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51/30400363/3

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Us	se Only
NAME OF COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
LifePoint Health PAC - The PAC of LifePoin	nt Corporate Services, General Pa	artnership ("LCSGP") and facilities which	are subsidiaries of LifePoint Hea	alth (collectively "LifePoint")
ADDRESS (number and street)	330 Seven Springs Way			
Check if different				
than previously reported. (ACC)	Brentwood		TN 37027	,
2. FEC IDENTIFICATION NUM	BER ▼ CIT	Y 🛦	STATE ▲	ZIP CODE ▲
C C00347955		S THIS X NEW (N) OF	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report	20 (M2) X May 20 (M	5) Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar	20 (M3) Jun 20 (M6	Sep 20 (M9)	Dec 20 (M12) (Non-Election
(a) Quarterly Reports:	Apr	20 (M4) Jul 20 (M7	Oct 20 (M10)	Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q1)				
July 15	(c) 12-Day PRE-Election	Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (12S)	
Quarterly Report (Q3)		M M / D D	YYYY	in the
January 31 Year-End Report (YE)	Electio			State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	neport for the.	M = M / D = D /	YYYY	in the
(1211)	Electio	n on		State of
5. Covering Period 04	01 / 2024	through 04	30 / 202	24
I certify that I have examined this	Report and to the best of	my knowledge and belief it is	true, correct and comple	te.
Type or Print Name of Treasurer	Clark, Phillip, , ,			
Signature of Treasurer Clark, P	'hillip, , ,		Date 05 / 17	D / Y Y Y Y Y 2024
NOTE: Submission of false, erroneou	us, or incomplete information	n may subject the person signing	this Report to the penalti	es of 52 U.S.C. § 30109.
Office				FORM 3X
Use				ev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collectively "LifePoint") 2024 04 30 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 72318.00 January 1. 2024 (b) Cash on Hand at 26858.18 Beginning of Reporting Period..... 12726.00 61186.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 133504.00 39584.18 6(a) and 6(c) for Column B)..... 122565.11 28645.29 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 10938.89 10938.89 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collectively "LifePoint") 04 01 2024 30 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 12238.00 36315.00 (i) Itemized (use Schedule A)..... (ii) Unitemized 488.00 14871.00 (iii) TOTAL (add 51186.00 12726.00 Lines 11(a)(i) and (ii).................▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 51186.00 12726.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 10000.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 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))▶	12726.00	61186.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	12726.00	61186.00
i		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	145.29	617.50
(c) Total Operating Expenditures	145.20	617.5
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	145.29	
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	19000.00	84500.00
Independent Expenditures (use Schedule E) Coordinated Party Expenditures	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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		4 4 4
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including Non-Federal Donations)	9500.00	37447.55
_	9300.00	07411.00
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
,	4	7 7 7
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28645.29	122565.1
Total Federal Disbursements		4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	28645.29	122565.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 12726.00 51186.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 51186.00 12726.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 145.29 617.56 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 145.29 617.56 (subtract Line 37 from Line 36)

		FOR LINE NUMBER: PAGE 6 OF											
Use separate schedule(s)	(che	(check only one)											
for each category of the Detailed Summary Page	X	11a		11b		11c		12					
		13		14		15		16			17		
not be sold or used by any ne	reon fo	or the i	11 Iri	വരെ വ	f en	licitina	COL	ntri	hutio	ne			

•	LWIZED REGEII 10			Detailed Summary Page	>	11:	а		11b	11c		12 16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the na					for t			pose c	of solicitin		ontributi	ons				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporat (collectively "LifePoint")	e Services, (Ger	neral Partnership ("LCSGP") and	facilitie	s wh	ich	are	subsid	iaries of Li	fePo	int Heal	h				
Α.	Full Name of Individual (Last, First, Middle Initial Allen, Keith, , , Mailing Address 330 Seven Springs Way) or Full O	rga	nization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y												
	City Brentwood	State TN		Zip Code 37027		Tra	ıns		ion ID	: A2024- Receipt t	7713	317					
	FEC ID number of contributing federal political committee.	С	_			Ē			7	7	_	75.0	0				
	Name of Employer (for Individual) LifePoint Health, Inc.		•	tion (for Individual) resident			Me	emc	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 525.00	1												
В.	Full Name of Individual (Last, First, Middle Initial Allen, Keith, , ,) or Full O	rga	nization Name		Date	of	Re	eceipt								
	Mailing Address 330 Seven Springs Way City	State		Zip Code		0] ′	19	9	_	024	Y				
	Brentwood	TN		37027						: A2024-7 Receipt t							
	FEC ID number of contributing federal political committee.	С	-			75.00											
	Name of Employer (for Individual) LifePoint Health, Inc.		•	ation (for Individual) resident		Ш	Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	regate Year-to-Date ▼ 600.00														
С.	Full Name of Individual (Last, First, Middle Initial Alley, William, , ,) or Full O	rga	nization Name		Date	of	Re	ceipt								
	Mailing Address 330 Seven Springs Way City	State		Zip Code		_	4] ′	0		2	024	Y				
	Brentwood	TN		37027						: A2024-							
	FEC ID number of contributing federal political committee.	С	_			Ē			,	. ,	_	35.0	0				
	Name of Employer (for Individual) Twin County Regional Hospital Receipt For:	Hosp	pita	tion (for Individual) I CNO		Ш	Me	emo) Item								
	Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 245.00													
S	UBTOTAL of Receipts This Page (optional)			>	•				, .	,	_	185.0	0				
Т	OTAL This Period (last page this line number on	ly)			•				7		_						

63 FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 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) LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Alley, William, , , Mailing Address 330 Seven Springs Way 2024 19 City Zip Code State Transaction ID: A2024-769988 TN Brentwood 37027 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Twin County Regional Hospital Hospital CNO Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Anderson, David, , , Date of Receipt Mailing Address 330 Seven Springs Way 04 05 2024 City State Zip Code Transaction ID: A2024-771276 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing 110.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LifePoint Health, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 770.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Anderson, David, , , Date of Receipt Mailing Address 330 Seven Springs Way 2024 19 City Zip Code Transaction ID : A2024-770019 State TN **Brentwood** 37027 Amount of Each Receipt this Period FEC ID number of contributing C 110.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LifePoint Health, Inc. CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify)

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

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

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FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s) for each category of the (check only one)

•	LWIZED REGEII 10		Detailed Summary Page		>	11a 13		11b	11c		12 16	17			
	y information copied from such Reports and Stat for commercial purposes, other than using the n					for the		pose o	f soliciting		ntributi	ons			
\setminus	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporat (collectively "LifePoint")	te Services, (General Partnership ("LCSGP	") and f	facilitie	es which	are	subsidi	aries of Life	ePoi	nt Heal	h			
<u>/</u> А.	Full Name of Individual (Last, First, Middle Initial Bailey, Scott, , , Mailing Address 330 Seven Springs Way	l) or Full Oi	ganization Name			Date of		eceipt		■ Y	024	Y			
	City Brentwood	State TN	Zip Code 37027			Trans		ion ID	: A2024-7	712	97				
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 70.00										
	Name of Employer (for Individual) LifePoint Health, Inc.	COC	pation (for Individual)			M	emc	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 490.0												
В.	Full Name of Individual (Last, First, Middle Initial Bailey, Scott, , ,	l) or Full Or	ganization Name			Date of	f Re	eceipt							
	Mailing Address 330 Seven Springs Way City	State	Zip Code			04] ′	19)24	Y			
	Brentwood	TN	37027						: A2024-7 Receipt th						
	FEC ID number of contributing federal political committee.	С				_			-	70.0	0				
	Name of Employer (for Individual) LifePoint Health, Inc.	Occu	upation (for Individual))		M	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 560.0												
С.	Full Name of Individual (Last, First, Middle Initial Barrett, Samuel, , ,	l) or Full Or	ganization Name			Date of	f Re	eceipt							
	Mailing Address 330 Seven Springs Way					04 04	1	05	5	20)24	Y			
	City Brentwood	State TN	Zip Code 37027						: A2024-7 Receipt th						
	FEC ID number of contributing federal political committee.	С						,	icocipi ii		116.0	0			
	Name of Employer (for Individual) Health Support Center Receipt For:		pation (for Individual) p CFO			M	emo	Item							
	Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 812.0	0											
s	UBTOTAL of Receipts This Page (optional)			▶	·			, .	. ,		256.0	0			
Т	OTAL This Period (last page this line number on	ly)		····· >	-			7			1 40				

Lles serenate sebedule(s)		FOR LINE NUMBER: PAGE 9 OF 63										
Use separate schedule(s)	(c	(check only one)										
for each category of the Detailed Summary Page		X	11a		11b		11c		12			
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												
oneral Partnership ("LCSCP") and f	ooilii	ioo	which	aro	cubaidir	orio	of Life	Doi	nt Ll	oolth		

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Barrett, Samuel, , , Date of Receipt Mailing Address 330 Seven Springs Way 2024 19 City Zip Code State Transaction ID: A2024-769967 TN 37027 Brentwood Amount of Each Receipt this Period FEC ID number of contributing C 116.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Support Center Group CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 928.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barsallo, Tina, , , Date of Receipt Mailing Address 330 Seven Springs Way 04 05 2024 City State Zip Code Transaction ID: A2024-771286 **Brentwood** ΤN 37027 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VP Rev Cycle Ops LifePoint Health, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Barsallo, Tina, , , Date of Receipt Mailing Address 330 Seven Springs Way 2024 19 City State Zip Code Transaction ID : A2024-770034 TN **Brentwood** 37027 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Memo Item Occupation (for Individual) Name of Employer (for Individual) LifePoint Health, Inc. VP Rev Cycle Ops Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 236.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 63 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corp (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Beard, Bertrand B, , , Mailing Address 330 Seven Springs Way	nitial) or Full C	Organization Name	Date of Receipt
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771242 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		65.00
Name of Employer (for Individual) Maria Parham Health Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	CEC	upation (for Individual) O Year-to-Date ▼ 455.00	Memo Item
Full Name of Individual (Last, First, Middle Ir Beard, Bertrand B, , , Mailing Address 330 Seven Springs Way	nitial) or Full C	Organization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood FEC ID number of contributing	State TN	Zip Code 37027	Transaction ID : A2024-769993 Amount of Each Receipt this Period
federal political committee. Name of Employer (for Individual) Maria Parham Health	Occ CE	supation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	
Full Name of Individual (Last, First, Middle Ir Buttry, Michelle, , , Mailing Address 330 Seven Springs Way	nitial) or Full C	Organization Name	Date of Receipt
City Brentwood	State TN	Zip Code 37027	04 05 2024 Transaction ID : A2024-771250 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00 Memo Item
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	CNO	upation (for Individual) Year-to-Date ▼ 280.00	Metho Reth
SUBTOTAL of Receipts This Page (optional)			170.00

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50	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 63 (check only one)										
IT	EMIZED RECEIPTS		for each category of the	X 11a										
			Detailed Summary Page	13 14 15 16 17										
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions										
	NAME OF COMMITTEE (In Full)													
	LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	te Services, (General Partnership ("LCSGP") and t	facilities which are subsidiaries of LifePoint Health										
Α.	Full Name of Individual (Last, First, Middle Initia Buttry, Michelle, , ,	l) or Full O	Organization Name	Date of Receipt										
	Mailing Address 330 Seven Springs Way	Ta		04 19 2024										
	City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-769964 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		40.00										
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item										
	LifePoint Health, Inc.	CNC	0											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		320.00											
	Full Name of Individual (Last, First, Middle Initia Celsor, Reba, , ,	l) or Full O	Organization Name	Data of Passint										
Ь.	Mailing Address 330 Seven Springs Way			Date of Receipt										
				04 05 2024										
	City	State	Zip Code	Transaction ID : A2024-771301										
	Brentwood	TN	37027	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		85.00										
	Name of Employer (for Individual) Spring View Hospital		upation (for Individual) spital CEO	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		, 595.00											
<u> </u>	Full Name of Individual (Last, First, Middle Initia Celsor, Reba, , ,	l) or Full O	organization Name	Date of Receipt										
	Mailing Address 330 Seven Springs Way			04 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
	City	State TN	Zip Code 37027	Transaction ID : A2024-769978										
	Brentwood	110	37027	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		85.00										
	Name of Employer (for Individual) Spring View Hospital		upation (for Individual) pital CEO	Memo Item										
	Receipt For:		Year-to-Date ▼											
	Primary General Other (specify)		680.00											
s	UBTOTAL of Receipts This Page (optional)			210.00										

