FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084320 3 COMMITTEE NAME **OFFICE USE ONLY** Ardent Legacy Holdings LLC Good Government Fund Date Received **ELECTRONICALLY FILED** 02/05/2025 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 MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. Ashley M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Crabtree CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 340 Seven Springs Way STREET **ADDRESS** Suite 100 (Residence or Business) Brentwood, TN 37027 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 340 Seven Springs Way MAILING **ADDRESS** Suite 100 Change of Address Brentwood, TN 37027 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (615) 296-3202 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2024 01/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			· · · · · · · · · · · · · · · · · · ·		
2 COMMITTEE NAME			13 File		(Ethics Commission Filers)
Ardent Legacy Holdir	ngs LLC Good Governme	nt Fund	000	84320	
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	0. 14	A. Supported			
	Measures (Describe by date and location)	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS		O POLITICAL CONTRIBUTIONS (OTF OR GUARANTEES OF LOANS, OR	HER THAN		
	CONTRIBUTIONS N	ADE ELECTRONICALLY) qualifies for the higher itemization threshold	d	\$	0.00
	2. TOTAL POLITICA		-	\$	22 221 22
	(OTHER THAN PLE	OGES, LOANS, OR GUARANTEES C	OF LOANS)	ľ	23,821.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS C G PERIOD	OF THE LAST DAY	\$	344,404.25
OUTSTANDING LOAN TOTALS	l l	AMOUNT OF ALL OUTSTANDING LO REPORTING PERIOD	DANS AS OF THE	\$	0.00
6 AFFIDAVIT				1	
		I swear, or affirm, unde true and correct and ind under Title 15, Election	cludes all information	nat the ac required	ccompanying report is to be reported by me
			Mrs. Ashley M. Cr	ahtroo	
		Si	ignature of Campaign		er
AFEIX NOTA	RY STAMP / SEAL ABOVE				
					day
ot	, 20, to certify	vhich, witness my hand and seal of of	tice.		
Signature of officer	administering oath	Printed name of officer administering	oath Title	e of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

				3 of 12				
17 COMMITT Ardent Le	(Ethics Comn	nission Filers)						
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE							
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	23,821.00				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$					
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	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.	9. SCHEDULE E: LOANS							
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$					
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	1,218.87				

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 4/12	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Goverr	nment Fund			00084320	
4	Date 01/22/2025	Full name of contributor Alexander, Lisa (Ms.) Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$350.00
		Topeka, KS 66610					
8		pation / Job title (See Instructions) 9	1			
	Assistant Ch	ief Nursing Officer		AHS Management Com	pa	ny, Inc.	
	Date 01/21/2025	Full name of contributor Anthony, Paula (Ms.) Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$500.00
		Tyler, TX 75703					
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Chief Strate	gy and Development		UT Health East Texas			
	Date 01/22/2025	Full name of contributor Baldridge, Dava (Ms.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
		Claremore, OK 74017					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Nursin	g Officer		Hillcrest Hospital Claren	nor	е	
	Date 01/22/2025	Full name of contributor Bateman, Bryan (Mr.) Contributor address; City; St Amarillo, TX 79109	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Chief Execut	pation / Job title (See Instructions tive Officer		Employer (See Instructions BSA Health System	s)		
	Date 01/21/2025	Full name of contributor Beard, Mary (Ms.) Contributor address; City; St Nashville, TN 37215	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Vice Preside	nt - Legal		AHS Management Com	pa	ny, Inc.	

	MONEI	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comp	lete this for	n.	1	Total pages Schedule A1: Sch: 2/8 Rpt: 5/12	
2	FILER NAME				1	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Government Fund	d			00084320	
4	Date 01/21/2025	 5 Full name of contributor	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
		Brentwood, TN 37027					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u>I</u> s)		
	Chief Execut			AHS Management Com		y, Inc.	
	Date	Full name of contributor Out-of-sta	ate PAC (ID#:	1	.	Amount of Contribution (\$)	
	01/24/2025	Botros, Jessica (Ms.) Contributor address; City; State; Zip Cod			-	Amount of Continuation (\$)	\$350.00
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Vice Preside	nt - Technology & Consumer Services		AHS Management Com	ıpan	y, Inc.	
	Date 01/21/2025	Full name of contributor out-of-sta Burton, Carol (Ms.) Contributor address; City; State; Zip Cod	ate PAC (ID#:)	-	Amount of Contribution (\$)	\$500.00
		Nashville, TN 37205					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Vice Preside	nt - Physician & Provider Relations		AHS Management Com	ıpan	y, Inc.	
	Date 01/21/2025	Full name of contributor out-of-state Courtney, Dave (Mr.) Contributor address; City; State; Zip Code Murfreesboro, TN 37129	ate PAC (ID#:)		Amount of Contribution (\$)	\$350.00
	•	pation / Job title (See Instructions)		Employer (See Instructions			
	Vice Preside	nt - Tax		AHS Management Com	ıpan	y, Inc.	
	Date 01/22/2025	Full name of contributor out-of-sta Daniels, Kristen (Ms.) Contributor address; City; State; Zip Cod Brentwood, TN 37027	ate PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Vice Preside	nt - Hospital Operations/Service Lines		AHS Management Com	npan	y, Inc.	
			•				

