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** 03/05/2025 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 X March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 01/26/2025 02/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME				Filer ID	(Ethics Commission Filers)
Ardent Legacy Holdir	ngs LLC Good Governme	nt Fund		00084320	
L4 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			
	2 Managuras	A. Supported			
	Measures (Describe by date and location of election and nature of issue.)	л. Зирропеи			
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTION OR GUARANTEES OF LOAN ADE ELECTRONICALLY) qualifies for the higher itemization	S, OR	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARAN	TEES OF LOANS)	\$	49,982.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURE	S	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (CONTRIBUTIONS MAINTAINI G PERIOD	ED AS OF THE LAST DA	Y \$	395,585.78
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANI REPORTING PERIOD	DING LOANS AS OF THE	\$	0.00
6 AFFIDAVIT				<u> </u>	
		I swear, or affire true and correc under Title 15,	m, under penalty of perjur t and includes all informat Election Code.	y, that the a	accompanying report is d to be reported by me
			Mrs. Ashley M	. Crabtree	
			Signature of Campa		
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ned hefore me, by the said		this	the	day
		which, witness my hand and s			uuy
		,			
Signature of officer	administering oath	Printed name of officer admin	istering oath	Title of office	cer administering oath
Signature of officer	out			51 01110	

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				OVER OTIEET	3 of 25
		EE NAME gacy Holdings LLC Good Government Fund	18 Filer ID 00084320	(Ethics Commission	n Filers)
19 SC	HEDULI	E SUBTOTALS SCHEDULE		SUBTOTAL A	MOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	49,982.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		DR	\$		
5.		\$			
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	<u> </u>	\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
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 CONTRIBUTI	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	\$	1,199.53
				•	

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 1/21 Rpt: 4/25	
2	FILER NAME Ardent Lega	cy Holdings LLC Good Govern	ment Fund		3	Filer ID (Ethics Commission 00084320	on Filers)
4	Date 02/04/2025	5 Full name of contributor Abreu, John (Mr.) 6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$350.00
		Pocatello, ID 83204					
8	Principal occu Chief Financ	pation / Job title (See Instructions) cial Officer Full name of contributor		Employer (See Instructions Portneuf Medical Center		Amount of Contribution (\$)	
	01/27/2025	Allusson, Valerie (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$400.00
	Dringing aggr	Montclair, NJ 07043		Employer (See Instructions	<u></u>		
	Principal occupation / Job title (See Instructions) Chief Medical Officer			Employer (See Instructions Hackensack Meridian M		ntainside	
	Date 02/17/2025	Full name of contributor Aragon, Sherry (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$375.00
		Albuquerque, NM 87111					
	Principal occu Chief Opera	pation / Job title (See Instructions) ting Officer		Employer (See Instructions Lovelace Health System			
	Date O2/11/2025 Armijo, Mary (Ms.) Contributor address; City; State; Zip Code Albuquerque, NM 87120		out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$350.00
	Principal occu Chief Operat	pation / Job title (See Instructions) ting Officer		Employer (See Instructions Lovelace Medical Cente			
	Date 02/04/2025	Full name of contributor Baker, Donald (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu Regional Pre	pation / Job title (See Instructions) esident		Employer (See Instructions Lonestar Division (BSA		alth/UT Health)	

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/21 Rpt: 5/25	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund			00084320	
4	Date 02/12/2025	5 Full name of contributor Baldridge, Dava (Ms.)	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
		6 Contributor address; City; Si Claremore, OK 74017	ate; Zip Code				
8	Principal occu	I pation / Job title (See Instructions	9	Employer (See Instructions	<u>L</u> S)		
	Chief Nursin		,	Hillcrest Hospital Claren		e	
_				· ·····oroct · · · oop · · · · · · · · · · · · · · ·	Т		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	#400 00
	01/28/2025	Barlow, Carol (Ms.)					\$400.00
		Contributor address; City; Si	ate; Zip Code				
		Tulsa, OK 74152					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Financ	ial Officer		Bailey Medical Center			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/31/2025	Batchelor, Teresa (Ms.)	_				\$400.00
		Contributor address; City; Si	ate; Zip Code		1		
		, ,,					
		Athens, TX 75751					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Financ	ial Officer		UT Health Athens			
_	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	02/06/2025	Bell, Michael (Mr.)	out of state 1710 (1511	,		γ πιιοαιτίοι συπτισατίοι (ψ)	\$750.00
	02/00/2020	Contributor address; City; Si	nato: Zin Codo		ł		Ψ100.00
		Contributor address, City, Si	ale, Zip Code				
		Montvale, NJ 07645					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u> S)		
	Chief Execut		,	Hackensack Meridian M		ntainside	
_	Date	Full name of contributor	D out of state DAC (ID#)		Г	Amount of Contribution (\$)	
	02/11/2025	Bisignani, Tom (Mr.)	out-of-state PAC (ID#:)		Amount of Continuation (\$)	\$500.00
	02/11/2025		. 7 0 1		-		Ψ300.00
		Contributor address; City; Si	ate; Zip Code				
		Olyphant, PA 18447					
	Dringing age:	pation / Job title (See Instructions	<u>, </u>	Employer (See Instructions	,, 		
	Chief Financ			Employer (See Instructions Hackensack Meridian M		ntaineida	
_	Ciliei Filialic			i iackerisack ivieriuidii ivi	iou	TRAITISIUE	

