

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 # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 936 Ridgebrook Rd Sparks, MD 21152		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Christine NICKNAME LAST SUFFIX Koski		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 936 Ridgebrook Rd Sparks, MD 21152		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 936 Ridgebrook Rd Sparks, MD 21152		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (410) 316-7800		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2025 THROUGH Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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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 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 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
	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> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <p>_____ Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath</p>		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME KCI Holdings Inc. Political Action Committee	13 Filer ID (Ethics Commission Filers) 00090581
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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.)	

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 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
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17 COMMITTEE NAME KCI Holdings Inc. Political Action Committee		18 Filer ID (Ethics Commission Filers) 00090581
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
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 <hr/> 6 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	7 Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	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#: _____) Ayres, Robert <hr/> Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	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: 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 6 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	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#: _____) Ayres, Robert Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	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#: _____) Ayres, Robert Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	Amount of Contribution (\$) \$100.00
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 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	Amount of Contribution (\$) \$100.00
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 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	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: 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 <hr/> 6 Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	7 Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Whiteford, MD 21160-1412	Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Parkton, MD 21120-9452	Amount of Contribution (\$) \$192.30
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 <hr/> Contributor address; City; State; Zip Code Parkton, MD 21120-9452	Amount of Contribution (\$) \$192.30
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 <hr/> 6 Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	7 Amount of Contribution (\$) \$38.50
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 <hr/> Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	Amount of Contribution (\$) \$38.50
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 <hr/> Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	Amount of Contribution (\$) \$38.50
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
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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
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Seth <hr/> 6 Contributor address; City; State; Zip Code Moon Twp, PA 15108-3155	7 Amount of Contribution (\$) \$38.50
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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#: _____) Crowell, Brian <hr/> Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	Amount of Contribution (\$) \$58.00
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#: _____) Crowell, Brian <hr/> Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	Amount of Contribution (\$) \$58.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian <hr/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian <hr/> Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	Amount of Contribution (\$) \$58.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowell, Brian <hr/> Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	Amount of Contribution (\$) \$58.00
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#: _____) Crowell, Brian <hr/> Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	Amount of Contribution (\$) \$58.00
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#: _____) Crowell, Brian <hr/> Contributor address; City; State; Zip Code Owings Mills, MD 21117-5046	Amount of Contribution (\$) \$58.00
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 <hr/> 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 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James <hr/> 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 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James <hr/> 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 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deriu, James <hr/> 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: 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David <hr/> 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 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David <hr/> 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 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David <hr/> 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: 13/110 Rpt: 17/120
2 FILER NAME KCI Holdings Inc. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00090581
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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#: _____) 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.
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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 <hr/> 6 Contributor address; City; State; Zip Code Rock Hill, SC 29730-7059	7 Amount of Contribution (\$) \$40.00
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberspeaker, David <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/110 Rpt: 19/120
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4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam <hr/> 6 Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	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 <hr/> 6 Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	7 Amount of Contribution (\$) \$57.70
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Adam <hr/> Contributor address; City; State; Zip Code Forest Hill, MD 21050-3028	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: 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 <hr/> 6 Contributor address; City; State; Zip Code Westminster, MD 21158-1450	7 Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Westminster, MD 21158-1450	Amount of Contribution (\$) \$100.00
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#: _____) Glover, Scott <hr/> Contributor address; City; State; Zip Code Westminster, MD 21158-1450	Amount of Contribution (\$) \$100.00
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#: _____) Glover, Scott <hr/> Contributor address; City; State; Zip Code Westminster, MD 21158-1450	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 <hr/> Contributor address; City; State; Zip Code Westminster, MD 21158-1450	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: 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 6 Contributor address; City; State; Zip Code Westminster, MD 21158-1450	7 Amount of Contribution (\$) \$100.00
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Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott Contributor address; City; State; Zip Code Westminster, MD 21158-1450	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#: _____) Glover, Scott Contributor address; City; State; Zip Code Westminster, MD 21158-1450	Amount of Contribution (\$) \$100.00
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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#: _____) Glover, Scott Contributor address; City; State; Zip Code Westminster, MD 21158-1450	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: 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 <hr/> 6 Contributor address; City; State; Zip Code Westminster, MD 21158-1450	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Construction
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Scott <hr/> Contributor address; City; State; Zip Code Westminster, MD 21158-1450	Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Westminster, MD 21158-1450	Amount of Contribution (\$) \$100.00
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#: _____) Hammel, Heidi <hr/> Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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 <hr/> Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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 6 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	7 Amount of Contribution (\$) \$75.00
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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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#: _____) Hammel, Heidi Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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 <hr/> 6 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Regional Practice Leader		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi <hr/> Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi <hr/> Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammel, Heidi <hr/> Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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#: _____) Hammel, Heidi <hr/> Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	Amount of Contribution (\$) \$75.00
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 6 Contributor address; City; State; Zip Code Severna Park, MD 21146-3521	7 Amount of Contribution (\$) \$75.00
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 Contributor address; City; State; Zip Code Freeland, MD 21053-9624	Amount of Contribution (\$) \$40.00
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 Contributor address; City; State; Zip Code Freeland, MD 21053-9624	Amount of Contribution (\$) \$40.00
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#: _____) Ho, Dion Contributor address; City; State; Zip Code Freeland, MD 21053-9624	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: 23/110 Rpt: 27/120
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#: _____) Ho, Dion <hr/> 6 Contributor address; City; State; Zip Code Freeland, MD 21053-9624	7 Amount of Contribution (\$) \$40.00
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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
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Dion <hr/> 6 Contributor address; City; State; Zip Code Freeland, MD 21053-9624	7 Amount of Contribution (\$) \$40.00
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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 <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	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: 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 <hr/> 6 Contributor address; City; State; Zip Code Towson, MD 21204-4305	7 Amount of Contribution (\$) \$38.46
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoehn, Richard <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	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: 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 <hr/> 6 Contributor address; City; State; Zip Code Towson, MD 21204-4305	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#: _____) Hoehn, Richard <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	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#: _____) Hoehn, Richard <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	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: 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 <hr/> 6 Contributor address; City; State; Zip Code Towson, MD 21204-4305	7 Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Towson, MD 21204-4305	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#: _____) Huston, Jay <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	Amount of Contribution (\$) \$10.00
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#: _____) Huston, Jay <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	Amount of Contribution (\$) \$10.00
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#: _____) Huston, Jay <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	Amount of Contribution (\$) \$10.00
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: 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Huston, Jay <hr/> 6 Contributor address; City; State; Zip Code Virginia Beach, VA 23456-4239	7 Amount of Contribution (\$) \$10.00
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Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.

