MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

Tł	ne MPAC Instruction	Guide explains how to complete this form	1 Filer ID (Ethics Commission Filers) 00084320	2 Total pages filed: 5			
3	COMMITTEE NAME	OFFICE USE ONLY					
	Ardent Legacy Hol						
				Date Received ELECTRONICALLY FILED 12/05/2024			
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
	ADDRESS	340 Seven Springs Way					
		Suite 100					
	Change of Address	Brentwood, TN 37027		Date Hand-delivered or Date Postmarked			
5	CAMPAIGN	MS / MRS / MR FIRST	MI				
	TREASURER	Mrs. Ashley	M	Receipt # Amount			
	NAME	MIS. Asiliey	101.				
				Date Processed			
		NICKNAME LAST	SUFFI	<			
		Crabtro	ee	Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEAS	E); APT / SUITE #; CITY; ST	ATE; ZIP CODE			
ľ	TREASURER	340 Seven Springs Way					
	STREET						
	ADDRESS (Residence or Business)	Suite 100					
		Brentwood, TN 37027					
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
	TREASURER MAILING	340 Seven Springs Way					
	ADDRESS	Suite 100					
	Change of Address	Brentwood, TN 37027					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(615) 296-3202					
	THOME	(010) 200 0202					
9	REPORT TYPE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)			
10	MONTHLY			October 5			
	REPORT FILING DEADLINE	January 5	oril 5 🛛 🗌 July 5				
		February 5	ay 5 August 5	November 5			
		March 5 Ju	ine 5 September 5	X December 5			
11		Marth Dav Ver	Marsh				
111	L PERIOD COVERED	Month Day Year	THROUGH Month 11/25/	Day Year			
		10/26/2024	11/25/	2024			
GO TO PAGE 2							
L Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2						

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)			
Ardent Legacy Holdings LLC Good Government Fund 0008			00084320)			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00			
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	7,500.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	324,630.37			
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00			
16 AFFIDAVIT							
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.							
	Mrs. Ashley M. Crabtree						
Signature of Campaign Treasurer							
AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and subscribed	Sworn to and subscribed before me, by the said day						
of, 20, to certify which, witness my hand and seal of office.							
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath			
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2			

FORM MPAC COVER SHEET PG 3

17 COMMITT	(Ethics Commission Filers)							
Ardent Legacy Holdings LLC Good Government Fund 00084320								
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT							
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	R	\$					
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL	ATION OR	\$					
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$					
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$					
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$					
9.	SCHEDULE E: LOANS		\$					
10. X	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS							
11.	11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS							
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
13.	13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD							
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$					
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$ 1,344.83					

SUBTOTALS - MPAC

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fe Fo y - Gi al Committee Le	rent Expense res iod/Beverage Expense ft/Awards/Memorials Expense gal Services he Instruction Guide ex	Loan Repa Office Ove Polling Exp e Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expen Travel in District Travel Out of District OTHER (enter a category not listed above)	ISE	
1 Total pages Schedule F1:	2 FILER NAME				3 Filer ID (Ethics Commission F	-ilers)	
Sch: 1/1 Rpt: 4/5		y Holdings LLC God	od Governmen	t Fund	00084320		
4 Date	5 Payee name	, ,					
10/30/2024	Moran Victory	Fund					
6 Amount (\$)	7 Payee address	; City;	State; Zip Co	de			
\$2,500.00	P.O. Box 308	44					
Expenditure from corporate funds	Bethesda, MI	0 20824					
8 PURPOSE	(a) Category (See	Categories listed at the top of	this schedule)	(b) Description			
OF EXPENDITURE		Donations Made By	·		outside of Texas. Complete Schedule T.		
	Candidate/Of	ficeholder/Political (Committee		, TX, officeholder living expense ribution to Joint Fundraising Com	mittoo	
					ittee ID# C00814129	millee	
9 Complete <u>ONLY</u> if direct	Candidate/Office	holder name	Office sou	nht	Office held		
expenditure to benefit C/O				,			
Date	Payee name						
10/30/2024	Oklahoma Ho	spital Association					
Amount (\$)	Payee address	; City;	State; Zip Co	de			
\$5,000.00	4000 Lincoln	Boulevard					
Expenditure from corporate funds	Oklahoma Cit	y, OK 73105					
PURPOSE	(a) Category (See	Categories listed at the top of	this schedule)	(b) Description			
OF EXPENDITURE		Donations Made By			outside of Texas. Complete Schedule T.		
	Candidate/Of	ficeholder/Political (Committee		, TX, officeholder living expense		
				state associa	tion support		
Complete <u>ONLY</u> if direct	Candidate/Office	holdor namo	Office sou	t	Office held		
expenditure to benefit C/O		noidei name	Onice Sou	jin	Onice heid		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00084320 4 Date 5 Name of person from whom amount is received Bank of America, N.A. 8 Amount (\$) 4 Date 6 Address of person from whom amount is received: City: State: Zip Code 8 4 0.031/2024 7 Purpose for which amount is received: City: State: Zip Code 8 4 Attanta, GA 30308 7 Purpose for which amount is received: City: State: Zip Code 8 4 Interest Check if political contribution returned to filer 1 Interest Filer State: Zip Code 1		The Instruction (Juide explains how to complete this form					ages Schedule K: ./1 Rpt: 5/5
4 Date 5 Name of person from whom amount is received 8 Amount (\$) 10/31/2024 Bank of America, N.A. \$1,344.83 6 Address of person from whom amount is received; City; State; Zip Code 4 Atlanta, GA 30308 7 Purpose for which amount is received Check if political contribution returned to filer	2	2 FILER NAME 3			3	Filer ID	(Ethics Commission Filers)
10/31/2024 Bank of America, N.A. \$1,344.83 6 Address of person from whom amount is received; City; State; Zip Code \$1,344.83 Atlanta, GA 30308 1 7 Purpose for which amount is received Check if political contribution returned to filer		Ardent Lega	су	Holdings LLC Good Government Fund		00084	320
 6 Address of person from whom amount is received; City; State; Zip Code Atlanta, GA 30308 7 Purpose for which amount is received Check if political contribution returned to filer 	4	Date	5	Name of person from whom amount is received	·		8 Amount (\$)
 6 Address of person from whom amount is received; City; State; Zip Code Atlanta, GA 30308 7 Purpose for which amount is received 		10/31/2024					\$1,344.83
7 Purpose for which amount is received Check if political contribution returned to filer			6	Address of person from whom amount is received; City; State; Zip Code			
7 Purpose for which amount is received Check if political contribution returned to filer							
7 Purpose for which amount is received Check if political contribution returned to filer							
			7	—	Check if politi	cal conti	ribution returned to filer
				Interest			