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS	SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1 Total pages Schedule A1: Sch: 3/21 Rpt: 6/25	
2	FILER NAME	ov Holdings III C Cood Cover	nment Fund		3 Filer ID (Ethics Commission	r Filers)
		cy Holdings LLC Good Gover			00084320	
4	Date 01/27/2025	5 Full name of contributor Blanton, James (Mr.)6 Contributor address; City; Si	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	\$375.00
		Bullard, TX 75757				
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)	
	Chief Financ	ial Officer		UT Health East Texas E	EMS/Air1	
	Date 01/27/2025	Full name of contributor Blasing, Amy (Ms.) Contributor address; City; Si	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$400.00
		Albuquerque, NM 87114				
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions		
	Chief Execut	tive Officer		Lovelace Womens Hosp	pital	
	Date 02/12/2025	Full name of contributor Bowman, Lecia (Ms.) Contributor address; City; Si	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$351.00
		Bullard, TX 75757				
	Principal occu	nation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>	
				UT Health Tyler	,	
	Chief Nursing Officer Date Full name of contributor on		out-of-state PAC (ID#:		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)	
	Vice Preside	nt - Hospital Operations		AHS Management Com	pany, Inc.	
	Date 02/11/2025	Full name of contributor Bush, Jon (Dr.) Contributor address; City; Si Amarillo, TX 79124	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)	
	Chief Medica	al Officer		BSA Health System		

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/21 Rpt: 7/25	
2	FILER NAME Ardent Lega	cy Holdings LLC Good Gover	nment Fund		3	Filer ID (Ethics Commission 00084320	n Filers)
4	Date 02/17/2025	5 Full name of contributor Byers, David (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
Ω	Principal occu	Nashville, TN 37215 pation / Job title (See Instructions)	Employer (See Instructions	e)		
0		Accounting Officer	,	AHS Management Com		ny, Inc.	
	Date 02/03/2025	Full name of contributor Campbell, Scott (Mr.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
		Topeka, KS 66604	1				
		pation / Job title (See Instructions)	Employer (See Instructions UK Health System - St.		incie	
	Chief Executive Officer			OK Heditii Systeiii - St.	ГІС		
	Date 02/19/2025	Full name of contributor Carter, Nathan (Mr.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$750.00
		Pocatello, ID 83201					
	Principal occu Chief Execut	pation / Job title (See Instructions tive Officer)	Employer (See Instructions Portneuf Medical Center	•		
	Date 01/28/2025	Full name of contributor Cayo, Guy (Mr.) Contributor address; City; St Daingerfield, TX 75638	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$750.00
	Principal occu Chief Execut	pation / Job title (See Instructions tive Officer)	Employer (See Instructions UT Health Pittsburg	s)		
	Date 02/11/2025	Full name of contributor Chastain, Krissy (Ms.) Contributor address; City; St Mt. Enterprise, TX 75681	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$375.00
	Principal occu Chief Nursin	pation / Job title (See Instructions g Officer)	Employer (See Instructions UT Health Henderson	s)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 5/21 Rpt: 8/25	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Goveri			L	00084320	
4	Date 02/18/2025	5 Full name of contributor Chernin, Ethan (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$1,250.00
		Tampa, FL 33629					
8	Principal occu	pation / Job title (See Instructions	s) [9	Employer (See Instructions	 S)		
		lealth Services	,	AHS Management Com		ny, Inc.	
	Date 02/06/2025	Full name of contributor Christensen, Glen (Mr.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$400.00
		Tyler, TX 75703					
		pation / Job title (See Instructions	(1)	Employer (See Instructions	s)		
Chief Financial Officer		UT Health Tyler					
	Date 01/28/2025	Full name of contributor Clark, James (Mr.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Tyler, TX 75703					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Chief Operat	ting Officer		UT Health Tyler			
			out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
	Principal occu Chief Nursin	pation / Job title (See Instructions g Officer)	Employer (See Instructions Hillcrest Hospital South			
	Date 02/11/2025	Full name of contributor Collins, Charles (Mr.) Contributor address; City; St Nashville, TN 37203	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Vice Preside	nt - Supply Chain		AHS Management Com	ıpar	ny, Inc.	