MONETARY POLITICAL CONTRIBUTIONS

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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 <hr/> 6 Contributor address; City; State; Zip Code Sparks, MD 21152-8856	7 Amount of Contribution (\$) \$97.00
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 <hr/> Contributor address; City; State; Zip Code Sparks, MD 21152-8856	Amount of Contribution (\$) \$97.00
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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 <hr/> 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 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip <hr/> 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

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4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Phillip <hr/> 6 Contributor address; City; State; Zip Code Garner, NC 27529-8955	7 Amount of Contribution (\$) \$38.46
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kacher, Michael <hr/> 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
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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: 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 <hr/> 6 Contributor address; City; State; Zip Code Bel Air, MD 21014-5316	7 Amount of Contribution (\$) \$100.00
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Construction
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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 <hr/> 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
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 6 Contributor address; City; State; Zip Code York, PA 17402-8879	7 Amount of Contribution (\$) \$38.50
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 <hr/> 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 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter <hr/> 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 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter <hr/> 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 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter <hr/> 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: 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 <hr/> 6 Contributor address; City; State; Zip Code York, PA 17402-8879	7 Amount of Contribution (\$) \$38.50
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 <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter <hr/> 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 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter <hr/> 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 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klinka, Peter <hr/> 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: 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 <hr/> 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 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin <hr/> 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 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin <hr/> 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 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin <hr/> 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 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin <hr/> 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.		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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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.		1 Total pages Schedule A1: Sch: 45/110 Rpt: 49/120
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#: _____) Knight, Kristin <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin <hr/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Kristin <hr/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine <hr/> 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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Koski, Christine <hr/> 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 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 11/28/2025	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 10/17/2025	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 12/12/2025	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 11/14/2025	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: 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian <hr/> 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 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian <hr/> 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#: _____) Krul, Brian <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian <hr/> 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: 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan <hr/> 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 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan <hr/> 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 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan <hr/> 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 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Bryan <hr/> 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: 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 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 08/08/2025	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#: _____) 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 10/17/2025	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 12/12/2025	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.

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
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MONETARY POLITICAL CONTRIBUTIONS

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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 <hr/> Contributor address; City; State; Zip Code Abingdon, MD 21009-3040	Amount of Contribution (\$) \$96.15
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Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martz, Eric <hr/> Contributor address; City; State; Zip Code Carlisle, PA 17013-8802	Amount of Contribution (\$) \$100.00
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martz, Eric <hr/> Contributor address; City; State; Zip Code Carlisle, PA 17013-8802	Amount of Contribution (\$) \$100.00
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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#: _____) Mendinsky, Nichole <hr/> Contributor address; City; State; Zip Code Bellefonte, PA 16823-8452	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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Principal occupation / Job title (See Instructions) 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 <hr/> 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.
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/110 Rpt: 72/120
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#: _____) Mrynca, Gary <hr/> 6 Contributor address; City; State; Zip Code Fairview, TN 37062-8279	7 Amount of Contribution (\$) \$153.85
8 Principal occupation / Job title (See Instructions) Sector President		9 Employer (See Instructions) KCI Technologies, Inc.
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrynca, Gary <hr/> 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 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mrynca, Gary <hr/> 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#: _____) Mrynca, Gary <hr/> 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#: _____) Mrynca, Gary <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 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 12/26/2025	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 08/22/2025	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 07/11/2025	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 10/03/2025	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: 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 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 09/05/2025	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 11/14/2025	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#: _____) Ostrowski, Elizabeth Contributor address; City; State; Zip Code Nashville, TN 37209-4519	Amount of Contribution (\$) \$25.00
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#: _____) Ostrowski, Elizabeth Contributor address; City; State; Zip Code Nashville, TN 37209-4519	Amount of Contribution (\$) \$25.00
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 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 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth Contributor address; City; State; Zip Code Nashville, TN 37209-4519	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Regional Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrowski, Elizabeth <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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

