

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090581	2 Total pages filed: 120		
3 COMMITTEE NAME KCI Holdings Inc. Political Action Committee		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged			
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 936 Ridgebrook Rd Sparks, MD 21152					
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Christine			MI	
	NICKNAME LAST Koski	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 936 Ridgebrook Rd Sparks, MD 21152	APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 936 Ridgebrook Rd Sparks, MD 21152	APT / SUITE #;	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (410) 316-7800	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15	<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 07/01/2025	Month Day Year THROUGH	Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other	

GO TO PAGE 2

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME KCI Holdings Inc. Political Action Committee		13 FILER ID (Ethics Commission Filer) 00090581
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Matt Gray Montgomery County Commissioner Precinct 4 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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 50,006.55
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 46,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 234,940.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>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.</p> <p style="text-align: right;">Christine Koski _____ Signature of Campaign Treasurer</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE**

**FORM GPAC
ADDENDUM**

Page 3 of 120

12 COMMITTEE NAME KCI Holdings Inc. Political Action Committee		13 FILER ID (Ethics Commission Filers) 00090581
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Lesley Briones Harris County Commissioners Court, District 4 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.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Grady Prestage Fort Bend County Commissioners Court, Precinct 2 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.)		

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
4 of 120

17 COMMITTEE NAME KCI Holdings Inc. Political Action Committee	18 FILER ID (Ethics Commission Filers) 00090581
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 50,006.55	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 46,000.00	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/110 Rpt: 5/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/110 Rpt: 6/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/110 Rpt: 7/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beil, Nathan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Parkton, MD 21120-9452	
Principal occupation / Job title (See Instructions) Chairman of the Board		Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beil, Nathan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Parkton, MD 21120-9452	
Principal occupation / Job title (See Instructions) Chairman of the Board		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/110 Rpt: 8/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	7 Amount of Contribution (\$) \$38.50
	6 Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/110 Rpt: 9/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	7 Amount of Contribution (\$) \$38.50
	6 Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
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	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
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	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 6/110 Rpt: 10/120
2 FILER NAME KCI Holdings Inc. Political Action Committee				3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/31/2025	5 Full name of contributor Cheney, Seth	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$38.50	
	6 Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155			
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.		
Date 07/25/2025	Full name of contributor Cheney, Seth	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$38.50	
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155			
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 07/11/2025	Full name of contributor Cheney, Seth	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$38.50	
	Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155			
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 07/11/2025	Full name of contributor Crowell, Brian	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$58.00	
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046			
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 09/19/2025	Full name of contributor Crowell, Brian	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$58.00	
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046			
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/110 Rpt: 11/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian	7 Amount of Contribution (\$) \$58.00
	6 Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian	Amount of Contribution (\$) \$58.00
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian	Amount of Contribution (\$) \$58.00
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian	Amount of Contribution (\$) \$58.00
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian	Amount of Contribution (\$) \$58.00
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 8/110 Rpt: 12/120
2 FILER NAME KCI Holdings Inc. Political Action Committee				3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/22/2025	5 Full name of contributor Crowell, Brian	6 Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	7 Amount of Contribution (\$) \$58.00	
	8 Principal occupation / Job title (See Instructions) Regional Practice Leader			
9 Employer (See Instructions) KCI Technologies, Inc.	Date 12/26/2025	Full name of contributor Crowell, Brian	Amount of Contribution (\$) \$58.00	
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046			
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 10/31/2025	Full name of contributor Crowell, Brian	Amount of Contribution (\$) \$58.00		
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046			
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 10/17/2025	Full name of contributor Crowell, Brian	Amount of Contribution (\$) \$58.00		
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046			
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 12/12/2025	Full name of contributor Crowell, Brian	Amount of Contribution (\$) \$58.00		
	Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046			
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/110 Rpt: 13/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian	7 Amount of Contribution (\$) \$58.00
	6 Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Towson, MD 21286-7843	
Principal occupation / Job title (See Instructions) Service Line Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Towson, MD 21286-7843	
Principal occupation / Job title (See Instructions) Service Line Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Towson, MD 21286-7843	
Principal occupation / Job title (See Instructions) Service Line Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code Towson, MD 21286-7843	
Principal occupation / Job title (See Instructions) Service Line Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/110 Rpt: 14/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James 6 Contributor address; City; State; Zip Code Towson, MD 21286-7843	7 Amount of Contribution (\$) \$96.15
	8 Principal occupation / Job title (See Instructions) Service Line Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/110 Rpt: 15/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James 6 Contributor address; City; State; Zip Code Towson, MD 21286-7843	7 Amount of Contribution (\$) \$96.15
	8 Principal occupation / Job title (See Instructions) Service Line Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James Contributor address; City; State; Zip Code Towson, MD 21286-7843	Amount of Contribution (\$) \$96.15
	Principal occupation / Job title (See Instructions) Service Line Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/110 Rpt: 16/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
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	Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David	Amount of Contribution (\$) \$40.00
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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 14/110 Rpt: 18/120
2 FILER NAME KCI Holdings Inc. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David 6 Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	7 Amount of Contribution (\$) \$40.00	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.	