	MONEI	ARY POLITICAL (CONTRIBUTION	N	S		SCHEDUL	_E A1
	The Instru	ction Guide explains how	to complete this fo	rm	1.	1	Total pages Schedule A1: Sch: 6/21 Rpt: 9/25	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Goveri	nment Fund				00084320	
4	Date 02/05/2025	5 Full name of contributor Crabtree, Ashley (Ms.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$500.00
		Nashville, TN 37215						
8		pation / Job title (See Instructions)		Employer (See Instructions			
	SVP & Treas	surer			AHS Management Com	pa	ny, Inc.	
	Date 02/11/2025	Full name of contributor Cromeens, Julie (Ms.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code				Amount of Contribution (\$)	\$200.00
		Tyler, TX 75701						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Assistant Vio	ce President - Consumer			AHS Management Com	pa	ny, Inc.	
	Date 02/11/2025	Full name of contributor Cromeens, Julie (Ms.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$150.00
		Tyler, TX 75701						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Assistant Vic	ce President - Consumer			AHS Management Com	pa	ny, Inc.	
			out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Chief Execut	pation / Job title (See Instructions tive Officer)		Employer (See Instructions BSA Health System	5)		
	Date 02/07/2025	Full name of contributor Daniels, Buddy (Mr.) Contributor address; City; St Athens, TX 75752	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Chief Execut				UT Health Athens			
			•					

	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: 7/21 Rpt: 10/25	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund		L	00084320	
4	Date 01/29/2025	5 Full name of contributorDeSchryver, Joseph (Mr.)6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$1,000.00
•	Dringing goog	Brentwood, TN 37027	.) le	Employer (See Instruction			
8	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions Americas Region	5)		
	Date 01/27/2025	Full name of contributor DeVitto, Lorann (Ms.) Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$355.00
	Deinsinal assu	Hillsdale, NJ 07642		Franks var (Caa kastu stians	<u></u>		
	Principal occupation / Job title (See Instructions) Assistant Vice President			Employer (See Instructions Hackensack Meridian M		ntainside	
				, Tackensack Mendian M	T	Amount of Contribution (\$)	
	02/10/2025	Dietze, Zach (Mr.) Contributor address; City; S	out-of-state PAC (ID#:			Amount of Continuation (4)	\$750.00
		Tyler, TX 75703					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>L</u> S)		
	Chief Execut	tive Officer		UT Health Tyler			
	Date 02/11/2025	Full name of contributor Dixon, Leah (Ms.) Contributor address; City; S Palestine, TX 75803	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Chief Operat	ting Officer		UT Health East Texas F	Phy	sicians	
	Date 01/27/2025	Full name of contributor Eaton, Eric (Mr.) Contributor address; City; S Owasso, OK 74055	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$750.00
		pation / Job title (See Instructions	6)	Employer (See Instructions	s)		
	Chief Execut	tive Officer		Hillcrest Hospital Henry	etta	1	
							