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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 <hr/> 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.
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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 <hr/> 6 Contributor address; City; State; Zip Code Stevenson, MD 21153-2018	7 Amount of Contribution (\$) \$192.30
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George <hr/> 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 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdikakis, George <hr/> 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 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald <hr/> 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: 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 <hr/> 6 Contributor address; City; State; Zip Code Odessa, FL 33556-2274	7 Amount of Contribution (\$) \$38.47
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 <hr/> 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 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald <hr/> 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 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald <hr/> 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 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald <hr/> 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: 78/110 Rpt: 82/120
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#: _____) Plennert, Donald <hr/> 6 Contributor address; City; State; Zip Code Odessa, FL 33556-2274	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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald <hr/> 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.
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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: 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 <hr/> 6 Contributor address; City; State; Zip Code Odessa, FL 33556-2274	7 Amount of Contribution (\$) \$38.47
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plennert, Donald <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley <hr/> 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 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley <hr/> 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 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley <hr/> 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: 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 <hr/> 6 Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	7 Amount of Contribution (\$) \$55.00
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Bradley <hr/> 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.
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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: 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 <hr/> 6 Contributor address; City; State; Zip Code Wimauma, FL 33598-4027	7 Amount of Contribution (\$) \$55.00
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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 <hr/> 6 Contributor address; City; State; Zip Code Glenwood, MD 21738-9729	7 Amount of Contribution (\$) \$5,000.00
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 <hr/> Contributor address; City; State; Zip Code Bradenton, FL 34212-6320	Amount of Contribution (\$) \$60.00
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: 83/110 Rpt: 87/120
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirk, Brandon <hr/> Contributor address; City; State; Zip Code Palmyra, PA 17078-8956	Amount of Contribution (\$) \$38.50
Principal occupation / Job title (See Instructions) Practice Leader		Employer (See Instructions) KCI Technologies, Inc.
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4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Andrew <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21209-4429	7 Amount of Contribution (\$) \$100.00
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bayne <hr/> Contributor address; City; State; Zip Code Athens, GA 30607-1737	Amount of Contribution (\$) \$192.30
Principal occupation / Job title (See Instructions) Region Executive		Employer (See Instructions) KCI Technologies, Inc.
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Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Adam <hr/> Contributor address; City; State; Zip Code Durham, NC 27705-3155	Amount of Contribution (\$) \$192.30
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Adam <hr/> Contributor address; City; State; Zip Code Durham, NC 27705-3155	Amount of Contribution (\$) \$192.30
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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
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tan, Yu <hr/> Contributor address; City; State; Zip Code Annandale, VA 22003-2315	Amount of Contribution (\$) \$38.50
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Principal occupation / Job title (See Instructions) Practice Leader		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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 229 Peachtree Street Northeast Suite 1800, International Tower Atlanta, GA 30303-1617	
8 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 Contribution to Trade Association PAC
9 Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 L Street NW Suite 400 Washington, DC 20005-3592	
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 Contribution to Trade Association PAC
Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1858 Dover, DE 19903-1858	
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 <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. Box 11937 Columbia, SC 29211-1937	
8 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
9 Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8600 Maryland Drive Richmond, VA 23294-4702	
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 Contribution to Trade Association PAC
Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 527 East Park Avenue Tallahassee, FL 32301-2524	
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 <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O Box 1136 Danielsville, GA 30633-1136	
8 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
9 Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 19046 Baltimore, MD 21284-9046	
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 <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 835 Missouri City, TX 77459-0835	
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 <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2806 W. Bitters Road Suite 218 San Antonio, TX 78248-2119	
8 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 Transfer to Affiliated State Committee
9 Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2112 E Atlantic Boulevard 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 <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 56386 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 <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1469 Porter, TX 77365-1469	
8 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/16/2025	Candidate/Officeholder name Mikie Sherrill for Governor	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 43032 Montclair, NJ 07043-0032	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/06/2025	Candidate/Officeholder name Streight for Cecil	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 415 North East, MD 21901-0415	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
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
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4 Date 08/29/2025	5 Payee name Tennessee Professional Engineers PAC
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6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 800 Fort Negley Boulevard Nashville, TN 37203-4833
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8 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 Contribution to Trade Association PAC
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2025	Payee name Virginia Transportation Construction Alliance Political Action Committee
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 620 Moorefield Park Drive Suite 120 North Chesterfield, VA 23236-3692
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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