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 OF 63 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corp (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	I facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Clark, Phillip, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Health Support Center	State TN Occi	Zip Code 37027	Date of Receipt 04
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	
Full Name of Individual (Last, First, Middle In Clark, Phillip, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State TN Occ	Zip Code 37027	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Health Support Center Receipt For: Primary General Other (specify) ▼		President Year-to-Date ▼ 480.00]
Full Name of Individual (Last, First, Middle Ir Cleeton, Andrea, , , Mailing Address 330 Seven Springs Way	nitial) or Full O	rganization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Health Support Center Receipt For: Primary General Other (specify)	Vice	Zip Code 37027 upation (for Individual) President Year-to-Date ▼	Transaction ID : A2024-771258 Amount of Each Receipt this Period 31.00 Memo Item

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 OF 63										
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)										
TEMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports and or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full)		· ·											
LifePoint Health PAC - The PAC of LifePoint Corp (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health										
Full Name of Individual (Last, First, Middle Ir Cleeton, Andrea, , ,	nitial) or Full C	Organization Name	Date of Receipt										
Mailing Address 330 Seven Springs Way			04 19 2024										
City	State	Zip Code	Transaction ID : A2024-770022										
Brentwood	TN	37027	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		31.00										
Name of Employer (for Individual) Health Support Center		upation (for Individual)	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		248.00]										
Full Name of Individual (Last, First, Middle Ir Cook, Greg, , ,	nitial) or Full C	Organization Name	Date of Receipt										
Mailing Address 330 Seven Springs Way			M = M / D = D / Y = Y = Y										
City	Ctoto	7in Codo	04 05 2024										
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771241 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		55.00										
Name of Employer (for Individual) Castleview Hospital	Occ	cupation (for Individual)	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		385.00											
Full Name of Individual (Last, First, Middle Ir Cook, Greg, , ,	nitial) or Full C	Organization Name	Date of Receipt										
Mailing Address 330 Seven Springs Way			04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770038 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		55.00										
Name of Employer (for Individual) Castleview Hospital	Occ CE(upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 440.00											
SUBTOTAL of Receipts This Page (ontional)	ı		141.00										

Primary

Other (specify)

General

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

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

SCHEDULE ITEMIZED

lma	ge# 202405179646058592														
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		f	Use separate schedule(s) or each category of the Detailed Summary Page	(che	LINE ck only 11a 13			ন: —	11c 15	GE		4 O 12 16		17
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint") Full Name of Individual (Last, First, Middle Init Critchlow, David, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General	es, General Organ	ess of any political committed	facilities	which ate of M M M O4 Trans	are s	subsice ceipt	diari	es of L	ifel	con con Poin	ntribut mmitte at Hea	tions ee.		
В.	Other (specify) ▼ Full Name of Individual (Last, First, Middle Init Critchlow, David, , , Mailing Address 330 Seven Springs Way City Brentwood	State	Organ	Zip Code 37027	_ [Date of Receipt 04 19 2024 Transaction ID : A2024-770015 Amount of Each Receipt this Period									_
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Other	Senior \ ate Yea	ion (for Individual) /ice President r-to-Date ▼ 616.00]	Me	_		77.00							
C.	Full Name of Individual (Last, First, Middle Init Darner, Tonya, L, , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For:	State TN C	ccupat	Zip Code 37027 ion (for Individual) COO 6 Marquette	_[Mate of 04 Trans mount	acti	on ID)5 Re		-77	202 '129)4	_	
		Aggrega	ite Yea	r-to-Date ▼											

525.00

1 9 1 1 9

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of sciliding 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) LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership (*LCSGP*) and facilities which are subsidiants of LifePoint Health (collective) LifePoint Health PAC - The PAC of LifePoint Health (collective) LifePoint Health PAC - The PAC of LifePoint Health (collective) LifePoint Health PAC - The PAC of LifePoint Health (collective) Lif	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 OF 63 (check only one) X 11a
LifePoint Health PAC. The PAC of LifePoint Corporate Services, General Partnership (*LCSGP*) and facilities which are subsidiaries of LifePoint Health (collective). LifePoint Health (co				person for the purpose of soliciting contributions
A. Darier, Tonya, L., Mailing Address 330 Seven Springs Way City Stentwood TN 37027 FEC ID number of contributing tederal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Mailing Address 330 Seven Springs Way City State Zip Code Merquette Aggregate Year-to-Date V Emmay General Other (specify) V State Zip Code Merquette Aggregate Year-to-Date V City State Zip Code State Springs Way City State Didical committee. Name of Employer (for Individual) LifePoint Health, Inc. Mailing Address 330 Seven Springs Way City State Springs Way City Springs Way City State Springs Way City Spri	LifePoint Health PAC - The PAC of LifePoint Co	orporate Services,	General Partnership ("LCSGP") an	d facilities which are subsidiaries of LifePoint Health
City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Primary Other (specify) ▼ City Brentwood Name of Employer (for Individual) LifePoint Health, Inc. Mailing Address 330 Seven Springs Way City Primary Other (specify) ▼ City Primary General Other (specify) ▼ City Brentwood Name of Employer (for Individual) LifePoint Health, Inc. Name of Employer (for Individual) Division CFO Primary General Coverable (Individual) Division CFO Davis, Daniel, Mailing Address 330 Seven Springs Way City Brentwood Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coverable (Individual) Division CFO Davis, Daniel, Mailing Address 330 Seven Springs Way City Brentwood The City State S	A. Darner, Tonya, L, ,	Initial) or Full C	Organization Name	M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General City State Zip Code TN 37027 Aggregate Year-to-Date ▼ Davis, Daniel, ., Mailling Address 330 Seven Springs Way City Primary General City State Zip Code TN 37027 Bate of Receipt To: Primary General City State Zip Code TN 37027 FEC ID number of contributing federal political committee. Davis, Daniel, ., Mailling Address 330 Seven Springs Way City State Zip Code TN 37027 FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Division CFO Aggregate Year-to-Date ▼ Transaction ID: A2024-769984 Amount of Each Receipt this Period Memo Item Memo Item Aggregate Year-to-Date ▼ Transaction ID: A2024-769984 Amount of Each Receipt this Period Memo Item Memo Item	City	State	Zip Code	
Rederal political committee C	Brentwood	TN	37027	Amount of Each Receipt this Period
LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ▼ Receipt For: Primary General Other (specify) ■ Rece	· · · · · · · · · · · · · · · · · · ·	C		75.00
Date of Receipt Mailing Address 330 Seven Springs Way City Brentwood TN 37027 FEC ID number of contributing federal political committee. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Daniel, , , Mailing Address 330 Seven Springs Way Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Daniel, , , Mailing Address 330 Seven Springs Way Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Daniel, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Occupation (for Individual) Division CFO Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : A2024-771271 Amount of Each Receipt this Period Memo Item Memo Item Memo Item Aggregate Year-to-Date ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ Primary General Other (specify)	LifePoint Health, Inc. Receipt For: Primary General	Hos	Spital COO 6 Marquette Year-to-Date ▼	Memo Item
State Zip Code Transaction ID : A2024-771271 Amount of Each Receipt this Period	B. Davis, Daniel, , ,	Initial) or Full C	Organization Name	M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: A2024-769984 Amount of Each Receipt this Period Memo Item Memo Item Date of Receipt Transaction ID: A2024-769984 Amount of Each Receipt this Period Date of Receipt Transaction ID: A2024-769984 Amount of Each Receipt this Period Date of Receipt Transaction ID: A2024-769984 Amount of Each Receipt this Period Date of Receipt Transaction ID: A2024-769984 Amount of Each Receipt this Period Date of Receipt Transaction ID: A2024-769984 Amount of Each Receipt this Period Date of Receipt Transaction ID: A2024-769984 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) Other (specify) Aggregate Year-to-Date ▼ Primary General Other (specify) Primary General Other (specify)	City	State	Zip Code	
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pall Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Daniel, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : A2024-769984 Amount of Each Receipt this Period Memo Item Memo Item Memo Item	Brentwood	TN	37027	
LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pull Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Daniel, , , Mailing Address 330 Seven Springs Way City State Zip Code TN 37027 FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify)	•	С		115.00
Primary General Other (specify) ▼ 805.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Daniel, , , Mailing Address 330 Seven Springs Way City State Zip Code TN 37027 FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ 305.00				Memo Item
Date of Receipt Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary Other (specify) Pate of Receipt Mod 19 2024 Transaction ID: A2024-769984 Amount of Each Receipt this Period 115.00 Memo Item Memo Item	Primary General	Aggregate		
City Brentwood TN State Tip Code Transaction ID: A2024-769984 Amount of Each Receipt this Period C Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Occupation (for Individual) Division CFO Aggregate Year-to-Date ▼ 3705.00		Initial) or Full C	Organization Name	Date of Receipt
Brentwood TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Amount of Each Receipt this Period Memo Item Aggregate Year-to-Date ▼				04 19 2024
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary Other (specify) Amount of Each Receipt this Period 115.00 Memo Item Aggregate Year-to-Date ▼ 920.00			'	
LifePoint Health, Inc. Receipt For: Primary Other (specify) Aggregate Year-to-Date ▼ 920.00	FEC ID number of contributing	С		
Other (specify) 920.00	LifePoint Health, Inc. Receipt For:	Divi	sion CFO	Memo Item
	Other (specify)		7 7 7	305.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 OF 63 (check only one)				
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and Sta or for commercial purposes, other than using the r			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	ate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health				
Full Name of Individual (Last, First, Middle Initial) Deese, Robert C, , ,	al) or Full C	rganization Name	Date of Receipt				
Mailing Address 330 Seven Springs Way			04 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771253 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		97.00				
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 679.00					
Full Name of Individual (Last, First, Middle Initial Deese, Robert C, , , Mailing Address 330 Seven Springs Way	al) or Full C	rganization Name	Date of Receipt 04 19 2024				
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770003 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		97.00				
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual)	Memo Item				
Receipt For: Primary General		Year-to-Date ▼	1				
Other (specify) ▼		776.00					
Full Name of Individual (Last, First, Middle Initial Dunmore, Elizabeth, , ,	al) or Full C	rganization Name	Date of Receipt				
Mailing Address 330 Seven Springs Way			04 05 2024				
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771321 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		150.00				
Name of Employer (for Individual) LifePoint Health, Inc.	Occ	upation (for Individual) O	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1050.00					
<u> </u>							