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	Amount of Contribution (\$) \$40.00	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	Amount of Contribution (\$) \$57.70	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	Amount of Contribution (\$) \$57.70	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	Amount of Contribution (\$) \$57.70	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam	7 Amount of Contribution (\$) \$57.70
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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 16/110 Rpt: 20/120
2 FILER NAME KCI Holdings Inc. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam 6 Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	7 Amount of Contribution (\$) \$57.70	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/110 Rpt: 21/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Westminster, MD 21158-1450	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Westminster, MD 21158-1450	
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	Contributor address; City; State; Zip Code Westminster, MD 21158-1450	
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	Amount of Contribution (\$) \$100.00
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	Amount of Contribution (\$) \$100.00
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/110 Rpt: 22/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	7 Amount of Contribution (\$) \$100.00
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	Contributor address; City; State; Zip Code Westminster, MD 21158-1450	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	Amount of Contribution (\$) \$100.00
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/110 Rpt: 23/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	7 Amount of Contribution (\$) \$100.00
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Westminster, MD 21158-1450	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Westminster, MD 21158-1450	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/110 Rpt: 24/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/110 Rpt: 25/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/110 Rpt: 26/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Dion	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Freeland, MD 21053-9624	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Dion	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Freeland, MD 21053-9624	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/110 Rpt: 27/120
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/110 Rpt: 28/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Dion	7 Amount of Contribution (\$) \$40.00
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Dion	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Freeland, MD 21053-9624	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Towson, MD 21204-4305	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/110 Rpt: 29/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	7 Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Towson, MD 21204-4305	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Towson, MD 21204-4305	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 26/110 Rpt: 30/120
2 FILER NAME KCI Holdings Inc. Political Action Committee				3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	7 Amount of Contribution (\$) \$38.46		
	6 Contributor address; City; State; Zip Code Towson, MD 21204-4305			
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.		