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/12
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund		00084320
4	Date 01/21/2025	5 Full name of contributorDeMourdaunt, Jeff (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7 Amount of Contribution (\$) \$350.00
		Franklin, TN 37069			
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	s)
	Vice Preside	nt - Human Resources		AHS Management Com	ipany, Inc.
	Date 01/23/2025	Full name of contributor Dolan, Lisa (Ms.) Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code		Amount of Contribution (\$) \$1,000.00
		Louisville, KY 40220	1		
		pation / Job title (See Instructions	(1)	Employer (See Instructions	
	Chief Nursin	g Officer		AHS Management Com	ipany, Inc.
	Date 01/21/2025	Full name of contributor Faldetta, John (Mr.) Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code		Amount of Contribution (\$) \$350.00
		Brentwood, TN 37027			
		pation / Job title (See Instructions)	Employer (See Instructions	
	Vice Preside	nt - Legal		AHS Management Com	ipany, Inc.
	Date 01/21/2025	Full name of contributor Freeman, Nikki (Ms.) Contributor address; City; Si Bixby, OK 74008	out-of-state PAC (ID#:_ ate; Zip Code		Amount of Contribution (\$) \$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Vice Preside	nt - Human Resources		AHS Management Com	pany, Inc.
	Date 01/22/2025	Full name of contributor Gastineau, Trent (Mr.) Contributor address; City; Si Tulsa, OK 74136	out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$350.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	; s)
	Chief Execut	tive Officer		Tulsa Spine & Specialty	/ Hospital

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 7/12	
2	FILER NAME		. –		3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Gover				00084320	
4	Date 01/21/2025	5 Full name of contributorGross, Kevin (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Tulsa, OK 74137					
8		pation / Job title (See Instructions	9	, , ,			
	Chief Execut	tive Officer		Hillcrest HealthCare Sys	ste	n	
	Date 01/22/2025	Full name of contributor Hennum, Laura (Ms.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$750.00
		Bixby, OK 74008					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Execut	tive Officer		Hillcrest Hospital South			
	Date 01/21/2025	Full name of contributor Jerome, Joshua (Mr.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
		Edgewater, NJ 07020					
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;) [
	Assistant Ad		,	Hackensack Meridian M		ntainside	
_	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	01/21/2025	Kueker, Michael (Mr.) Contributor address; City; St Albuquerque, NM 87113				y another of Contabation (c)	\$500.00
	Principal occu Chief Execut	pation / Job title (See Instructions tive Officer	(1)	Employer (See Instructions Lovelace Medical Group			
	Date 01/21/2025	Full name of contributor Lee, Debra (Ms.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$350.00
		Tyler, TX 75701	,				
		pation / Job title (See Instructions)	Employer (See Instructions		aiaia na	
	Chief Financ	iai Officer		UT Health East Texas F	rily	รเบเสทร 	

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	_E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 8/12	
2	FILER NAME				1	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund			00084320	
4	Date 01/24/2025	5 Full name of contributor McPherson, Valarie (Ms.)6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$500.00
•	Dringing aggr	Montville, NJ 07045	, I	O Employer (Coo Instructionary			
o	Chief Operat	pation / Job title (See Instructions	b)	9 Employer (See Instructions Hackensack Meridian M		tainside	
				TIACKETISACK METICIATI N	_		
	Date 01/23/2025	Full name of contributor Miller, Brian (Mr.) Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$750.00
		Albuquerque, NM 87120					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Chief Execut	tive Officer		Lovelace Medical Cente	er/He	eart Hospital at LMC	
	Date 01/22/2025	Full name of contributor Miner, Timothy (Mr.) Contributor address; City; S	out-of-state PAC (ID#:)	·-	Amount of Contribution (\$)	\$350.00
		Franklin, TN 37067					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u>l</u> s)		
		nt - Reimbursement	,	AHS Management Com	•	y, Inc.	
	Date 01/21/2025	Full name of contributor Nelson, Meredith (Ms.) Contributor address; City; S Amarillo, TX 79119	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$350.00
	Principal occu Chief Financ	pation / Job title (See Instructions ial Officer	s)	Employer (See Instructions BSA Health System	s)		
	Date 01/21/2025	Full name of contributor O'Brien, Timothy (Mr.) Contributor address; City; S Montclair, NJ 07042	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	6)	Employer (See Instructions	s)		
	Chief Execut	tive Officer		Hackensack Meridian M	/loun	tainside	