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

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 OF 63				
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
		Detailed Summary Page	X 11a 11b 11c 12				
Any information copied from such Reports and Stor for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)							
LifePoint Health PAC - The PAC of LifePoint Corpor (collectively "LifePoint")	rate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health				
Full Name of Individual (Last, First, Middle Init Dunmore, Elizabeth, , ,	ial) or Full C	Organization Name	Date of Receipt				
Mailing Address 330 Seven Springs Way			04 19 2024				
City	State	Zip Code	Transaction ID : A2024-769981				
Brentwood	TN	37027	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		150.00				
Name of Employer (for Individual) LifePoint Health, Inc.	Occ	cupation (for Individual)	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General Other (specify) ▼		1200.00					
Full Name of Individual (Last, First, Middle Init Fallico, Fabio, , ,	ial) or Full C	Organization Name	Date of Receipt				
Mailing Address 330 Seven Springs Way			M M / D D / Y Y Y Y				
City	Otata	7in Code	04 05 2024				
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771316 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		115.00				
Name of Employer (for Individual) Health Support Center		cupation (for Individual) e President	Memo Item				
Pagaint For:		Year-to-Date ▼					
Primary General Other (specify) ▼		805,00					
Full Name of Individual (Last, First, Middle Init	ial) or Full C	Organization Name	Date of Receipt				
Mailing Address 330 Seven Springs Way			04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-769985				
FEC ID number of contributing			Amount of Each Receipt this Period				
federal political committee.			115.00				
Name of Employer (for Individual) Health Support Center		upation (for Individual) e President	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 920.00					
SURTOTAL of Receipts This Page (ontional)			380.00				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 OF 63 (check only one)				
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a					
Any information copied from such Reports and State or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	ate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health				
Full Name of Individual (Last, First, Middle Initial Fiser, Shannon, , , Mailing Address 330 Seven Springs Way	al) or Full C	Organization Name	Date of Receipt				
City Brentwood	State TN	Zip Code 37027	7 Transaction ID : A2024-771291 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		135.00				
Name of Employer (for Individual) Health Support Center Receipt For: Primary General Other (specify) ▼	Sen	upation (for Individual) nior Vice President Year-to-Date ▼ 945.00	Memo Item				
Full Name of Individual (Last, First, Middle Initial Fiser, Shannon, , , Mailing Address 330 Seven Springs Way	al) or Full C	Organization Name	Date of Receipt				
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770004 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	supation (for Individual)	135.00 Memo Item				
Health Support Center Receipt For: Primary General Other (specify) ▼	Ser	year-to-Date ▼ 1080.00]				
Full Name of Individual (Last, First, Middle Initial Fitzgerald, Philip, , , Mailing Address 330 Seven Springs Way	al) or Full C	Organization Name	Date of Receipt				
City Brentwood FEC ID number of contributing	State TN	Zip Code 37027	Transaction ID : A2024-771305 Amount of Each Receipt this Period				
Receipt For: Primary Other (specify) General	CEC	upation (for Individual)) Year-to-Date ▼ 1050.00	Memo Item				
SUBTOTAL of Receipts This Page (optional)		7 7 7	420.00				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 OF 63						
TEMIZED RECEIPTS		for each category of the	(check only one)						
		Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17						
Any information copied from such Reports and S or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health						
Full Name of Individual (Last, First, Middle Ini	itial) or Full C	rganization Name	Date of Receipt						
Mailing Address 330 Seven Springs Way			04 19 2024						
City	State	Zip Code	Transaction ID : A2024-770020						
Brentwood	TN	37027	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		150.00						
Name of Employer (for Individual) LifePoint Health, Inc.	Occ	upation (for Individual)	Memo Item						
Receipt For:		_	\dashv						
Primary General	Aggregate	Year-to-Date ▼	_						
Other (specify) ▼		1200.00							
Full Name of Individual (Last, First, Middle Ini	itial) or Full C	rganization Name	Date of Receipt						
Mailing Address 330 Seven Springs Way			M = M / D = D / Y = Y = Y						
			04 05 2024						
City	City		Transaction ID : A2024-771302						
Brentwood	TN	37027	Amount of Each Receipt this Period						
FEC ID number of contributing									
federal political committee.	C		50.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Maria Parham Health	CF	0							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General	199.194		1						
Other (specify) ▼		350.00							
Full Name of Individual (Last, First, Middle Ini Gordian, Michael S, , ,	itial) or Full C	rganization Name	Date of Receipt						
Mailing Address 330 Seven Springs Way			04 19 2024						
City	State TN	Zip Code	Transaction ID : A2024-770013						
Brentwood	IIN	37027	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) Maria Parham Health	Occ CFC	upation (for Individual)	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General	199.194.11		1						
Other (specify)		400.00							
SUBTOTAL of Receipts This Page (optional)			250.00						

City

City

City

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

63 FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 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) LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Greene, Philip A, , , Mailing Address 330 Seven Springs Way 2024 05 Zip Code State Transaction ID: A2024-771266 TN Brentwood 37027 Amount of Each Receipt this Period FEC ID number of contributing C 138.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LifePoint Health, Inc. Hospital CEO 5 Frye Receipt For: Aggregate Year-to-Date ▼ Primary General 966.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Greene, Philip A, , , Date of Receipt Mailing Address 330 Seven Springs Way 04 19 2024 State Zip Code Transaction ID: A2024-769994 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing 138.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hospital CEO 5 Frye LifePoint Health, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1104.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c**. Grooms, John, , , Date of Receipt Mailing Address 330 Seven Springs Way 2024 05 Transaction ID : A2024-771310 State Zip Code TN **Brentwood** 37027 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LifePoint Health, Inc. **SVP Chief Accounting Officer** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify)

7

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 OF 63
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	tements ma	Lay not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	te Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle Initial Grooms, John, , ,	l) or Full C	rganization Name	Date of Receipt
Mailing Address 330 Seven Springs Way			04 19 2024
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-769997 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) P Chief Accounting Officer	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00	
Full Name of Individual (Last, First, Middle Initial Harclerode, Timothy, W, , Mailing Address 330 Seven Springs Way	l) or Full O	rganization Name	Date of Receipt 04 05 2024
City Brentwood	State	Zip Code 37027	Transaction ID : A2024-771248 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 700.00	
Full Name of Individual (Last, First, Middle Initial Harclerode, Timothy, W, ,	l) or Full C	rganization Name	Date of Receipt
Mailing Address 330 Seven Springs Way City	State	Zip Code	04 19 2024 Transaction ID : A2024-770032
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) pital CEO 2 CM Nason/Miners	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 800.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

CEO

Aggregate Year-to-Date ▼

1050.00

General

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

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

LifePoint Health, Inc.

Primary

Other (specify)

Receipt For:

lm	age# 202405179646058600										
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 22 OF 63 (check only one) X 11a 11b 11c 12						63
			Betailed Garrinary 1	ugo	13	3	14	15	<u> </u>	16	17
	ny information copied from such Reports and State for commercial purposes, other than using the										
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	ate Services, G	eneral Partnership ("LCS	SGP") and faci	lities wh	nich ar	e subsidi	aries of Life	Poin	t Healt	h
۹.	Full Name of Individual (Last, First, Middle Initial Harris, Ronald, , ,	al) or Full Orq	ganization Name		Date	e of F	Receipt				
	Mailing Address 330 Seven Springs Way				M)4	05	D / Y	202	24	Y
	City	State	Zip Code		Tr	ansac	tion ID	: A2024-77	124	7	
	Brentwood	TN	37027		Amo	ount o	f Each	Receipt this	s Pe	eriod	
	FEC ID number of contributing federal political committee.	С					7	1-45		80.00	0
	Name of Employer (for Individual) Memorial Medical Center		oation (for Individual) ital CEO			Men	no Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 56	0.00							
3.	Full Name of Individual (Last, First, Middle Initial Harris, Ronald, , ,	al) or Full Org	ganization Name		Date	e of F	Receipt				
	Mailing Address 330 Seven Springs Way				M ()4	19	D / Y	202	24	Y
	City	State	Zip Code	_				: A2024-77			
	Brentwood	TN	37027		Amo	ount o	f Each	Receipt thi	s Pe	∍riod	
	FEC ID number of contributing federal political committee.	С			Ļ		7	-	_	80.00	0
	Name of Employer (for Individual) Memorial Medical Center	1 '	pation (for Individual) ital CEO		Ш	Men	no Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 64	0.00							
3.	Full Name of Individual (Last, First, Middle Initial Heatherly, Stephen L, , ,	al) or Full Org	ganization Name		Date	e of F	Receipt				
	Mailing Address 330 Seven Springs Way	Ctata	Zin Codo		M (04	/ 05	5	202		Y
	City Brentwood	State TN	Zip Code 37027					: A2024-77 Receipt this			
	FEC ID number of contributing federal political committee.	С						Jan San San San San San San San San San S		150.00	0
	Name of Employer (for Individual)	Occur	pation (for Individual)			Men	no Item				

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 23 OF 63					
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)					
TEMIZED RECEIF 13	X 11a						
Any information copied from such Reports and Staten or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
LifePoint Health PAC - The PAC of LifePoint Corporate S (collectively "LifePoint")	Services, General Partnership ("LCSGP") and f	acilities which are subsidiaries of LifePoint Health					
Full Name of Individual (Last, First, Middle Initial) of ${\bf A}$. Heatherly, Stephen L, , ,	or Full Organization Name	Date of Receipt					
Mailing Address 330 Seven Springs Way		04 19 2024					
1.	State Zip Code	Transaction ID : A2024-769989					
Brentwood	TN 37027	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		150.00					
Name of Employer (for Individual) LifePoint Health, Inc.	Occupation (for Individual) CEO	Memo Item					
Receipt For:	ggregate Year-to-Date ▼	7					
Primary General Other (specify) ▼	1200.00						
Full Name of Individual (Last, First, Middle Initial) of Heins, Andrew, , ,	or Full Organization Name	Date of Receipt					
Mailing Address 330 Seven Springs Way		04 05 2024					
City	State Zip Code	Transaction ID : A2024-771311					
Brentwood	TN 37027	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		44.00					
Name of Employer (for Individual) LifePoint Health, Inc.	Occupation (for Individual) VP CISO	Memo Item					
Descipt For:	ggregate Year-to-Date ▼	7					
Primary General Other (specify) ▼	308.00						
Full Name of Individual (Last, First, Middle Initial) (or Full Organization Name	Date of Receipt					
Mailing Address 330 Seven Springs Way		04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
,	State Zip Code TN 37027	Transaction ID : A2024-769959					
FFC ID number of contributing	1	Amount of Each Receipt this Period					
federal political committee.		44.00					
Name of Employer (for Individual) LifePoint Health, Inc.	Occupation (for Individual) VP CISO	Memo Item					
Pagaint For:	ggregate Year-to-Date ▼						
Primary General Other (specify)	352.00						
SUBTOTAL of Receipts This Page (optional)		238.00					