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46		
	Contributor address; City; State; Zip Code Towson, MD 21204-4305			
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46		
	Contributor address; City; State; Zip Code Towson, MD 21204-4305			
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46		
	Contributor address; City; State; Zip Code Towson, MD 21204-4305			
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46		
	Contributor address; City; State; Zip Code Towson, MD 21204-4305			
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/110 Rpt: 31/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Towson, MD 21204-4305	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Towson, MD 21204-4305	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Jay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Jay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Jay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 28/110 Rpt: 32/120
2 FILER NAME KCI Holdings Inc. Political Action Committee				3 Filer ID (Ethics Commission Filers) 00090581
4 Date 07/11/2025	5 Full name of contributor Huston, Jay	6 Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	7 Amount of Contribution (\$) \$10.00	
	8 Principal occupation / Job title (See Instructions) Practice Leader			
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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/110 Rpt: 33/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Jay 6 Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	7 Amount of Contribution (\$) \$10.00
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Jay Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	Amount of Contribution (\$) \$10.00
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	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
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	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/110 Rpt: 34/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janney, Diana	7 Amount of Contribution (\$) \$97.00
	6 Contributor address; City; State; Zip Code Sparks, MD 21152-8856	
8 Principal occupation / Job title (See Instructions) Director of Marketing 8		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janney, Diana	Amount of Contribution (\$) \$97.00
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MONETARY POLITICAL CONTRIBUTIONS

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/110 Rpt: 36/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janney, Diana	Amount of Contribution (\$) \$97.00
	Contributor address; City; State; Zip Code Sparks, MD 21152-8856	
Principal occupation / Job title (See Instructions) Director of Marketing 8		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Garner, NC 27529-8955	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Garner, NC 27529-8955	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 33/110 Rpt: 37/120
2 FILER NAME KCI Holdings Inc. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip 6 Contributor address; City; State; Zip Code Garner, NC 27529-8955	7 Amount of Contribution (\$) \$38.46	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46	
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46	
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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/110 Rpt: 38/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip 6 Contributor address; City; State; Zip Code Garner, NC 27529-8955	7 Amount of Contribution (\$) \$38.46
	8 Principal occupation / Job title (See Instructions) Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip Contributor address; City; State; Zip Code Garner, NC 27529-8955	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/110 Rpt: 39/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip 6 Contributor address; City; State; Zip Code Garner, NC 27529-8955	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/110 Rpt: 40/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/110 Rpt: 41/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael 6 Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian Contributor address; City; State; Zip Code Lexington, SC 29072-8845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/110 Rpt: 42/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian 6 Contributor address; City; State; Zip Code Lexington, SC 29072-8845	7 Amount of Contribution (\$) \$40.00
	8 Principal occupation / Job title (See Instructions) Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian Contributor address; City; State; Zip Code Lexington, SC 29072-8845	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian Contributor address; City; State; Zip Code Lexington, SC 29072-8845	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian Contributor address; City; State; Zip Code Lexington, SC 29072-8845	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
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	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/110 Rpt: 43/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian 6 Contributor address; City; State; Zip Code Lexington, SC 29072-8845	7 Amount of Contribution (\$) \$40.00
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	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/110 Rpt: 44/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian 6 Contributor address; City; State; Zip Code Lexington, SC 29072-8845	7 Amount of Contribution (\$) \$40.00
	8 Principal occupation / Job title (See Instructions) Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Brian Contributor address; City; State; Zip Code Lexington, SC 29072-8845	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter Contributor address; City; State; Zip Code York, PA 17402-8879	Amount of Contribution (\$) \$38.50
	Principal occupation / Job title (See Instructions) Controller 9	Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter Contributor address; City; State; Zip Code York, PA 17402-8879	Amount of Contribution (\$) \$38.50
	Principal occupation / Job title (See Instructions) Controller 9	Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter Contributor address; City; State; Zip Code York, PA 17402-8879	Amount of Contribution (\$) \$38.50
	Principal occupation / Job title (See Instructions) Controller 9	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/110 Rpt: 45/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	7 Amount of Contribution (\$) \$38.50
	6 Contributor address; City; State; Zip Code York, PA 17402-8879	
8 Principal occupation / Job title (See Instructions) Controller 9		9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/110 Rpt: 46/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	7 Amount of Contribution (\$) \$38.50
	6 Contributor address; City; State; Zip Code York, PA 17402-8879	
8 Principal occupation / Job title (See Instructions) Controller 9		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code York, PA 17402-8879	
Principal occupation / Job title (See Instructions) Controller 9		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/110 Rpt: 47/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin	7 Amount of Contribution (\$) \$38.50
	6 Contributor address; City; State; Zip Code Clemson, SC 29631-2217	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Clemson, SC 29631-2217	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Clemson, SC 29631-2217	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Clemson, SC 29631-2217	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Clemson, SC 29631-2217	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 44/110 Rpt: 48/120
2 FILER NAME KCI Holdings Inc. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin 6 Contributor address; City; State; Zip Code Clemson, SC 29631-2217	7 Amount of Contribution (\$) \$38.50	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin Contributor address; City; State; Zip Code Clemson, SC 29631-2217	Amount of Contribution (\$) \$38.50	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin Contributor address; City; State; Zip Code Clemson, SC 29631-2217	Amount of Contribution (\$) \$38.50	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin Contributor address; City; State; Zip Code Clemson, SC 29631-2217	Amount of Contribution (\$) \$38.50	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin Contributor address; City; State; Zip Code Clemson, SC 29631-2217	Amount of Contribution (\$) \$38.50	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			
2 FILER NAME KCI Holdings Inc. Political Action Committee			
4 Date 10/31/2025	5 Full name of contributor Knight, Kristin	6 Contributor address; City; State; Zip Code Clemson, SC 29631-2217	1 Total pages Schedule A1: Sch: 45/110 Rpt: 49/120
			3 Filer ID (Ethics Commission Filers) 00090581
			7 Amount of Contribution (\$) \$38.50
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.	