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/21 Rpt: 11/25	
2	FILER NAME	ov Holdings I.I.C. Cood Cover	amont Fund		3	Filer ID (Ethics Commission 00084320	on Filers)
_		cy Holdings LLC Good Gover			L		
4	Date 02/11/2025	5 Full name of contributorElrod, Ben (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$350.00
		Nashville, TN 37205					
8	Principal occu	pation / Job title (See Instructions	9	9 Employer (See Instructions	s)		
	Vice Preside	nt - Human Resources		AHS Management Com	ıpaı	ıy, Inc.	
	Date 02/19/2025	Full name of contributor Gardenhire, Anika (Ms.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Brentwood, TN 37027					
		pation / Job title (See Instructions	5)	Employer (See Instructions			
	Chief Digital Information Officer		AHS Management Com	ıpaı	ny, Inc.		
	Date 02/12/2025	Full name of contributor Gatlin, Lance (Mr.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
		Amarillo, TX 79124					
		pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Senior Vice	President		BSA Physicians Group			
	Date Full name of contributor out-of-st 02/05/2025 Greenwood, Sam (Mr.) Contributor address; City; State; Zip Cod Sand Springs, OK 74063		out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$360.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Chief Financ	ial Officer		Tulsa Spine and Specia	lty	Hospital	
	Date 01/31/2025	Full name of contributor Greer, Troy (Mr.) Contributor address; City; St Corrales, NM 87048	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Execut	tive Officer		Lovelace Health System	า		

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 9/21 Rpt: 12/25	
2	FILER NAME	cy Holdings LLC Good Gover	nment Fund		3	Filer ID (Ethics Commission 00084320	n Filers)
4	Date	5 Full name of contributor			7	Amount of Contribution (\$)	
+	02/18/2025	Hackney, Ernest (Mr.)	out-of-state PAC (ID#:)	ľ	Amount of Contribution (\$)	\$355.00
		6 Contributor address; City; S	tate; Zip Code				
		Tyler, TX 75701					
8		pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
	Assistant VP	- Operations Support		UT Health East Texas			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/19/2025	Haithcoat, Rachel (Ms.)					\$350.00
		Contributor address; City; S	tate; Zip Code		1		
		Nashville, TN 37215					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Vice Preside	nt - Development		AHS Management Com	pa	ny, Inc.	
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	01/27/2025	Haley, DeLeigh (Ms.)	_				\$357.00
		Contributor address; City; S	tate; Zip Code		l		
		Rusk, TX 75785					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Chief Execut	tive Officer		UT Health Jacksonville			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/03/2025	Hamlet, Nathan (Mr.)	_				\$350.00
		Contributor address; City; S	tate; Zip Code		l		
			•				
		Franklin, TN 37064					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	CFO - Healtl	n Services		AHS Management Com	pa	ny, Inc.	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/26/2025	Hardin, Joanne (Ms.)	_				\$350.00
		Contributor address; City; S	tate; Zip Code		1		
			. ,				
		Chapel Hill, TN 37034					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Chief Quality	/ Officer		AHS Management Com	pa	ny, Inc.	
			L				

MONET	ARY POLITICAL C	ONTRIBUTIO	JNS		SCHEDUI	LE A1
The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/21 Rpt: 13/25	
FILER NAME Ardent Lega	cy Holdings LLC Good Goveri	nment Fund		3	Filer ID (Ethics Commission 00084320	on Filers)
Date 02/18/2025	5 Full name of contributor Harris, Glenda (Ms.)6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$350.00
	Amarillo, TX 79114					
	pation / Job title (See Instructions ief Nursing Officer	5)	9 Employer (See Instructions BSA Health System	s)		
Date 02/19/2025	Full name of contributor Haun, Richard (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$350.00
Principal occu	Tavernier, FL 33070 pation / Job title (See Instructions	;)	Employer (See Instructions	<u> </u> s)		
	ial Officer - Operations	,	AHS Management Com		ny, Inc.	
Date 02/11/2025	Full name of contributor Hill, G. Todd (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	Flint, TX 75762					
Principal occu Chief Execut	pation / Job title (See Instructions tive Officer	s)	Employer (See Instructions UT Health East Texas F		sicians	
Date 02/11/2025	Full name of contributor Holley, Brenda (Ms.) Contributor address; City; St Albuquerque, NM 87122)		Amount of Contribution (\$)	\$350.00
Principal occu Chief Nursin	pation / Job title (See Instructions	s)	Employer (See Instructions Lovelace Womens Hos		ıl	
Date 02/11/2025	Full name of contributor Holt, Rebecca (Ms.) Contributor address; City; St Thompsons Station, TN 3				Amount of Contribution (\$)	\$350.00
•	pation / Job title (See Instructions	s)	Employer (See Instructions		ar Inc	
 Vice Preside	ent - Supply Chain		AHS Management Com	ıpa	ny, Inc.	