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 OF 63 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") a	nd facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Hindman, William, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Harris Reg Hospital/ Swain Comm Hospit Receipt For: Primary General Other (specify)	State TN C Occ Hos	Zip Code 37027 Lupation (for Individual) Spital CFO Year-to-Date ▼ 273.00	Date of Receipt 04 05 2024 Transaction ID : A2024-771299 Amount of Each Receipt this Period Memo Item
Full Name of Individual (Last, First, Middle In Hindman, William, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Harris Reg Hospital/ Swain Comm Hospit Receipt For: Primary General Other (specify)	State TN Occ Hos	Zip Code 37027 Supation (for Individual) spital CFO Year-to-Date 312.00	Date of Receipt O4 19 2024 Transaction ID : A2024-770001 Amount of Each Receipt this Period 39.00 Memo Item
Full Name of Individual (Last, First, Middle In Honeycutt, Robert, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN Occ	Zip Code 37027	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)			108.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 OF 63 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Honeycutt, Robert, , , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt
City Brentwood	State TN	Zip Code 37027	04 19 2024 Transaction ID : A2024-770023 Amount of Each Pagaint this Pagind
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	CEC	upation (for Individual) O Year-to-Date ▼ 240.00	Memo Item
Full Name of Individual (Last, First, Middle In Howard, Michael, , , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood FEC ID number of contributing federal political committee.	State TN	Zip Code 37027	Transaction ID : A2024-771303 Amount of Each Receipt this Period 92.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General	Occ Hos	eupation (for Individual) spital CEO 2 Crockett Year-to-Date ▼ 644,00	Memo Item
Full Name of Individual (Last, First, Middle In: Howard, Michael, , ,	itial) or Full C	4 4	Date of Receipt
Mailing Address 330 Seven Springs Way			04 19 2024
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770028 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		92.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	Hos	upation (for Individual) pital CEO 2 Crockett Year-to-Date ▼ 736.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			214.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 OF 63 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and Sor for commercial purposes, other than using the		ay not be sold or used by any p	13 14 15 16 17 Derson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Hughes, Donna, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Health Support Center Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027 Lupation (for Individual) e President Year-to-Date ▼ 756.00	Date of Receipt 04 05 2024 Transaction ID: A2024-771259 Amount of Each Receipt this Period 108.00 Memo Item
Full Name of Individual (Last, First, Middle In Hughes, Donna, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Health Support Center Receipt For: Primary General Other (specify)	State TN C Occ Vic	Zip Code 37027 Supation (for Individual) e President Year-to-Date ▼ 864.00	Date of Receipt O4 19 2024 Transaction ID : A2024-770024 Amount of Each Receipt this Period 108.00 Memo Item
Full Name of Individual (Last, First, Middle In Iverson, Caryn T, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027	Date of Receipt 04 05 2024 Transaction ID: A2024-771327 Amount of Each Receipt this Period 38.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			254.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 OF 63 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements m	ay not be sold or used by any paddress of any political committed	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corp (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Iverson, Caryn T, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027	Date of Receipt M M M
Full Name of Individual (Last, First, Middle In Kane, Pamela, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027 Supation (for Individual) g VP Phys Svcs Year-to-Date ▼ 630.00	Date of Receipt O4
Full Name of Individual (Last, First, Middle In Kane, Pamela, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027 Supation (for Individual) y VP Phys Svcs Year-to-Date ▼ 720.00	Date of Receipt O4 19 2024 Transaction ID: A2024-770011 Amount of Each Receipt this Period 90.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			218.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 OF 63 (check only one)									
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a									
Any information copied from such Reports and Sta or for commercial purposes, other than using the I	atements mand a	ay not be sold or used by any pounderess of any political committee	erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	ate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health									
Full Name of Individual (Last, First, Middle Initial A. Kiefer, William, , ,	al) or Full C	organization Name	Date of Receipt									
Mailing Address 330 Seven Springs Way			04 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771300 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		87.00									
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual)	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 609.00										
Full Name of Individual (Last, First, Middle Initial Kiefer, William, , , Mailing Address 330 Seven Springs Way	al) or Full C	organization Name	Date of Receipt									
	Ctoto	7in Codo	04 19 2024									
City Brentwood	State TN	Zip Code 37027	Transaction ID: A2024-769974 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		87.00									
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual)	Memo Item									
Receipt For:		Year-to-Date ▼										
Primary General Other (specify) ▼		696,00]									
Full Name of Individual (Last, First, Middle Initial Kirkpatrick, Jay, , ,	al) or Full C	organization Name	Date of Receipt									
Mailing Address 330 Seven Springs Way			04 05 2024									
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771262 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		80.00									
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) President	Memo Item									
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 560.00										

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

TEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Year of Control Summary Year of			_														
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of normanical purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) LifePoint Health PAC: The PAC of LifePoint Coprorate Services, General Partnership (*LCSGP*) and facilities which are subsidiaries of LifePoint Health (contentive). LifePoint Health (contentive). LifePoint Health (substitute). Job Part (specify). LifePoint Health (substitute). Regional Vice President Receipt for: Other (specify) V		,		f	for each category of the	(che	eck only		e) 11b		11c	12		_			
NAME OF COMMITTEE (In Full) LidePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collective). LifePoint Health (Last, First, Middle Initial) or Full Organization Name All In Ammo of Individual (Last, First, Middle Initial) or Full Organization Name Tec ID number of contributing tederal political committee. C	Any or fo	information copied from such Reports and State	ements may	y n	not be sold or used by any pe ess of any political committee	rson to so	for the	purp	ose o	f so	liciting	contril	bution	ıs			
A. Kirkpatrick, Jay	\	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate															
City Brentwood FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ General Oth	۱	Kirkpatrick, Jay, , ,	gaı	nization Name													
Brentwood TN 37027	I	Mailing Address 330 Seven Springs Way															
Name of Employer (for Individual) Name of Employer (for Individual) Vice President													od	_			
LifePoint Health, Inc. Receipt For: Primary General Other (specify)		S .	С	_								8	0.00				
Primary General Other (specify) ▼		, , ,			,		Me	emo	Item								
Aggregate Year-to-Date Name of Individual (Last, First, Middle Initial) or Full Organization Name Knight, Catherine, , ,	F	Primary General	Aggregate \	Yea													
City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ City Brentwood Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Brentwood Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Brentwood Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Brentwood Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Brentwood FEC ID number of contributing federal political committee. C Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	3	Knight, Catherine, , ,) or Full Or	gaı	nization Name		Date of	Re	ceipt								
Brentwood TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID : A2024-770042 Amount of Each Receipt this Period Date of Receipt Transaction ID : A2024-770042 Amount of Each Receipt this Period Memo Item Date of Receipt Transaction ID : A2024-770042 Amount of Each Receipt this Period Memo Item Date of Receipt Transaction ID : A2024-770042 Amount of Each Receipt this Period Date of Receipt Transaction ID : A2024-770042 Amount of Each Receipt this Period Date of Receipt Transaction ID : A2024-770042 Amount of Each Receipt this Period Memo Item Memo Item Memo Item Aggregate Year-to-Date ▼ Primary General Aggregate Year-to-Date ▼	Ν	Mailing Address 330 Seven Springs Way															
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) Aggregate Year-to-Date Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Knight, Catherine, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Occupation (for Individual) Aggregate Year-to-Date Date of Receipt Transaction ID: A2024-770042 Amount of Each Receipt this Period Memo Item Memo Item		•	1		'												
LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Knight, Catherine, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	F	FEC ID number of contributing		-			Amount	OI	Each	nece	apt tris	_	_				
Primary Other (specify) ▼ State St		, , , ,		•	,		Memo Item										
Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary Date of Receipt M M M 19 2024 Transaction ID: A2024-770042 Amount of Each Receipt this Period Memo Item Memo Item	F	Primary General	Aggregate \	Yea	 												
City Brentwood TN State TN 37027 Amount of Each Receipt this Period C Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General O4 19 2024 Transaction ID: A2024-770042 Amount of Each Receipt this Period C Memo Item Memo Item).) or Full Or	gaı	nization Name		Date of	Re	ceipt								
Brentwood TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Amount of Each Receipt this Period C 50.00 Memo Item	_							′			/ Y						
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General C Occupation (for Individual) Regional Vice President Aggregate Year-to-Date ▼			1		'												
LifePoint Health, Inc. Receipt For: Primary General Cocceptation (for individual) Regional Vice President Aggregate Year-to-Date ▼		S .	С	_			50.00										
Primary General Aggregate Teal-to-Date V	L	LifePoint Health, Inc.		•	,												
	F	Primary General	Aggregate \	Yea	 												

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

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

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 OF 63 (check only one) X 11a						
Any information copied from such Reports and St or for commercial purposes, other than using the			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpor (collectively "LifePoint")	ate Services,	General Partnership ("LCSGP") and	I facilities which are subsidiaries of LifePoint Health						
Full Name of Individual (Last, First, Middle Initi A. Koch, Joseph, , , Mailing Address 330 Seven Springs Way	al) or Full C	Organization Name	Date of Receipt						
City	State	Zip Code	04 05 2024 Transaction ID : A2024-771261						
FEC ID number of contributing	TN	37027	Amount of Each Receipt this Period 75.00						
Receipt For: Primary Other (specify) ▼ Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: General Other (specify) ▼	Occ	upation (for Individual) O Year-to-Date ▼ 525.00	Memo Item						
Full Name of Individual (Last, First, Middle Initi Koch, Joseph, , , Mailing Address 330 Seven Springs Way	al) or Full C	organization Name	Date of Receipt 04 19 2024						
City Brentwood FEC ID number of contributing federal political committee.	State TN	Zip Code 37027	Transaction ID : A2024-770041 Amount of Each Receipt this Period 75.00						
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	CE	upation (for Individual) O Year-to-Date ▼ 600.00	Memo Item						
Full Name of Individual (Last, First, Middle Initi Leckelt, Mitchell, , , Mailing Address 330 Seven Springs Way	al) or Full C	Organization Name	Date of Receipt						
City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General	CEC	Zip Code 37027 upation (for Individual) O Year-to-Date ▼	Transaction ID: A2024-771298 Amount of Each Receipt this Period 66.00 Memo Item						
Other (specify) SUBTOTAL of Receipts This Page (optional)	<u> </u>	462.00	216.00						

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		f	Use separate schedule(s) for each category of the Detailed Summary Page	(che	R LINE NUMBER: PAGE 31 OF 63 eck only one)									
	y information copied from such Reports and State for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	ate Services, (Gen	eral Partnership ("LCSGP") and	facilitie	s which are subsidiaries of LifePoint Health									
Α.	Full Name of Individual (Last, First, Middle Initial Leckelt, Mitchell, , ,	al) or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 330 Seven Springs Way					04 19 2024									
	City Brentwood	State TN		Zip Code 37027		Transaction ID : A2024-769990 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C	_			66.00									
	Name of Employer (for Individual) LifePoint Health, Inc.	Occu	•	tion (for Individual)		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 528.00]										
В.	Full Name of Individual (Last, First, Middle Initia	rgar	nization Name		Date of Receipt										
	Mailing Address 330 Seven Springs Way					04 05 2024									
	City Brentwood	State TN		Zip Code 37027		Transaction ID : A2024-771268 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С	Ξ			30.00									
	Name of Employer (for Individual) LifePoint Health, Inc.		•	tion (for Individual)		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 210.00]										
С .	Full Name of Individual (Last, First, Middle Initia Lee, Kristy, , ,	al) or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 330 Seven Springs Way					04 19 2024									
	City Brentwood	State TN		Zip Code 37027		Transaction ID : A2024-769979 Amount of Each Receipt this Period 30.00									
	FEC ID number of contributing federal political committee.	С	Ξ												
	Name of Employer (for Individual) LifePoint Health, Inc.		•	tion (for Individual) CFO 3 Ottumwa		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ur-to-Date ▼ 240.00]										

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

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

Primary

Other (specify)

General

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

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

SCHEDUL ITEMIZED

Image# 202405179646058610			
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 OF 63 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corp. (collectively "LifePoint") Full Name of Individual (Last, First, Middle In Lewis, Aaron, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing	e name and ac	ddress of any political committe	
federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	Occu	upation (for Individual) Year-to-Date ▼ 672.00	Memo Item
Full Name of Individual (Last, First, Middle In Lewis, Aaron, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	State TN C	Zip Code 37027	Date of Receipt M
Full Name of Individual (Last, First, Middle In Mahoney, Sandra, A, , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For:	State TN C Occu Hosp	Date of Receipt O4	

371.00

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C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

	age# 202405179646058611	,		
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 OF 63 (check only one) X 11a
	ny information copied from such Reports and Sta for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
\rangle	LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	te Services, (General Partnership ("LCSGP") a	nd facilities which are subsidiaries of LifePoint Health
۹.	Full Name of Individual (Last, First, Middle Initial Mahoney, Sandra, A, , Mailing Address 330 Seven Springs Way	l) or Full O	organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : A2024-770018
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		53.00
	Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) pital CFO 4 Community	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 424.00	
3.	Full Name of Individual (Last, First, Middle Initial Markowitz, Christine, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 330 Seven Springs Way			04 05 7 2024
	City Brentwood	State	Zip Code 37027	Transaction ID : A2024-771320
	FEC ID number of contributing federal political committee.	C	31021	Amount of Each Receipt this Period 40.00
	Name of Employer (for Individual) Sovah Health - Danville		upation (for Individual) spital CFO	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280,00	
С.	Full Name of Individual (Last, First, Middle Initia Markowitz, Christine, , ,	l) or Full O	organization Name	Date of Receipt
	Mailing Address 330 Seven Springs Way			04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770030 Amount of Each Receipt this Period