Date 08/08/2025	Full name of contributor Knight, Kristin	Contributor address; City; State; Zip Code Clemson, SC 29631-2217	Amount of Contribution (\$) \$38.50
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 11/14/2025	Full name of contributor Knight, Kristin	Contributor address; City; State; Zip Code Clemson, SC 29631-2217	Amount of Contribution (\$) \$38.50
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 08/08/2025	Full name of contributor Koski, Christine	Contributor address; City; State; Zip Code Parkton, MD 21120-9099	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.	
Date 07/11/2025	Full name of contributor Koski, Christine	Contributor address; City; State; Zip Code Parkton, MD 21120-9099	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/110 Rpt: 50/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Parkton, MD 21120-9099	
8 Principal occupation / Job title (See Instructions) Chief Financial Officer		9 Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Parkton, MD 21120-9099	
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Parkton, MD 21120-9099	
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Parkton, MD 21120-9099	
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Parkton, MD 21120-9099	
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/110 Rpt: 51/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine 6 Contributor address; City; State; Zip Code Parkton, MD 21120-9099	7 Amount of Contribution (\$) \$192.30
8 Principal occupation / Job title (See Instructions) Chief Financial Officer		9 Employer (See Instructions) KCI Technologies, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine Contributor address; City; State; Zip Code Parkton, MD 21120-9099	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine Contributor address; City; State; Zip Code Parkton, MD 21120-9099	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine Contributor address; City; State; Zip Code Parkton, MD 21120-9099	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine Contributor address; City; State; Zip Code Parkton, MD 21120-9099	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/110 Rpt: 52/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Parkton, MD 21120-9099	
8 Principal occupation / Job title (See Instructions) Chief Financial Officer		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/110 Rpt: 53/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian 6 Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	7 Amount of Contribution (\$) \$42.00
	8 Principal occupation / Job title (See Instructions) Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/110 Rpt: 54/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian 6 Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	7 Amount of Contribution (\$) \$42.00
	8 Principal occupation / Job title (See Instructions) Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian Contributor address; City; State; Zip Code Pittsburgh, PA 15237-8700	Amount of Contribution (\$) \$42.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/110 Rpt: 55/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan 6 Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	7 Amount of Contribution (\$) \$192.30
	8 Principal occupation / Job title (See Instructions) Sector President	9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/110 Rpt: 56/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
8 Principal occupation / Job title (See Instructions) Sector President		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
Principal occupation / Job title (See Instructions) Sector President		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
Principal occupation / Job title (See Instructions) Sector President		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
Principal occupation / Job title (See Instructions) Sector President		Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
Principal occupation / Job title (See Instructions) Sector President		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/110 Rpt: 57/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
8 Principal occupation / Job title (See Instructions) Sector President		9 Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Myakka City, FL 34251-8045	
Principal occupation / Job title (See Instructions) Sector President		Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Miami, FL 33129-2233	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Miami, FL 33129-2233	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Miami, FL 33129-2233	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/110 Rpt: 58/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime 6 Contributor address; City; State; Zip Code Miami, FL 33129-2233	7 Amount of Contribution (\$) \$75.00
	8 Principal occupation / Job title (See Instructions) Regional Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime Contributor address; City; State; Zip Code Miami, FL 33129-2233	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) Regional Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime Contributor address; City; State; Zip Code Miami, FL 33129-2233	Amount of Contribution (\$) \$75.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/110 Rpt: 59/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jaime 6 Contributor address; City; State; Zip Code Miami, FL 33129-2233	7 Amount of Contribution (\$) \$75.00