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 9/12	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Goverr	ment Fund			00084320	
4	Date 01/24/2025	5 Full name of contributor Petrovich, Stephen (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
0	Principal occu	Brentwood, TN 37027 pation / Job title (See Instructions)		Employer (See Instructions			
O	Chief Legal (, s	AHS Management Com		ny Inc	
				And Management Com	Ιμαι		
	Date 01/25/2025	Full name of contributor Pettes, Serena (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$360.00
		Rio Rancho, NM 87144					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Vice Preside	nt - Consumer Experience		AHS Management Com	ıpaı	ny, Inc.	
	Date 01/21/2025	Full name of contributor Ramsey, Christina (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$350.00
		Tyler, TX 75703					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Chief Financ			UT Health Jacksonville	٠,		
	Date	Full name of contributor	out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
	01/24/2025	Schell, Jonathan (Mr.) Contributor address; City; Sta Tulsa, OK 74132				Amount of Continuation (4)	\$800.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions			
	Chief Execut	tive Officer		Hillcrest Hospital Cushir	ng		
	Date 01/24/2025	Full name of contributor Schultz, David (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Brentwood, TN 37027					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	President - F	lospital Operations		AHS Management Com	ıpaı	ny, Inc.	

	MONEI	ARY POLITICAL C	CONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 10/12	
2	FILER NAME	cy Holdings LLC Good Goverr	nment Fund		3	Filer ID (Ethics Commission 00084320	n Filers)
4	Date 01/21/2025	Full name of contributor Secor, April (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$350.00
		Henryetta, OK 74437					
8	Chief Nursin			Employer (See Instructions Hillcrest Hospital Henrye			
	Date 01/21/2025	Full name of contributor Slaten, Jeff (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$360.00
	Dringing agg	Tulsa, OK 74133	, T	Employer (See Instructions	·/-		
	Chief Financ	pation / Job title (See Instructions))	Employer (See Instructions Hillcrest Hospital Cushir			
	Date 01/23/2025	Full name of contributor Smith, John (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
		Chandler, TX 75758					
	Principal occu Chief Execu	pation / Job title (See Instructions) tive Officer		Employer (See Instructions UT Health East Texas E		S/Air One	
	Date 01/21/2025	Full name of contributor Smith, Reed (Mr.) Contributor address; City; State of the contributor address of the contributor addres				Amount of Contribution (\$)	\$350.00
	Principal occu Chief Consu	pation / Job title (See Instructions)		Employer (See Instructions AHS Management Com		ny, Inc.	
	Date 01/24/2025	Full name of contributor Sneed, Guy (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
	Principal occu Chief Medica	pation / Job title (See Instructions)		Employer (See Instructions Hillcrest HealthCare Sys		n	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/8 Rpt: 11/12	
2	FILER NAME Ardent Lega	acy Holdings LLC Good Government Fund		3	Filer ID (Ethics Commission 00084320	on Filers)
4	Date 01/22/2025	5 Full name of contributor out-of-state PAC (ID#:_ Stutzman, Ben (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$351.00
8	Principal occu	Pryor, OK 74361 upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
ľ	Chief Nursin		Hillcrest Hospital Pryor	٥,		
	Date 01/21/2025	Full name of contributor out-of-state PAC (ID#:_ Todd, Beth (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$350.00
		Jenks, OK 74037				
	Principal occu Chief Opera	upation / Job title (See Instructions) ting Officer	Employer (See Instructions Oklahoma Physicians/L		a Park Clinic	
	Date 01/21/2025	Full name of contributor out-of-state PAC (ID#:_ Whitton, Jeff (Mr.) Contributor address; City; State; Zip Code Marietta, GA 30064)		Amount of Contribution (\$)	\$100.00
	•	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Vice Preside	ent - Physician Services	UK Physician - Topeka			

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 12/12 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Ardent Legacy Holdings LLC Good Government Fund 00084320 5 Name of person from whom amount is received 8 Amount (\$) 12/31/2024 Bank of America, N.A. \$1,218.87 6 Address of person from whom amount is received; City; State; Zip Code Atlanta, GA 30308 Purpose for which amount is received Check if political contribution returned to filer Interest