	WONET	ARY POLITICAL CO	JNTRIBUTIO	INO	SCHEDUL	E A1
	The Instru	ction Guide explains how t	o complete this fo	orm.	1 Total pages Schedule A1: Sch: 11/21 Rpt: 14/25	
2	FILER NAME Ardent Lega	cy Holdings LLC Good Governn	nent Fund		3 Filer ID (Ethics Commissio 00084320	n Filers)
4	Date 02/18/2025	5 Full name of contributor Hoyt, Brad (Dr.)6 Contributor address; City; State			7 Amount of Contribution (\$)	\$500.00
_	Diania da ance	Tulsa, OK 74135	1	O. Farallara (Carallarata atian		
8		pation / Job title (See Instructions) al Information Officer		9 Employer (See Instructions AHS Management Com		
	Date 01/29/2025	Full name of contributor Huffman, Todd (Mr.) Contributor address; City; State	out-of-state PAC (ID#:_		Amount of Contribution (\$)	\$355.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 	
	Chief Financial Officer			Hackensack Meridian M		
	Date 01/27/2025	Full name of contributor Hurley, Rebecca (Ms.) Contributor address; City; State Dallas, TX 75209			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 	
	Chief Develo	ppment Counsel		AHS Management Com	pany, Inc.	
	Date 01/30/2025	Full name of contributor Hutchison, Meghann (Ms.) Contributor address; City; State Edgewood, NM 87015	out-of-state PAC (ID#:_ e; Zip Code)	Amount of Contribution (\$)	\$375.00
	Principal occu Chief Financ	pation / Job title (See Instructions) ial Officer		Employer (See Instructions Lovelace Womens Hosp	bital/Lovelace Health System	
	Date 01/28/2025	Full name of contributor Johannsen, Rachel (Ms.) Contributor address; City; State Albuquerque, NM 87109	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$375.00
	•	pation / Job title (See Instructions) ce President - Innovation		Employer (See Instructions AHS Management Com		
	. Soldant VIC	. rodani mnovatom			Po	

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 12/21 Rpt: 15/25	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Ardent Lega	cy Holdings LLC Good Gover				00084320	
4	Date 02/05/2025	5 Full name of contributorJones, Jason (Mr.)6 Contributor address; City; Si	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$750.00
		Claremore, OK 74017					
8	Principal occu	pation / Job title (See Instructions	s) 9	Employer (See Instructions	<u>-</u> -		
	Chief Execut	tive Officer		Hillcrest Hospital Claren	nor	e	
	Date 02/09/2025	Full name of contributor Kendall, Abigail (Ms.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
		Albuquerque, NM 87122					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Chief Nursing Officer			Lovelace Medical Cente	er		
	Date 02/17/2025	Full name of contributor Kirkham, Rebecca (Ms.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$750.00
		Nashville, TN 37212					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u>		
	SVP - Comm	•	, 	AHS Management Company, Inc.			
Date 02/12/2025		Full name of contributor Knox, Vicki (Ms.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
		Goshen, AL 36035					
	Principal occu Vice Preside	pation / Job title (See Instructions ent - Quality	5)	Employer (See Instructions AHS Management Com			
	Date 02/19/2025	Full name of contributor Kroplin, J. Matthew (Mr.)	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$351.00
		Contributor address; City; St Nashville, TN 37221	ate; ZIP Code				
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Vice Preside	nt - Legal		AHS Management Com	pa	ny, Inc.	

	MONEI	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 13/21 Rpt: 16/25	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Ardent Lega	cy Holdings LLC Good Goveri	nment Fund			00084320	
4	Date 02/15/2025	5 Full name of contributor Lamanteer, Michael (Dr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$400.00
		Tyler, TX 75709					
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions	5)		
	Chief Medica	al Officer		UT Health East Texas			
	Date 01/29/2025	Full name of contributor Lasson, Scott (Mr.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$750.00
		Owasso, OK 74055	1				
	Principal occupation / Job title (See Instructions)			Employer (See Instructions	5)		
	Chief Executive Officer			Bailey Medical Center			
	Date 02/10/2025	Full name of contributor Latibeaudiere, Jorge (Mr.) Contributor address; City; St)		Amount of Contribution (\$)	\$350.00
		Tyler, TX 75703					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chief Financ	ial Officer		UT Health Henderson			
	Date 02/17/2025	Full name of contributor LePera, Marianne (Ms.) Contributor address; City; St Ft. Myers, FL 33908	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Vice Preside	nt - Legal		AHS Management Com	pa	ny, Inc.	
	Date 01/27/2025	Full name of contributor Light, Rebecca (Ms.) Contributor address; City; St Hopatcong, NJ 07843	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Chief Nursin			Hackensack Meridian M		ntainside	
			1				