Primary General Other (specify) ▼	Aggregate	280.00	
Full Name of Individual (Last, First, Middle Markowitz, Christine, , , Mailing Address 330 Seven Springs Way			Date of Receipt 04 19 2024
City	State	Zip Code	Transaction ID : A2024-770030
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer (for Individual) Sovah Health - Danville		oation (for Individual) tal CFO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	rear-to-Date ▼ 320.00	
SUBTOTAL of Receipts This Page (optional)			133.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 OF 63 (check only one) X 11a
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Cor (collectively "LifePoint")	porate Services,	General Partnership ("LCSGP") an	d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle Martin, Adam, , , Mailing Address 330 Seven Springs Way	Initial) or Full C	Organization Name	Date of Receipt M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771296 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		60.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	CE	eupation (for Individual) O Year-to-Date ▼ 420.00	Memo Item
Full Name of Individual (Last, First, Middle I Martin, Adam, , , Mailing Address 330 Seven Springs Way	Initial) or Full C	Organization Name	Date of Receipt M M / 19 2024
City Brentwood FEC ID number of contributing	State TN	Zip Code 37027	Transaction ID : A2024-770017 Amount of Each Receipt this Period 60.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For:	Occ	cupation (for Individual) O Year-to-Date ▼	Memo Item
Primary General Other (specify) ▼	199.09410	480.00	
Full Name of Individual (Last, First, Middle McLain, John, , , Mailing Address 330 Seven Springs Way	Initial) or Full C	Organization Name	Date of Receipt
City Brentwood	State TN	Zip Code 37027	04 05 2024 Transaction ID : A2024-771308 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For:	Hos	cupation (for Individual) spital CEO 3B Starr	75.00 Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 525.00	
SUBTOTAL of Receipts This Page (optional)			195.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		fo	Use separate schedule(s) or each category of the Detailed Summary Page	(ched	LINE k only 11a	one			PAGE	35 C)F	63			
					13	1	14	1	5	16		17			
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and a	ay no addre	ot be sold or used by any person of any political committee	erson fo	r the p	purpo ntribu	ose of tions	f solid	such	contribu commit	tions tee.				
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corp.	porate Services,	Gene	eral Partnership ("LCSGP") and	facilities	which a	are sı	ubsidia	aries d	of LifeP	oint He	alth				
/ (collectively "LifePoint")	-: A: -1\ F1 O)	instina Nama												
Full Name of Individual (Last, First, Middle II McLain, John, , ,	nitial) or Full C	organ	nzation Name	D	ate of	Rec	eipt								
Mailing Address 330 Seven Springs Way				04 19 2024											
City Brentwood	State TN		Zip Code 37027		Transa mount					9983 Period					
FEC ID number of contributing federal political committee.	С									75.	-				
Name of Employer (for Individual) LifePoint Health, Inc.		•	on (for Individual) CEO 3B Starr		Me	emo	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 600.00												
Full Name of Individual (Last, First, Middle In Meigs, Jeffrey, , ,	nitial) or Full C	Organ	ization Name	D	ate of	Rec	eipt								
Mailing Address 330 Seven Springs Way					м = м 04	/	05	_	Y	2024	Y				
City Brentwood	State TN		Zip Code 37027		Transa					1 264 Period					
FEC ID number of contributing federal political committee.	С	_						10001	51 11110	100.	-				
Name of Employer (for Individual) Haywood Regional Medical Center	Occ CF0		ion (for Individual)	7 [Memo Item										
Receipt For: Primary General	Aggregate	Yea	r-to-Date ▼												
Other (specify) ▼		,	700.00												
Full Name of Individual (Last, First, Middle In Meigs, Jeffrey, , ,	nitial) or Full C	Organ	ization Name	D	ate of	Rec	eipt								
Mailing Address 330 Seven Springs Way					м _ м 04	1	19			2024	Y				
City Brentwood	State TN		Zip Code 37027	A	Trans mount					0007 Period					
FEC ID number of contributing federal political committee.	С				_	,				100.	-				
Name of Employer (for Individual) Haywood Regional Medical Center	Occ	•	ion (for Individual)	7 I	Me	emo	Item								
Receipt For: Primary General Other (specify)			r-to-Date ▼												

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

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

Brentwood

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

ΤN

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

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

FEC ID number of contributing

federal political committee.

lma	age# 202405179646058614													
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 OF (check only one) X 11a										
	ly information copied from such Reports and Stat for commercial purposes, other than using the na													
\rangle	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate (collectively "LifePoint")	e Services, G	General Partnership ("LCSGP") ar	nd facil	ities	which a	are s	subsidiaı	ries	of Life	Point H	ealth		
۹.	Mitchell, Cathy, A, ,						Re	ceipt						
	Mailing Address 330 Seven Springs Way City	State	Zip Code		04 05 Y Y Y Y Y Y Y									
	Brentwood	TN	37027		Transaction ID : A2024-771249 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С							Ξ	7	_	4.00		
	Name of Employer (for Individual) LifePoint Health, Inc.		pation (for Individual) oital COO 3 Southern TN		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 238.00											
3.	Full Name of Individual (Last, First, Middle Initial Mitchell, Cathy, A, ,) or Full Org	ganization Name		D	ate of	Re	ceipt						
	Mailing Address 330 Seven Springs Way	State			04 19 2024									
	City	Zip Code			Tranca	acti.	on ID ·	۸ ၁ ۸	24-77	70030				

Transaction ID: A2024-770039

Amount of Each Receipt this Period

34.00

Memo Item Name of Employer (for Individual) Occupation (for Individual) Hospital COO 3 Southern TN LifePoint Health, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 272.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mulkey, Michael, J,, Date of Receipt Mailing Address 330 Seven Springs Way 05 2024 04 City State Zip Code Transaction ID : A2024-771313 TN **Brentwood** 37027 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hospital CEO 4 Willamette LifePoint Health, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1750.00 Other (specify) 318.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 OF 63 (check only one) X 11a
Any information copied from such Reports and So or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	rate Services,	General Partnership ("LCSGP") and	d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle Init A. Mulkey, Michael, J, , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc.	State TN C	Zip Code 37027 cupation (for Individual) spital CEO 4 Willamette	Date of Receipt Mark
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	
Full Name of Individual (Last, First, Middle Init Musher, Jeremy, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) This is the state of	State TN C Occ Chi Aggregate	Zip Code 37027 Cupation (for Individual) ief Behavioral Medical Officer Year-to-Date ▼ 1050.00	Date of Receipt M M M / DD D / 2024 Transaction ID : A2024-771280 Amount of Each Receipt this Period 150.00 Memo Item
Full Name of Individual (Last, First, Middle Init Musher, Jeremy, , , Mailing Address 330 Seven Springs Way	lai) or Full C	луапіzацоп ічапіе	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	Chie	Zip Code 37027 Supation (for Individual) ef Behavioral Medical Officer e Year-to-Date ▼ 1200.00	Transaction ID : A2024-770044 Amount of Each Receipt this Period 150.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			550.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 OF 63 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporation (collectively "LifePoint")	orate Services,	, General Partnership ("LCSGP") an	d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Oglesby, Celestial, , , Mailing Address 330 Seven Springs Way City	State	Zip Code	Date of Receipt M
Brentwood FEC ID number of contributing federal political committee.	C	37027	Amount of Each Receipt this Period 57.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	VP	cupation (for Individual) / ASG - Phys Svcs e Year-to-Date ▼ 399.00	Memo Item
Full Name of Individual (Last, First, Middle In Oglesby, Celestial, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C Occ VP Aggregate	Zip Code 37027 cupation (for Individual) 2 / ASG - Phys Svcs 2 Year-to-Date ▼ 456.00	Date of Receipt 19 2024 Transaction ID: A2024-769987 Amount of Each Receipt this Period 57.00 Memo Item
Full Name of Individual (Last, First, Middle In Parker, Robert C, , , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	Hos	Zip Code 37027 cupation (for Individual) spital CEO 5B Lk Cumberland e Year-to-Date ▼ 672.00	Transaction ID : A2024-771318 Amount of Each Receipt this Period 96.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			210.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 OF 63 (check only one) X 11a
			person for the purpose of soliciting contributions the to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint (collectively "LifePoint")	Corporate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middl Parker, Robert C, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	State TN Occil	Zip Code 37027 upation (for Individual) pital CEO 5B Lk Cumberland Year-to-Date ▼ 768.00	Date of Receipt 19 2024 Transaction ID : A2024-770009 Amount of Each Receipt this Period 96.00 Memo Item
Full Name of Individual (Last, First, Middl Patterson, Marcia, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) STRHS - Lawrenceburg Receipt For: Primary General Other (specify) ▼	State TN C	Zip Code 37027 upation (for Individual) spital CNO Year-to-Date ▼ 385.00	Date of Receipt O4
Full Name of Individual (Last, First, Middle Patterson, Marcia, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) STRHS - Lawrenceburg Receipt For: Primary Other (specify)	State TN C	Zip Code 37027 upation (for Individual) pital CNO Year-to-Date ▼ 440.00	Date of Receipt Mark 19

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 40 OF 63 (check only one)
	Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	orate Services, General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle Ini A. Pearce, Charles T, , , Mailing Address 330 Seven Springs Way	tial) or Full Organization Name	Date of Receipt
City	State Zip Code	04 05 2024
Brentwood	TN 37027	Transaction ID : A2024-771243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	135.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Market CFO 5 Trois / Lourdes Aggregate Year-to-Date ▼ 945.00	Memo Item
Full Name of Individual (Last, First, Middle Ini Pearce, Charles T, , ,	tial) or Full Organization Name	Date of Receipt
Mailing Address 330 Seven Springs Way		04 19 2024
City Brentwood	State Zip Code TN 37027	Transaction ID : A2024-770000 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	135.00
Name of Employer (for Individual) LifePoint Health, Inc.	Occupation (for Individual) Market CFO 5 Trois / Lourdes	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt
Mailing Address 330 Seven Springs Way		04 05 2024
City Brentwood	State Zip Code TN 37027	Transaction ID : A2024-771254 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer (for Individual) Bell Hospital	Occupation (for Individual) Hospital CFO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 280.00	
SUBTOTAL of Receipts This Page (optional)	····	310.00

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	fo	se separate schedule(s) or each category of the etailed Summary Page	(che	R LINE eck only 11a 13	one		1	PAGE 1c	12	OF_	63	
	y information copied from such Reports and State for commercial purposes, other than using the na												s
\rangle	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate (collectively "LifePoint")	e Services, 0	Gene	eral Partnership ("LCSGP") and	facilitie	s which	are sı	ubsidia	aries (of LifeF	Point He	ealth	
١.	Full Name of Individual (Last, First, Middle Initial) Perry, Teresa, , ,	or Full Or	rgani	ization Name		Date of	Rec	eipt					
	Mailing Address 330 Seven Springs Way					04	1	19	_	Y	2024	" Y	
	City Brentwood	State TN		Zip Code 37027		Trans Amount						d	_
	FEC ID number of contributing federal political committee.	С	Ξ						Ξ		40	0.00	
	Name of Employer (for Individual) Bell Hospital		•	on (for Individual) CFO		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year	-to-Date ▼ 320.00									
3.	Full Name of Individual (Last, First, Middle Initial) Phillips, Shaun, , ,	or Full Or	rgani	ization Name		Date of	Rec	· .					
	Mailing Address 330 Seven Springs Way					04		05	_	Y	2024	Y	
	City Brentwood	State TN		Zip Code 37027		Trans: Amount						d	
	FEC ID number of contributing federal political committee.	С				<u> </u>			_	7	101	1.00	
	Name of Employer (for Individual) LifePoint Health, Inc.	Occu		on (for Individual)		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year	-to-Date ▼ 707.00									
<u> </u>	Full Name of Individual (Last, First, Middle Initial) Phillips, Shaun, , ,	or Full O	rgani	ization Name		Date of	Rec	eipt					
	Mailing Address 330 Seven Springs Way					04	/	19		Y	2024	■ Y	
	City Brentwood	State TN		Zip Code 37027		Trans Amount)24-77 ipt this		d	_
	FEC ID number of contributing federal political committee.	С	_			<u>_</u> :	. ,		_		101	1.00	
	Name of Employer (for Individual) LifePoint Health, Inc.	Occu	•	on (for Individual)		Me	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate `	Year	-to-Date ▼ 808.00									

