) ▶ 9473.22

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

A.
Full Name (Last, First, Middle Initial)
Wells Fargo
Mailing Address PO Box 63020
City: San Francisco | State: CA | Zip Code: 94163
Purpose of Disbursement: Bank Service Charge
Candidate Name
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2026
☐ Primary ☐ General ☒ Other (specify) ▼ Not Applicable
Date of Disbursement: 08 / 11 / 2026
FEC Identification Number: C
Transaction ID : B931989
Amount of Each Disbursement this Period: 159.27
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 159.27

TOTAL This Period (last page this line number only) ▶ 159.27

Image# 202609159904214369

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)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
Diana DeGette for Congress Inc.
Mailing Address P.O. Box 61337
City: Denver | State: CO | Zip Code: 80206
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: DeGette, Diana, L, ,
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 01
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 20 / 2026
FEC Identification Number: C C00311639
Transaction ID : B926750
Amount of Each Disbursement this Period: – 2500.00
[ ] Memo Item
Void check originally originally dated 6/23/26

B.
Full Name (Last, First, Middle Initial)
Alvarado for Kentucky
Mailing Address 3250 McClure Rd
City: Winchester | State: KY | Zip Code: 40391
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Alvarado, Ralph, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: KY District: 06
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00912303
Transaction ID : B931351
Amount of Each Disbursement this Period: 1000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Derek Tran for Congress
Mailing Address 10441 STANFORD AVENUE #395
City: Garden Grove | State: CA | Zip Code: 92842
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Tran, Derek, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 45
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00851790
Transaction ID : B931341
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

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

Image# 202609159904214370

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)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
Don Davis for NC
Mailing Address PO Box 511
City: Snow Hill | State: NC | Zip Code: 28580
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Davis, Don, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NC District: 01
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00795211
Transaction ID : B931347
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Friends of Mark Warner
Mailing Address 1490-5A Quarterpath Rd #213
City: Williamsburg | State: VA | Zip Code: 23185
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Warner, Mark, , ,
Office Sought: [ ] House [X] Senate [ ] President
State: VA District:
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00438713
Transaction ID : B931350
Amount of Each Disbursement this Period: 5000.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Gillen for NY
Mailing Address PO Box 33079
City: Washington | State: DC | Zip Code: 20036
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Gillen, Laura, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 04
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00840165
Transaction ID : B931345
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

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)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
Jeffries for Congress
Mailing Address PO Box 65322
City: Washington | State: DC | Zip Code: 20035
Purpose of Disbursement: Contribution
Candidate Name: Jeffries, Hakeem, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 08
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00503052
Transaction ID : B931349
Amount of Each Disbursement this Period: 5000.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Kaptur for Congress
Mailing Address P.O. Box 899
City: Toledo | State: OH | Zip Code: 43697
Purpose of Disbursement: Contribution
Candidate Name: Kaptur, Marcy, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 09
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00154625
Transaction ID : B931343
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Kristen for Michigan
Mailing Address PO Box 854
City: Bay City | State: MI | Zip Code: 48707
Purpose of Disbursement: Contribution
Candidate Name: McDonald Rivet, Kristen, , ,
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 08
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00864207
Transaction ID : B931344
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

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

Image# 202609159904214372

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)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
LANDSMAN FOR CONGRESS
Mailing Address P.O. Box 68033
City: Cincinnati | State: OH | Zip Code: 45206
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Landsman, Greg, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 01
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00800276
Transaction ID : B931348
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Moody for Florida
Mailing Address 301 W. Platt St., #A663
City: Tampa | State: FL | Zip Code: 33606
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Moody, Ashley, , ,
Office Sought: [ ] House [X] Senate [ ] President
State: FL District: 00
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00895763
Transaction ID : B931352
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Nevadans for Steven Horsford
Mailing Address P.O. Box 336664
City: North Las Vegas | State: NV | Zip Code: 89033
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Horsford, Steven, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: NV District: 04
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00668228
Transaction ID : B931346
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

Image# 202609159904214373

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)
21b 22 [X] 23 26 27
28a 28b 28c 29 30b

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

A.
Full Name (Last, First, Middle Initial)
Vicente Gonzalez For Congress
Mailing Address PO Box 6270
City: Brownsville | State: TX | Zip Code: 78523
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name: Gonzalez, Vicente, , ,
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 34
Disbursement For: 2026 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 08 / 27 / 2026
FEC Identification Number: C C00592659
Transaction ID : B931342
Amount of Each Disbursement this Period: 2500.00
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Category/Type
Candidate Name
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Category/Type
Candidate Name
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00

TOTAL This Period (last page this line number only) ▶ 31000.00