2 FILER NAME Ardent Legacy 4 Date 02/10/2025	tion Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1:	
Ardent Legacy 4 Date 5 02/10/2025		ne Instruction Guide explains how to complete this form.				
02/10/2025	gacy Holdings LLC Good Government Fund 5 Full name of contributor ut-of-state PAC (ID#:)			3	Filer ID (Ethics Commission 00084320	on Filers)
	Full name of contributorLimon, Sara (Ms.)Contributor address; City; St)	7	Amount of Contribution (\$)	\$400.00
	Albuquerque, NM 87122					
8 Principal occupa	ation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Vice Presiden	t - Human Resources		Lovelace Health System	า		
Date 02/11/2025 	Full name of contributor Lin, George (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$350.00
	Emerson, NJ 07630					
	ation / Job title (See Instructions)	Employer (See Instructions			
Chief Medical Officer			Hackensack Meridian P	as	cack Valley	
Date 01/28/2025 	Full name of contributor Lumsdaine, Alfred (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Brentwood, TN 37027	,		Ĺ		
Chief Financia	ation / Job title (See Instructions al Officer)	Employer (See Instructions AHS Management Com		nv. Inc.	
Date 01/31/2025	Full name of contributor Mann , Sandra (Ms.))		Amount of Contribution (\$)	\$350.00
Principal occupa	ation / Job title (See Instructions nt - Legal)	Employer (See Instructions AHS Management Com	-	ny, Inc.	
Date 02/11/2025 	Full name of contributor Martin, Edward (Dr.) Contributor address; City; St Tulsa, OK 74136	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions	5)		
Chief Medical	Officer		Oklahoma Heart Institut	е		

	MONEI	ARY POLITICAL (SCHEDULE A1			
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 15/21 Rpt: 18/25	
2	FILER NAME				3	•	n Filers)
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund			00084320	
4	Date 02/19/2025	5 Full name of contributor Martinez, Albert (Mr.)6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
		Wyckoff, NJ 07481					
8		pation / Job title (See Instructions	5)	9 Employer (See Instructions			
	Firefighter			North Hudson Fire Dep	artr	nent ————————	
	Date 02/19/2025	Full name of contributor Martinez, Francesca (Ms. Contributor address; City; S				Amount of Contribution (\$)	\$50.00
		Wyckoff, NJ 07481					
		pation / Job title (See Instructions	S)	Employer (See Instructions		analy Vallay	
	Chief Nursin	g Officer		Hackensack Meridian P	aso	соск valley	
	Date Full name of contributor out-of-state PAC (ID#: 02/17/2025 May, Stephen (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$400.00	
		Nashville, TN 37215					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>L</u> s)		
	Vice Preside		,	AHS Management Comp		ny, Inc.	
			Out-of-state PAC (ID#:		Ť	Amount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC 01/26/2025 Mayben, Casey (Ms.) Contributor address; City; State; Zip Code Pittsburg, TX 75686					y another contains and (4)	\$350.00
	Principal occu Chief Nursin	pation / Job title (See Instructions g Officer	5)	Employer (See Instructions UT Health Pittsburg	s)		
	Date 02/17/2025	Full name of contributor Mendoza, Joseph (Mr.) Contributor address; City; S Jenks, OK 74037	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$350.00
		pation / Job title (See Instruction:	5)	Employer (See Instructions	s)		
	Chief Financ	ial Officer		Hillcrest Medical Center	r		