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4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyman, William	7 Amount of Contribution (\$) \$96.15
	6 Contributor address; City; State; Zip Code Abingdon, MD 21009-3040	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyman, William	Amount of Contribution (\$) \$96.15
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martz, Eric	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Carlisle, PA 17013-8802	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendinsky, Nichole Contributor address; City; State; Zip Code Bellefonte, PA 16823-8452	Amount of Contribution (\$) \$14.00
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mryncza, Gary Contributor address; City; State; Zip Code Fairview, TN 37062-8279	Amount of Contribution (\$) \$153.85	
Principal occupation / Job title (See Instructions) Sector President		Employer (See Instructions) KCI Technologies, Inc.	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mryncza, Gary Contributor address; City; State; Zip Code Fairview, TN 37062-8279	Amount of Contribution (\$) \$153.85	
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	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mryncza, Gary Contributor address; City; State; Zip Code Fairview, TN 37062-8279	Amount of Contribution (\$) \$153.85
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mryncza, Gary Contributor address; City; State; Zip Code Fairview, TN 37062-8279	Amount of Contribution (\$) \$153.85
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mryncza, Gary Contributor address; City; State; Zip Code Fairview, TN 37062-8279	Amount of Contribution (\$) \$153.85
	Principal occupation / Job title (See Instructions) Sector President	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/110 Rpt: 73/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert 6 Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	7 Amount of Contribution (\$) \$39.00
	8 Principal occupation / Job title (See Instructions) Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	Amount of Contribution (\$) \$39.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	Amount of Contribution (\$) \$39.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	Amount of Contribution (\$) \$39.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	Amount of Contribution (\$) \$39.00
	Principal occupation / Job title (See Instructions) Practice Leader	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/110 Rpt: 74/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	7 Amount of Contribution (\$) \$39.00
	6 Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	Amount of Contribution (\$) \$39.00
	Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	Amount of Contribution (\$) \$39.00
	Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	Amount of Contribution (\$) \$39.00
	Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	Amount of Contribution (\$) \$39.00
	Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/110 Rpt: 75/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	7 Amount of Contribution (\$) \$39.00
	6 Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	Amount of Contribution (\$) \$39.00
	Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Robert	Amount of Contribution (\$) \$39.00
	Contributor address; City; State; Zip Code Mechanicsburg, PA 17050-5280	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/110 Rpt: 76/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/110 Rpt: 77/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Nashville, TN 37209-4519	
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/110 Rpt: 78/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth 6 Contributor address; City; State; Zip Code Nashville, TN 37209-4519	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/110 Rpt: 79/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George 6 Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	7 Amount of Contribution (\$) \$192.30
	8 Principal occupation / Job title (See Instructions) Chief Marketing Officer	9 Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Chief Marketing Officer	Employer (See Instructions) KCI Technologies, Inc.
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	Principal occupation / Job title (See Instructions) Chief Marketing Officer	Employer (See Instructions) KCI Technologies, Inc.
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Chief Marketing Officer	Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Chief Marketing Officer	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 76/110 Rpt: 80/120
2 FILER NAME KCI Holdings Inc. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George	7 Amount of Contribution (\$) \$192.30	
	6 Contributor address; City; State; Zip Code Stevenson, MD 21153-2018		
8 Principal occupation / Job title (See Instructions) Chief Marketing Officer		9 Employer (See Instructions) KCI Technologies, Inc.	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Stevenson, MD 21153-2018		
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Stevenson, MD 21153-2018		
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Stevenson, MD 21153-2018		
Principal occupation / Job title (See Instructions) Chief Marketing Officer		Employer (See Instructions) KCI Technologies, Inc.	