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

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

LifePoint Health, Receipt For: Primary

Other (specify)

General

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

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

SCHEDULE A ITEMIZED RE

lma	age# 202405179646058620														
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS				Use separate schedule(s) for each category of the Detailed Summary Page	(che	FOR LINE NUMBER: PAGE 42 OF 63 (check only one) X 11a 11b 11c 12									
	ry information copied from such Reports and S for commercial purposes, other than using the								se of	sol					
	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	rate Services,	Ger	eral Partnership ("LCSGP") and	facilities	which	n are	sub	osidia	ries	s of Life	ePoi	nt He	alth	
Α.		ial) or Full C	Orga	nization Name		Date of Receipt									
	Mailing Address 330 Seven Springs Way City State			Zip Code	4 L	04 05 2024 Transaction ID : A2024-771263									
	Brentwood	TN		37027		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. C					Ξ	_	T	Ξ	_	7		75.	00	
				tion (for Individual)]	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 525.00											
В.	Full Name of Individual (Last, First, Middle Init Pigg, Russell, , ,	ial) or Full C	Orga	nization Name		Date c	of Re	ecei	pt						
	Mailing Address 330 Seven Springs Way			I=	_ [M 04	/		19		/ Y		024	Υ	
	City Brentwood	State TN		Zip Code 37027							024-7 eipt th				
	FEC ID number of contributing federal political committee.	C	Ξ			75.00 Memo Item									
	Name of Employer (for Individual) LifePoint Health, Inc.	Occ CE	•	tion (for Individual)	71										
	Receipt For:	Aggregate	Yea	ar-to-Date ▼											
	Primary General Other (specify) ▼		,	600.00											
С .	Full Name of Individual (Last, First, Middle Init Polite, Elmer, , ,	ial) or Full C	Orga	nization Name		Date o	of Re	ecei	pt						
	Mailing Address 330 Seven Springs Way					M 04		L	05	_	/ <u>Y</u>	20	024	Υ	
	City Brentwood	State TN		Zip Code 37027	<u> </u>						024-7				
	FEC ID number of contributing federal political committee.	C	-	01021		mour	nt of	Ea	ch R	ece	eipt th	is F	Period 104.		
	Name of Employer (for Individual) LifePoint Health, Inc.	I	•	tion (for Individual)		Memo Item									
	Receipt For:	ar to Dato V													

728.00

7 7

LifePoint Health, Inc.

Primary

Other (specify)

Receipt For:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

General

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

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

Senior Vice President

880.00

Aggregate Year-to-Date ▼

lmage# 202405179646058621			
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 OF 6 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Co	the name and ac	ddress of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee. d facilities which are subsidiaries of LifePoint Health
/ (collectively "LifePoint") Full Name of Individual (Last, First, Middle Polite, Elmer, , , Mailing Address 330 Seven Springs Way			Date of Receipt 04 19 2024
City Brentwood	State TN	Zip Code	Transaction ID : A2024-769958
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	С	pation (for Individual)	Amount of Each Receipt this Period 104.00 Memo Item
LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼		Division Year-to-Date ▼ 832.00]
Full Name of Individual (Last, First, Middle Poppell, Marcus, , , Mailing Address 330 Seven Springs Way	·		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code 37027	Transaction ID : A2024-771255
Brentwood FEC ID number of contributing federal political committee.	С	31021	Amount of Each Receipt this Period
Name of Employer (for Individual) LifePoint Health, Inc.		pation (for Individual) or Vice President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 770,00]
Full Name of Individual (Last, First, Middle Poppell, Marcus, , , Mailing Address 330 Seven Springs Way	Initial) or Full Or	ganization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : A2024-769999
FEC ID number of contributing federal political committee.	С	37027	Amount of Each Receipt this Period
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

		FOR LINE NUMBER: PAGE 44 OF 63									
Use separate schedule(s)	(0	che	ck only	or	ne)						
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
zotanou cummur, rugo			13		14		15		16		17
not be sold or used by any pedress of any political committee							_				

		Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Paparts and	1 Statements m	ay not be sold or used by any n	13 14 15 16 17
or for commercial purposes, other than using	the name and a	iddress of any political committee	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
LifePoint Health PAC - The PAC of LifePoint Co (collectively "LifePoint")	rporate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle A. Reynolds, David, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 330 Seven Springs Way			04 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : A2024-771274
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		45.00
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) y VP Phys Svcs	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	39.79	315.00	
Full Name of Individual (Last, First, Middle 3. Reynolds, David, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 330 Seven Springs Way			04 19 2024
City	State	Zip Code	Transaction ID : A2024-770021
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		45.00
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) g VP Phys Svcs	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		360.00	
Full Name of Individual (Last, First, Middle Russell, Michelle, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 330 Seven Springs Way			04 05 2024
City	State	Zip Code	Transaction ID : A2024-771281
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		29.00
Name of Employer (for Individual) LifePoint Health, Inc.	Occ CEO	upation (for Individual)	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify)	50 0	203.00	
SUBTOTAL of Receipts This Page (optional).	1		119.00
TOTAL This Period (last page this line numb	er only)	·····	4 4

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 45 OF 63								
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)								
TEMIZED REGEII 10		Detailed Summary Page	X 11a								
Any information copied from such Reports and Sta or for commercial purposes, other than using the r											
NAME OF COMMITTEE (In Full)											
LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	ite Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health								
Full Name of Individual (Last, First, Middle Initial A. Russell, Michelle, , ,	al) or Full C	Organization Name	Date of Receipt								
Mailing Address 330 Seven Springs Way			04 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City	State	Zip Code	Transaction ID : A2024-770045								
Brentwood	TN	37027	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		29.00								
Name of Employer (for Individual) LifePoint Health, Inc.	Occ	upation (for Individual)	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼	00 00	232.00]								
Full Name of Individual (Last, First, Middle Initia Scott, Susan, , ,	al) or Full C	Organization Name	Date of Receipt								
Mailing Address 330 Seven Springs Way			04 05 2024								
City	State	Zip Code	Transaction ID : A2024-771272								
Brentwood	TN	37027	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer (for Individual) LifePoint Health, Inc.		cupation (for Individual)	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼	7.gg. og att	350.00]								
Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt								
Mailing Address 330 Seven Springs Way			04 19 2024								
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-769968								
		01021	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		50.00								
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual)	Memo Item								
Receipt For:	I	Year-to-Date ▼									
Primary General Other (specify)	.55.09410	400.00]								
SUBTOTAL of Receipts This Page (optional)			129.00								

S IT

Receipt For: Primary General Occupation (for Individual) Hospital CEO 3 Rutherford Aggregate Year-to-Date ▼	17 utions ttee.
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution for commercial purposes, other than using the name and address of any political committee to solicit contributions from such commit NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint He (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Segal, Rebecca M, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Any information copied from such contributions and address of any political committee to solicit contributions from such contributions from such contributions from such contribut	utions ttee.
LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint He (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Segal, Rebecca M, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("Los "Los "Los "Los "Los "Los "Los "Los	
LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint He (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Segal, Rebecca M, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("LCSGP") and facilities which are subsidiaries of LifePoint Health ("Los "Los "Los "Los "Los "Los "Los "Los	
A. Segal, Rebecca M, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Date of Receipt Transaction ID : A2024-771244 Amount of Each Receipt this Period 60 Memo Item	
City Brentwood TN State TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General O4 05 2024 Transaction ID: A2024-771244 Amount of Each Receipt this Period 60 Memo Item Aggregate Year-to-Date ▼	
Brentwood TN 37027 Amount of Each Receipt this Period 60 FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Aggregate Year-to-Date ▼	
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Amount of Each Receipt this Period Amount of Each Receipt	
federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Occupation (for Individual) Hospital CEO 3 Rutherford Aggregate Year-to-Date ▼	.00
LifePoint Health, Inc. Receipt For: Primary General Hospital CEO 3 Rutherford Aggregate Year-to-Date ▼	
Primary General Aggregate Teal-to-Date V	
Primary General	
Other (aposity) = 420.00	
Other (specify) ▼ 420.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Segal, Rebecca M, , , Date of Receipt	
Mailing Address 330 Seven Springs Way MM / DD / Y Y Y 04 19 2024	Y
City State Zip Code Transaction ID : A2024-769973	
Brentwood TN 37027 Amount of Each Receipt this Period	t
FEC ID number of contributing federal political committee.	.00
Name of Employer (for Individual) Occupation (for Individual) Memo Item	
LifePoint Health, Inc. Hospital CEO 3 Rutherford	
Receipt For: Aggregate Year-to-Date ▼	
Primary General	
Other (specify) ▼ 480.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Serck, Emily, , , Date of Receipt	
Mailing Address 330 Seven Springs Way 04 05 2024	Y
City State Zip Code Transaction ID : A2024-771245	
Brentwood TN 37027 Amount of Each Receipt this Period	t
FEC ID number of contributing federal political committee.	.00
Name of Employer (for Individual) Occupation (for Individual) Memo Item	
Health Support Center Senior Director	
Receipt For: Primary Other (specify) Aggregate Year-to-Date ▼ 245.00	

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

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

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 OF 63 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and sor for commercial purposes, other than using the		ay not be sold or used by any p	person for the purpose of soliciting contributions the to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Serck, Emily, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Health Support Center Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027 upation (for Individual) nior Director Year-to-Date ▼ 280.00	Date of Receipt 19 2024 Transaction ID: A2024-769975 Amount of Each Receipt this Period 35.00 Memo Item
Full Name of Individual (Last, First, Middle In Shepherd, Tory, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Sovah Health - Martinsville Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027 Supation (for Individual) Spital COO Year-to-Date 210.00	Date of Receipt 04 05 2024 Transaction ID : A2024-771292 Amount of Each Receipt this Period 30.00 Memo Item
Full Name of Individual (Last, First, Middle In Shepherd, Tory, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Sovah Health - Martinsville Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027 upation (for Individual) pital COO Year-to-Date ▼ 240.00	Date of Receipt O4 19 2024 Transaction ID : A2024-770031 Amount of Each Receipt this Period 30.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			95.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 48 OF 63 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the			13 14 15 16 17 Derson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Simpson, Steven, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027	Date of Receipt 04 05 2024 Transaction ID : A2024-771306 Amount of Each Receipt this Period 40.00 Memo Item
Full Name of Individual (Last, First, Middle In Simpson, Steven, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027	Date of Receipt M M M / 19 2024 Transaction ID : A2024-770037 Amount of Each Receipt this Period 40.00 Memo Item
Full Name of Individual (Last, First, Middle In Sindelar, Dennis, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C	Zip Code 37027	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional)			176.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 OF 63 (check only one) X 11a
Any information copied from such Reports and 9 or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporation (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") an	d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Sindelar, Dennis, , , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt
City Brentwood	State	Zip Code 37027	04 19 2024 Transaction ID : A2024-770046
FEC ID number of contributing federal political committee.	С	37027	Amount of Each Receipt this Period 96.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	CE	year-to-Date ▼ 768.00	Memo Item
Full Name of Individual (Last, First, Middle In Sloan, Stephen, , , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt 04 05 2024
City Brentwood FEC ID number of contributing federal political committee.	State TN	Zip Code 37027	Transaction ID : A2024-771307 Amount of Each Receipt this Period 39.00
Name of Employer (for Individual) Lake Cumberland Regional Hospital Receipt For: Primary General	CF	cupation (for Individual) O Year-to-Date ▼	Memo Item
Other (specify) ▼		273.00	
Full Name of Individual (Last, First, Middle In Sloan, Stephen, , , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-769995 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		39.00
Name of Employer (for Individual) Lake Cumberland Regional Hospital Receipt For: Primary General Other (specify)	CFC	year-to-Date ▼	Memo Item
SUBTOTAL of Receipts This Page (optional)			174.00