	MONEI	ARY POLITICAL CONTRIB	UTION	15		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 16/21 Rpt: 19/25	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Ardent Lega	cy Holdings LLC Good Government Fund				00084320	
4	Date 02/05/2025	5 Full name of contributor out-of-state PA Mudd, Brandon (Mr.)	AC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Tulsa, OK 74137					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	Chief Execut	tive Officer		Utica Park Clinic and Ok	dal	noma Physicians Group	
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	02/05/2025	Olivier, S. Mathew (Mr.)					\$400.00
		Contributor address; City; State; Zip Code					
		, ,, , ,					
		Nashville, TN 37221					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Vice President - Physician Services			AHS Management Com	paı	ny, Inc.	
_	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	02/05/2025	Passmore, Roger (Dr.)	`	·		,	\$500.00
		Contributor address; City; State; Zip Code					
		Pocatello, ID 83205					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Chief Medica	al Officer		Portneuf Medical Center	r		
_	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	02/07/2025	Pippin, Shawna (Ms.)	`			`,	\$500.00
		Contributor address; City; State; Zip Code					
		Contributor address, City, State, 21p Code					
		Owasso, OK 74073					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Chief Nursin	g Officer		Bailey Medical Center			
_	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	02/07/2025	Reitmaier, Alice (Ms.)	TO (ID#			ranount of Continuation (4)	\$355.00
	02/01/2020	Contributor address; City; State; Zip Code					4000.00
		Contributor address, City, State, Zip Code					
		Nashville, TN 37204					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
		ent - Human Resources		AHS Management Com		ny, Inc.	
\vdash				<u> </u>		•	

	MONEI	ARY POLITICAL CO	SCHEDULE A1				
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 17/21 Rpt: 20/25	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Ardent Lega	cy Holdings LLC Good Governme	nt Fund			00084320	
4	Date 02/05/2025	 5 Full name of contributor Ridlen, Bob (Mr.) 6 Contributor address; City; State; 	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$375.00
		Downers Grove, IL 60515					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u>. </u>		
		nt - Development		AHS Management Com		ıy, Inc.	
	Date	—	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	02/05/2025	Rodriguez, Justin (Mr.) Contributor address; City; State;	Zip Code				\$350.00
		San Antonio, TX 78249					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Vice Preside	nt - Consumer Data & Technology	/	AHS Management Com	par	y, Inc.	
	Date 01/27/2025	Full name of contributor Rote, Katherine (Ms.)	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Contributor address; City; State;	Zip Code				
	Dringing conu	Nashville, TN 37210	<u> </u>	Employer (See Instructions			
		pation / Job title (See Instructions) nt - Accounting		AHS Management Com	•	y, Inc.	
	Date 01/30/2025	Full name of contributor Rummel, Jennifer (Ms.) Contributor address; City; State; Athens, TX 75752	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
	•	pation / Job title (See Instructions) nt - Humans Resources		Employer (See Instructions UT Health East Texas)		
	Date 02/10/2025	Full name of contributor Sandoval, Vesta (Dr.) Contributor address; City; State; Corrales, NM 87048	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
	Principal occu	pation / Job title (See Instructions)	1	Employer (See Instructions	<u> </u>		
	Chief Medica			Lovelace Health System			

	MONEI	ARY POLITICAL (SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this fo	orm.	1 Total pages Schedule A1: Sch: 18/21 Rpt: 21/25	
2	FILER NAME				3 Filer ID (Ethics Commission	n Filers)
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund		00084320	
4	Date 01/31/2025	5 Full name of contributor Schneider, Carolyn (Ms.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	\$1,000.00
		Nashville, TN 37205				
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	ins)	
		Human Resources Officer		AHS Management Com		
	Date 02/10/2025	Full name of contributor Shacklett, Shawna (Ms.) Contributor address; City; St	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$351.00
		Mineola, TX 75773				
		pation / Job title (See Instructions	s)	Employer (See Instructions	ins)	
	Chief Financial Officer			UT Health Quitman		
	Date Full name of contributor out-of-state PAC (ID#:) 02/05/2025 Shirilla, Nicholas (Mr.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$500.00
		Roswell, NM 88201				
		pation / Job title (See Instructions	5)	Employer (See Instructions		
	Chief Execut	tive Officer		Lovelace Regional Hosp	ospital	
	Date Full name of contributor out-of-state PAC (ID#: 02/05/2025 Smith, Jared (Mr.) Contributor address; City; State; Zip Code Mineola, TX 75773			Amount of Contribution (\$)	\$351.00	
	Principal occu Chief Execut	pation / Job title (See Instructions	5)	Employer (See Instructions UT Health Henderson/C		
	Date 02/07/2025	Full name of contributor Snider, Kaitlin (Ms.) Contributor address; City; St Tulsa, OK 74105	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$375.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	ns)	
	Vice Preside	nt - Consumer Engagement		AHS Management Com	mpany, Inc.	