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$38.47	
	Contributor address; City; State; Zip Code Odessa, FL 33556-2274		
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/110 Rpt: 81/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	7 Amount of Contribution (\$) \$38.47
	6 Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$38.47
	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$38.47
	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$38.47
	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$38.47
	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			
2 FILER NAME KCI Holdings Inc. Political Action Committee			
4 Date 07/11/2025	5 Full name of contributor Plennert, Donald	6 Contributor address; City; State; Zip Code Odessa, FL 33556-2274	1 Total pages Schedule A1: Sch: 78/110 Rpt: 82/120
			3 Filer ID (Ethics Commission Filers) 00090581
			7 Amount of Contribution (\$) \$38.47
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.	
Date 11/14/2025	Full name of contributor Plennert, Donald	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	Amount of Contribution (\$) \$38.47
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 10/03/2025	Full name of contributor Plennert, Donald	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	Amount of Contribution (\$) \$38.47
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 09/19/2025	Full name of contributor Plennert, Donald	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	Amount of Contribution (\$) \$38.47
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 10/17/2025	Full name of contributor Plennert, Donald	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	Amount of Contribution (\$) \$38.47
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/110 Rpt: 83/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	7 Amount of Contribution (\$) \$38.47
	6 Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
8 Principal occupation / Job title (See Instructions) Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald	Amount of Contribution (\$) \$38.47
	Contributor address; City; State; Zip Code Odessa, FL 33556-2274	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	
Principal occupation / Job title (See Instructions) Business Developer 8		Employer (See Instructions) KCI Technologies, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	
Principal occupation / Job title (See Instructions) Business Developer 8		Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	
Principal occupation / Job title (See Instructions) Business Developer 8		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/110 Rpt: 84/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley 6 Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	7 Amount of Contribution (\$) \$55.00
	8 Principal occupation / Job title (See Instructions) Business Developer 8	9 Employer (See Instructions) KCI Technologies, Inc.
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	Amount of Contribution (\$) \$55.00
	Principal occupation / Job title (See Instructions) Business Developer 8	Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	Amount of Contribution (\$) \$55.00
	Principal occupation / Job title (See Instructions) Business Developer 8	Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	Amount of Contribution (\$) \$55.00
	Principal occupation / Job title (See Instructions) Business Developer 8	Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	Amount of Contribution (\$) \$55.00
	Principal occupation / Job title (See Instructions) Business Developer 8	Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/110 Rpt: 85/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley	7 Amount of Contribution (\$) \$55.00
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	
Principal occupation / Job title (See Instructions) Business Developer 8		Employer (See Instructions) KCI Technologies, Inc.
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	
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Principal occupation / Job title (See Instructions) Business Developer 8		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/110 Rpt: 86/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickey, Adam	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Glenwood, MD 21738-9729	
8 Principal occupation / Job title (See Instructions) Service Line Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Eric	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Bradenton, FL 34212-6320	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Eric	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Bradenton, FL 34212-6320	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Eric	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Bradenton, FL 34212-6320	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirk, Brandon Contributor address; City; State; Zip Code Palmyra, PA 17078-8956	Amount of Contribution (\$) \$38.50
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	Contributor address; City; State; Zip Code Durham, NC 27705-3155	
Principal occupation / Job title (See Instructions) Service Line Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/110 Rpt: 101/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Adam	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Durham, NC 27705-3155	
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Adam	Amount of Contribution (\$) \$192.30
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Adam	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Durham, NC 27705-3155	
Principal occupation / Job title (See Instructions) Service Line Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tan, Yu	Amount of Contribution (\$) \$38.50
	Contributor address; City; State; Zip Code Annandale, VA 22003-2315	
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
Date 10/03/2025	Full name of contributor Truedson, Gustaf	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Mount Airy, MD 21771-7601		
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.	