(collectively "LifePoint")

City

Smith, Alan James, , ,

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Mailing Address 330 Seven Springs Way

NAME OF COMMITTEE (In Full)

FOR LINE NUMBER: PAGE 50 OF 63 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page 13 14 16 15 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. LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt 2024 04 05 Zip Code Transaction ID : A2024-771290

	Donatura	TN	, , , , , , , , , , , , , , , , , , , ,	114110401101111011111111111111111111111
	Brentwood	IIN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		154.00
	Name of Employer (for Individual) LifePoint Health, Inc.	Occupa SVP C	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1078.00	
В.	Full Name of Individual (Last, First, Middle Initial Smith, Alan James, , , Mailing Address 330 Seven Springs Way	l) or Full Orga	nization Name	Date of Receipt
	City Brentwood	State	Zip Code 37027	04 19 2024 Transaction ID : A2024-769962 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		154.00
	Name of Employer (for Individual) LifePoint Health, Inc.	Occupa SVP C	ation (for Individual) IO	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1232.00	
С.	Full Name of Individual (Last, First, Middle Initial Sparks, Carolyn, , ,	l) or Full Orga	nization Name	Date of Receipt
	Mailing Address 330 Seven Springs Way			04 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771252 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		56.00
	Name of Employer (for Individual) STRHS - Winchester	Occupa Hospita	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 392.00	
S	SUBTOTAL of Receipts This Page (optional)		>	364.00
Т	OTAL This Period (last page this line number or	nly)		

State

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 OF 63 (check only one) X 11a
Any information copied from such Reports and Stor for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpor (collectively "LifePoint")	rate Services,	, General Partnership ("LCSGP") a	nd facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle Init Sparks, Carolyn, , , Mailing Address 330 Seven Springs Way	ial) or Full C	Organization Name	Date of Receipt 04 19 2024
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770029
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 56.00
Name of Employer (for Individual) STRHS - Winchester Receipt For: Primary General Other (specify) ▼	Hos	cupation (for Individual) spital COO e Year-to-Date ▼ 448.00	Memo Item
Full Name of Individual (Last, First, Middle Init Stewart, Alice, , , Mailing Address 330 Seven Springs Way	ial) or Full C	Organization Name	Date of Receipt 04 05 2024
City Brentwood FEC ID number of contributing federal political committee.	State TN	Zip Code 37027	Transaction ID : A2024-771309 Amount of Each Receipt this Period 42.00
Name of Employer (for Individual) Clinch Valley Health Receipt For: Primary General Other (specify) ▼	CF	cupation (for Individual) O Year-to-Date ▼ 294.00	Memo Item
Full Name of Individual (Last, First, Middle Init Stewart, Alice, , ,	ial) or Full C	Organization Name	Date of Receipt
Mailing Address 330 Seven Springs Way City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-770016 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer (for Individual) Clinch Valley Health Receipt For: Primary General Other (specify)	CFC	cupation (for Individual) O 2 Year-to-Date ▼ 336.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			140.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 OF 63 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	orate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle In Svidergol-Peterman, Jessica, A, , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771324 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		31.00
Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	Hos	eupation (for Individual) spital CNO 1 Miner's Med Year-to-Date ▼ 217.00	Memo Item
Full Name of Individual (Last, First, Middle In Svidergol-Peterman, Jessica, A, , Mailing Address 330 Seven Springs Way	itial) or Full C	Organization Name	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood FEC ID number of contributing	State TN	Zip Code 37027	Transaction ID : A2024-769960 Amount of Each Receipt this Period
rederal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General	Hos	cupation (for Individual) spital CNO 1 Miner's Med Year-to-Date ▼	Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle In	itial) or Full C	248.00 Organization Name	
Thomas, Robert, , , Mailing Address 330 Seven Springs Way			Date of Receipt O4 05 2024
City Brentwood	State TN	Zip Code 37027	Transaction ID : A2024-771322 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer (for Individual) Central Carolina Hospital Receipt For: Primary Other (specify)	Hos	eupation (for Individual) spital CEO Year-to-Date ▼ 525.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			137.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(che	R LINE eck only	one	e) 11b	1	I1c	53 (OF_	63
Any information copied from such Reports and	Statements ma	av n	not he sold or used by any ne	erson	13 for the		14		15	16 contribu	ıtions	17
or for commercial purposes, other than using th	e name and a	addre	ess of any political committee	to so	licit cor	ntribu	tions	from	such	commit	ttee.	
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corp (collectively "LifePoint")	orate Services,	Gen	eral Partnership ("LCSGP") and	facilitie	s which	are s	ubsidia	aries	of LifeF	oint He	alth	
Full Name of Individual (Last, First, Middle Ir Thomas, Robert, , ,	nitial) or Full C)rgai	nization Name		Date of	Rec	eipt					
Mailing Address 330 Seven Springs Way					M = M 04	/	19		Y	2024	Y	
City Brentwood	State TN		Zip Code 37027		Transaction ID : A2024-769963 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С	Ξ								75	.00	
Name of Employer (for Individual) Central Carolina Hospital		•	tion (for Individual) I CEO		Me	emo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 600.00									
Full Name of Individual (Last, First, Middle Ir Wallace, Lisa, 3, ,	nitial) or Full C)rgai	nization Name		Date of	Rec	eipt					
Mailing Address 330 Seven Springs Way					M M M	1	05		Y	2024	Y	
City Brentwood	State TN		Zip Code 37027		Trans: Amount						1	
FEC ID number of contributing federal political committee.	С	_				0. 2		1000	- Pr	_	.00	
Name of Employer (for Individual) LifePoint Health, Inc.	Occ		tion (for Individual)		Me	emo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 595.00									
Full Name of Individual (Last, First, Middle Ir Wallace, Lisa, 3, ,	nitial) or Full C)rgai	nization Name		Date of	Rec	eipt					
Mailing Address 330 Seven Springs Way					04		19)	L.	2024	Y	
City Brentwood	State TN		Zip Code 37027		Trans Amount				024-76 ipt this		<u></u>	
FEC ID number of contributing federal political committee.	С	Ī						_	-	_	.00	
Name of Employer (for Individual) LifePoint Health, Inc.	Occ	•	tion (for Individual)		Me	emo	Item					
Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 680.00									

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

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

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 54 OF Use separate schedule(s) (check only one)

ITI	EMIZED RECEIPTS			or each category of the Detailed Summary Page		11a 13		11b 14	11c 15	12 16	17
	y information copied from such Reports and Stator commercial purposes, other than using the n										
\rangle	NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corpora (collectively "LifePoint")	te Services,	Gen	eral Partnership ("LCSGP") and f	aciliti	es which	n are s	subsidia	aries of Life	ePoint He	alth
A.	Full Name of Individual (Last, First, Middle Initia Wang, Charles, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify) ▼	State TN Occi	upat	Zip Code 37027 ion (for Individual) of of Staff ur-to-Date ▼ 553.00		Amoun	saction of	05 on ID :	A2024-7 Receipt th	is Period	
B.	Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc.	State TN Occ VP	upat Chie	Zip Code 37027 tion (for Individual) ef of Staff ur-to-Date ▼ 632,00		Amoun	saction of	19 on ID :	A2024-7 Receipt th	is Period	i .00
C.	Full Name of Individual (Last, First, Middle Initia White, Linda, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C Occurrence Hospital Country Countr	upat	Zip Code 37027 ion (for Individual) COO 5 Frye		Amoun	sacti	05 on ID	A2024-7 Receipt th		
s	UBTOTAL of Receipts This Page (optional)			·····				, ,	. ,	274	.00
T	OTAL This Period (last page this line number on	ıly)		>				,	7		0

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 55 OF 63 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements m	Detailed Summary Page ay not be sold or used by any paddress of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			d facilities which are subsidiaries of LifePoint Health
Full Name of Individual (Last, First, Middle Init A. White, Linda, , , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C Occ Hos	Zip Code 37027 Supation (for Individual) spital COO 5 Frye Year-to-Date ▼ 928.00	Date of Receipt M M M
Full Name of Individual (Last, First, Middle Init Willis, Casey, J, , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN Occ Hos	Zip Code 37027 Supation (for Individual) spital COO 4 National Park Year-to-Date ▼ 385.00	Date of Receipt O4 O5 2024 Transaction ID : A2024-771289 Amount of Each Receipt this Period 55.00 Memo Item
Full Name of Individual (Last, First, Middle Init Willis, Casey, J, , Mailing Address 330 Seven Springs Way City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) LifePoint Health, Inc. Receipt For: Primary General Other (specify)	State TN C Occ Hos	Zip Code 37027 Lupation (for Individual) Epital COO 4 National Park Year-to-Date ▼ 440.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)			226.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 56 OF 63							
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)							
TEMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)										
LifePoint Health PAC - The PAC of LifePoint Corpo (collectively "LifePoint")	rate Services,	General Partnership ("LCSGP") and	facilities which are subsidiaries of LifePoint Health							
Full Name of Individual (Last, First, Middle Init A. Zachariah, Jason, , ,	tial) or Full C	Organization Name	Date of Receipt							
Mailing Address 330 Seven Springs Way			04 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State	Zip Code	Transaction ID : A2024-771285							
Brentwood	TN	37027	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		174.00							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
LifePoint Health, Inc. Receipt For:		sident, Integration Solutions								
Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼		1218.00								
Full Name of Individual (Last, First, Middle Init	tial) or Full C	Organization Name	Date of Receipt							
Mailing Address 330 Seven Springs Way			M M / D D / Y Y Y Y							
			04 19 2024							
City Brentwood	State	Zip Code 37027	Transaction ID : A2024-770049							
	110	31021	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		174.00							
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) sident, Integration Solutions	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		1392.00								
Full Name of Individual (Last, First, Middle Init	tial) or Full C	Organization Name	Date of Receipt							
Mailing Address 330 Seven Springs Way			04 05 2024							
City	State	Zip Code	Transaction ID : A2024-771269							
Brentwood	TN	37027	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.00							
Name of Employer (for Individual) LifePoint Health, Inc.		upation (for Individual) t VP Construction Proj Mgmt	Memo Item							
Receipt For:		Year-to-Date ▼								
Primary General Other (specify)	33 3 3 4	238.00								
SURTOTAL of Receipts This Page (ontional)			382.00							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

		FOR LINE NUMBER: PAGE 57 OF 63									63	
Use separate schedule(s)	(0	(check only one)										
for each category of the Detailed Summary Page		×	11a		11b		11c		12			
			13		14		15		16			17
not be sold or used by any person for the purpose of soliciting contributions lress of any political committee to solicit contributions from such committee.												