	MONEI	ARY POLITICAL CO	SCHEDULE A1				
	The Instruc	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 19/21 Rpt: 22/25	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Ardent Lega	cy Holdings LLC Good Governn	nent Fund			00084320	
4	Date 02/14/2025	5 Full name of contributor Sparks, Elizabeth (Ms.)6 Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$)	\$350.00
		Sapulpa, OK 74066					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Chief Nursin	g Officer		Tulsa Spine and Specia	lty	Hospital	
	Date 02/10/2025	Full name of contributor Takacs, Susan (Ms.) Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$150.00
		Topeka, KS 66604					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Chief Operat	ting Officer		UK Health System - St.	Fra	ncis	
	Date 02/03/2025	Full name of contributor Terry, Rob (Mr.) Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$350.00
		Mount Pleasant, TX 75455					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Chief Nursin	g Officer		UT Health Quitman			
	Date 02/19/2025	Full name of contributor Trosper, Greg (Mr.) Contributor address; City; Stat Shelley, ID 83274	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$350.00
	Principal occu Chief Nursin	pation / Job title (See Instructions) g Officer		Employer (See Instructions Portneuf Medical Center			
	Date 02/11/2025	Full name of contributor Uhde, Jessee (Mr.) Contributor address; City; Stat Nolensville, TN 37135	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Vice Preside	nt - Urgent Care		AHS Management Com	par	ny, Inc.	

	MONEI	ARY POLITICAL (SCHEDULE A				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/21 Rpt: 23/25	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		cy Holdings LLC Good Gover				00084320	
4	Date 02/18/2025	5 Full name of contributorVillarreal, Xavier (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$750.00
		Bixby, OK 74008					
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	<u> </u>		
	Chief Execut			Hillcrest Medical Center			
	Date 02/06/2025	Full name of contributor Vining, Missy (Ms.) Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$350.00
		Tulsa, OK 74133					
		pation / Job title (See Instructions	5)	Employer (See Instructions			
	Chief Financ	ial Officer		Hillcrest Hospital Claren	nor	e	
	Date Full name of contributor out-of-state PAC (ID#:) 02/12/2025 Vining, Missy (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00		
		Tulsa, OK 74133					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u></u>		
	Chief Financ	ial Officer		Hillcrest Hospital Claren	nor	e	
			out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
		pation / Job title (See Instructions ief Nursing Officer	5)	Employer (See Instructions Lovelace Medical Cente			
					· ·		
	Date 01/31/2025	Full name of contributor Wiley, George (Mr.) Contributor address; City; Si Gilbert, AZ 85296	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$400.00
		pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Chief Financ	ial Officer		Lovelace Medical Cente	r		

	MONEI	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains hov	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 21/21 Rpt: 24/25			
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)		
	Ardent Lega	cy Holdings LLC Good Gover	nment Fund		L	00084320			
4	Date 02/03/2025	5 Full name of contributor Williams, Sheryl (Dr.)6 Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code		7	Amount of Contribution (\$)	\$350.00		
		Amarillo, TX 79119							
8	Principal occu	pation / Job title (See Instructions	s)	9 Employer (See Instructions	5)				
	Vice Preside	nt - Quality		BSA Health System					
	Date 01/27/2025	Full name of contributor Wilson, Preshie (Ms.) Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00		
		Bristow, OK 74010							
		pation / Job title (See Instructions	5)	Employer (See Instructions	s)				
	Chief Financ	ial Officer		Hillcrest Hospital South					
	Date Full name of contributor out-of-state PAC (ID#:) 02/17/2025 Winnett, Doug (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$350.00				
		Springfield, TN 37172							
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)				
	Vice Preside	nt - Revenue and Analytics		AHS Management Com	pa	ny, Inc.			
	Date Full name of contributor out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$351.00			
	Principal occu Chief Nursin	pation / Job title (See Instructions g Officer	s)	Employer (See Instructions Hillcrest Medical Center					
	Date 01/27/2025	Full name of contributor Zbar, Denise (Ms.) Contributor address; City; S Franklin Lakes, NJ 07417			•	Amount of Contribution (\$)	\$355.00		
	•	pation / Job title (See Instructions	5)	Employer (See Instructions	5)				
	Vice Preside	nt - Physician Practices		MPV NJ MD Services					

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: 25/25 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 (\$) 01/31/2025 Bank of America, N.A. \$1,199.53 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