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4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiedorfer, Mary 6 Contributor address; City; State; Zip Code Ocean City, MD 21842-4811	7 Amount of Contribution (\$) \$70.00
	8 Principal occupation / Job title (See Instructions) Regional Practice Leader	9 Employer (See Instructions) KCI Technologies, Inc.
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woerner, Stephen Contributor address; City; State; Zip Code Clarksville, MD 21029-1280	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Chief Strategy Officer	Employer (See Instructions) KCI Technologies, Inc.
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 115/120	2 FILER NAME KCI Holdings Inc. Political Action Committee	3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/29/2025	5 Payee name ACEC Georgia PAC	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 229 Peachtree Street Northeast Suite 1800, International Tower Atlanta, GA 30303-1617	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Trade Association PAC
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/27/2025	Payee name AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1400 L Street NW Suite 400 Washington, DC 20005-3592	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Trade Association PAC
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name American Council of Engineering Companies of Delaware	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 1858 Dover, DE 19903-1858	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 116/120	2 FILER NAME KCI Holdings Inc. Political Action Committee	3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/02/2025	5 Payee name American Council of Engineering Companies of SC PAC	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P. O. Box 11937 Columbia, SC 29211-1937	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Engineering Companies of Virginia Political Action Committee	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 8600 Maryland Drive Richmond, VA 23294-4702	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Trade Association PAC
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Florida Engineers Political Action Committee	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 527 East Park Avenue Tallahassee, FL 32301-2524	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 117/120	2 FILER NAME KCI Holdings Inc. Political Action Committee	3 Filer ID (Ethics Commission Filers) 00090581
4 Date 12/03/2025	5 Payee name Friends of Frank Ginn	
6 Amount (\$) \$1,000.00	7 Payee address; City; P O Box 1136 Danielsville, GA 30633-1136	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Friends of Mike Ertel	
Amount (\$) \$500.00	Payee address; City; P.O. Box 19046 Baltimore, MD 21284-9046	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name Grady Prestage Campaign	
Amount (\$) \$5,000.00	Payee address; City; P.O. Box 835 Missouri City, TX 77459-0835	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 118/120	2 FILER NAME KCI Holdings Inc. Political Action Committee	3 Filer ID (Ethics Commission Filers) 00090581
4 Date 09/25/2025	5 Payee name KCI Texas PAC	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 2806 W. Bitters Road Suite 218 San Antonio, TX 78248-2119	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transfer to Affiliated State Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Lamar Fisher Re-Election Campaign	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2112 E Atlantic Boulevard <input type="checkbox"/> Expenditure from corporate funds Pompano Beach, FL 33062-5208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name Lesley Briones Campaign	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code PO Box 56386 <input type="checkbox"/> Expenditure from corporate funds Houston, TX 77256-6386	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 119/120	2 FILER NAME KCI Holdings Inc. Political Action Committee	3 Filer ID (Ethics Commission Filers) 00090581
4 Date 10/06/2025	5 Payee name Matt Gray Campaign	
6 Amount (\$) \$5,000.00	7 Payee address; City; PO Box 1469 Porter, TX 77365-1469	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name Mikie Sherrill for Governor	
Amount (\$) \$1,000.00	Payee address; City; PO Box 43032 Montclair, NJ 07043-0032	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Streight for Cecil	
Amount (\$) \$1,000.00	Payee address; City; PO BOX 415 North East, MD 21901-0415	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 120/120	2 FILER NAME KCI Holdings Inc. Political Action Committee	3 Filer ID (Ethics Commission Filers) 00090581
4 Date 08/29/2025	5 Payee name Tennessee Professional Engineers PAC	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 800 Fort Negley Boulevard Nashville, TN 37203-4833	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Trade Association PAC
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name Virginia Transportation Construction Alliance Political Action Committee	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 620 Moorefield Park Drive Suite 120 North Chesterfield, VA 23236-3692	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held