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate Services, General Partnership ("LCSGP") and facilities which are subsidiaries of LifePoint Health (collectively "LifePoint") Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Zarnick, Gregory, , , Date of Receipt Mailing Address 330 Seven Springs Way 2024 19 City Zip Code State Transaction ID: A2024-770025 TN Brentwood 37027 Amount of Each Receipt this Period FEC ID number of contributing C 34.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LifePoint Health, Inc. Asst VP Construction Proj Mgmt Receipt For: Aggregate Year-to-Date ▼ Primary General 272.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 34.00 SUBTOTAL of Receipts This Page (optional)..... 12238.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	Her	make a decided ()	FOR LINE	NUMBER:	PAGE 58 OF 63
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only		00
		Summary Page	X 21b 28a	22 28b	23 26 27 30b
A	<u> </u>				
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)		71			
LifePoint Health PAC - The PAC of LifePoint Corporate Se (collectively "LifePoint")	ervices, Genera	al Partnership ("LCS0	GP") and facilities	s which are subs	idiaries of LifePoint Health
Full Name (Last, First, Middle Initial)					
A. Regions Bank				Date of Dis	bursement / Y Y Y Y Y
Mailing Address One Nashville Place, 330 Seven Sp	or			04	09 2024
,	State	Zip Code		FEC Identifi	cation Number
Brentwood Burness of Dishursoment	TN	37027			
Purpose of Disbursement			001		
Bank Service Charge Candidate Name			001		ction ID : B873035
Candidate Name			Category/	Amount of E	Each Disbursement this Period
Office Sought: House Disburser	nent For: 2	024	Туре		145.29
Senate Disburser	Primary	General			7 7
President	,				
State: District:	Other (spec	Not Applicable		Memo I	tem
Full Name (Last, First, Middle Initial)					
3.				Date of Dis	hursement
				Date 6: Bio	
				M = M /	D D / Y Y Y Y
maining / tachess					
City	State	Zip Code		FEC Identifi	cation Number
Purpose of Disbursement		I			
Candidate Name					
Candidate Name			Category/	Amount of E	Each Disbursement this Period
Office Sought: House Disbursen	nont For:		Туре		
Senate	Primary	General			
	Other (spec			-	
State: District:	Other (spec	пу)		Memo I	tem
Full Name (Last, First, Middle Initial)					
C.				Date of Dis	bursement
				M M /	D D / Y Y Y Y
Mailing Address				W - W 7	
City	State	Zip Code		FEC Identifi	cation Number
Purpose of Disbursement		'		С	
				U	
Candidate Name		- ·	Category/	Amount of F	Each Disbursement this Period
			Type	Amount of L	Eden Biobardement tine i ched
Office Sought: House Disburser	nent For:	1	-		
Senate	Primary	General			
President	Other (spec	ify) ▼		Memo I	tem
State: District:				Memo	item
			'		
SUBTOTAL of Disbursements This Page (optional)					145.29
					7
TOTAL This Period (last page this line number only)				L	145.29
			-		,

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 59 OF 6	63					
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Clieck Olliy	•						
	Detailed Summary Page	21b	22 🗶 23 26 27						
		28a	28b 28c 29 30b						
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or us ne and address of any politi	sed by any perso cal committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
LifePoint Health PAC - The PAC of LifePoint Corporate Se (collectively "LifePoint")	rvices, General Partnership ("LC	SGP") and facilities	s which are subsidiaries of LifePoint Health						
Full Name (Last, First, Middle Initial)									
A. Friends of John Barrasso			Date of Disbursement						
Mailing Address PO Box 52008		04 08 2024							
City	State Zip Code		FEC Identification Number						
	WY 82605		T E G Identification Number						
Purpose of Disbursement		044	C C00436386						
Contribution		011	Transaction ID : B868494						
Candidate Name		Category/	Amount of Each Disbursement this Period	1					
Barrasso, John, , ,		Туре	2500.00	1					
	nent For: 2024 Primary General		2000.00	4					
President	Other (specify) ▼		Memo Item						
State: WY District:									
Full Name (Last, First, Middle Initial)			Date of Disbursement						
P. HAPAC									
Mailing Address 30 North Third Street Suite 600			04 08 7 2024						
City	State Zip Code								
-	PA 17101		FEC Identification Number						
Purpose of Disbursement			C C00128082						
Contribution		011	Transaction ID : B873297						
Candidate Name		Category/	Amount of Each Disbursement this Period	ı					
		Type		7					
	nent For: 2024		5000.00	_					
	Primary General								
State: District:	Other (specify) Not Applicab	اما	Memo Item						
Full Name (Last, First, Middle Initial)	Νοι Αρριισασ		_						
			Date of Disbursement						
Team Joyce for Pennsylvania			M M / D D / Y Y Y						
Mailing Address 824 S. Milledge Ave. Suite 101			04 08 2024						
City	State Zip Code		FEC Identification Number						
Athens	GA 30605		TEC Identification Number						
Purpose of Disbursement		200	C C00747220						
Contribution Candidate Name		011	Transaction ID : B869493						
Candidate Name		Category/	Amount of Each Disbursement this Period	<u> </u>					
Office Sought: House Disbursem	nent For: 2024	Type	1500.00	1					
	Primary General		<u> </u>	-1					
	Other (specify) ▼		Marra Harra						
State: District:	Not Applicabl	e	Memo Item						
		'		$\overline{1}$					
SUBTOTAL of Disbursements This Page (optional)			9000.00	┛					
		-		7					
TOTAL This Period (last page this line number only).									

ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page) FOR LINE (check only 21b 28a	•
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate Set (collectively "LifePoint")			
Full Name (Last, First, Middle Initial) Team Rick Scott Mailing Address PO Box 76024			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20002	011 Category/	FEC Identification Number C C00692343 Transaction ID: B869214 Amount of Each Disbursement this Period
Senate	ment For: 2024 Primary General Other (specify) ▼ Not Applicab	Type	5000.00 Memo Item
Full Name (Last, First, Middle Initial) Kaine for Virginia Mailing Address 1751 Potomac Greens Drive			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Alexandria Purpose of Disbursement Contribution Candidate Name Kaine, Tim, , , Office Sought: House Disbursem	State Zip Code 22314 ment For: 2024 Primary General Other (specify)	011 Category/ Type	FEC Identification Number C C00495358 Transaction ID: B869593 Amount of Each Disbursement this Period 5000.00 Memo Item
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement
City S Purpose of Disbursement	State Zip Code	· · · ·	FEC Identification Number
President	ment For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period Memo Item
State: District:			10000.00
TOTAL This Period (last page this line number only).			19000.00

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER:	PAGE 61 OF 63
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	one)	_
		Summary Page	21b	22 23	26 27
			28a	28b 28c >	〈 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
LifePoint Health PAC - The PAC of LifePoint Corporate Se (collectively "LifePoint")	rvices, Genera	al Partnership ("LCS	GP") and facilities	s which are subsidiaries o	of LifePoint Health
Full Name (Last, First, Middle Initial)					
A. Tony Hampton for State Representative				Date of Disburseme	ent
Mailing Address 120 Marketplace Circle Suite F				04 09	2024
City	State	Zip Code		FEC Identification N	Number
Georgetown	KY	40324		1 LO Identinoation 1	varibo:
Purpose of Disbursement				C	
P-2024 State House 62 KY			011	Transaction ID	B869592
Candidate Name			Category/		sbursement this Period
Hampton, Tony, , ,			Type		
Office Sought:	nent For: 2	024			500.00
Senate	Primary	General		4 4	
President State: KY District: 62	Other (spec	ify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)					
B				Date of Disburseme	ent
Matt Nunn for State Senate					_
Mailing Address 315 Eagle Creek Trail				04 09	2024
City	State	Zip Code			
Sadieville	KY	40370		FEC Identification I	Number
Purpose of Disbursement				С	
P-2024 State Senate 17 KY			011		
Candidate Name				Transaction ID	
Category/			Category/ Type	Amount of Each Di	sbursement this Period
	Disbursement For: 2024				1000.00
	✓ Primary General			7	4
	Other (specify)				
State: KY District: 17	Calcil (openity)			Memo Item	
Full Name (Last, First, Middle Initial)					
C. Ambrose Castellano District 70 Ca	mpaign l	Fund		Date of Disburseme	ent
Mailing Address P.O. Box 114				04 / 22	2024
City	State	Zip Code		FEO / I I'' '	Mla a
Serafina	NM	87569		FEC Identification I	number
Purpose of Disbursement		-		C	
P-2024 State House 70 NM			011	Transaction ID) . D070200
Candidate Name			Category/		sbursement this Period
Castellano, Ambrose, M, ,			Type	Amount of Edon Di	obdiociniciti tino i chod
Office Sought: Y House Disbursen	nent For: 2	024	7, -		1000.00
	Primary	General		4	4-
	Other (spec	ify) 🔻		Mama Harr	
State: NM District: 70	` .			Memo Item	
l					
SUBTOTAL of Disbursements This Page (optional)			·····•		2500.00
TOTAL This Period (last page this line number only)					

ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE N (check only 21b	one)22232627
Any information copied from such Reports and State			28a	28b 28c X 29 30b
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate So (collectively "LifePoint")	ervices, Gener	ral Partnership ("LCS0	GP") and facilities	which are subsidiaries of LifePoint Health
Full Name (Last, First, Middle Initial)				
A. Marasella Duarte for State Representative				Date of Disbursement
Mailing Address 3301-R Coors Blvd				04 22 2024
City	State	Zip Code		CCC Identification Number
Albuquerque	NM	87120		FEC Identification Number
Purpose of Disbursement				
P-2024 State House 16 NM			011	Transaction ID : B870210
Candidate Name			Category/	Amount of Each Disbursement this Period
Duarte, Marsella, , ,			Type	
Office Sought: House Disburse	ment For: 2	2024		1000.00
Senate X	Primary	General		,
President	Other (spec	cify) 🔻		Memo Item
State: NM District: 16				
Full Name (Last, First, Middle Initial)				
^{B.} Gabriel Duran				Date of Disbursement
Markey Address COTO D				M M / D D / Y Y Y Y
Mailing Address 2070 Rosedale Dr				04 22 2024
,	State	Zip Code		FEC Identification Number
Las Cruces Purpose of Disbursement	NM	88005		
Purpose of Disbursement			011	C
P-2024 State House 35 NM Candidate Name				Transaction ID : B870209
Duran, Gabriel, , ,		Amount of Each Disbursement this Period		
	ment For: 2	2024	туре	1000.00
Senate Seagning Senate	Primary General		7 7	
President	Other (spec			
State: NM District: 35	(-	,		Memo Item
Full Name (Last, First, Middle Initial)				
	4.1.1			Date of Disbursement
Cmte. to Elect Harry Garcia for NM House				M M / D D / Y Y Y
Mailing Address 31 Garcia Boulevard				04 22 2024
City	State	Zip Code		FEC Identification Number
Grants	NM	87020		
Purpose of Disbursement				
P-2024 State House 69 NM			011	Transaction ID : B870207
Candidate Name			Category/	Amount of Each Disbursement this Period
Garcia, Harry, , ,	mont For: 5	0004	Туре	1000.00
Office Sought: House Disburse	ment For: 2			1000.00
President	Primary Other (spec	General		
State: NM District: 69	oniei (shec	,,,,, ,		Memo Item
Ciato. IIII Diotriot. 09				
SUBTOTAL of Disbursements This Page (optional)			················· >	3000.00
TOTAL This Period (last page this line number only)			

ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the Detailed Summary Page	check only	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam		used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LifePoint Health PAC - The PAC of LifePoint Corporate Ser (collectively "LifePoint")			
Full Name (Last, First, Middle Initial) Cmte to Elect Patricia Lundstrom Mailing Address 3406 Blue Hill Avenue			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code NM 87301		FEC Identification Number
P-2024 State House 09 NM Candidate Name Lundstrom, Patricia (Patty) A., , ,		011 Category/ Type	Transaction ID: B870174 Amount of Each Disbursement this Period
Senate	nent For: 2024 Primary General Other (specify) ▼		2000.00 Memo Item
Full Name (Last, First, Middle Initial) B. Willie Madrid for State Representation Mailing Address 113 McLain Road	tive		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code NM 88081	011	FEC Identification Number C Transaction ID: B870205
Madrid, Willie, , , Office Sought: House Disbursem Senate	nent For: 2024 Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item
Full Name (Last, First, Middle Initial) C. Marian Matthews for HD 27 Mailing Address P.O. Box 21256			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Albuquerque Purpose of Disbursement P-2024 State House 27 NM Candidate Name Matthews, Marian, , ,	State Zip Code NM 87154	011 Category/ Type	FEC Identification Number C Transaction ID: B870175 Amount of Each Disbursement this Period 1000.00
Senate	nent For: 2024 Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)		······	4000.00
TOTAL This Period (last page this line number only).		·····•	9500.00