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Contact Information

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Reported Compensation

Date	Type	Value	Paid To
No Compensation reported.			

Reported Expenditures

Date	Amount	Beneficiary	Paid To	Reason	On Behalf Of
No Expenditures reported.					

Reported Contributions

Date	Amount	Paid To	Beneficiary	Office	Contribution Type
No Contributions reported.					

Reported Anything of Value

Date	Type	Value	Paid To	Beneficiary	Office	Location
No Anything Of Value reported.						

Reported Subjects

Behavioral Healthcare,Developmentally Disabled,Hospitals

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

JASON C. MARTIESIAN via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

Behavioral Healthcare,Education, Persons with Disabilities

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

JASON C. MARTIESIAN via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

Developmentally Disabled

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

JASON C. MARTIESIAN via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

Insurance

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

JASON C. MARTIESIAN via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

Reported Bills

No bills reported.

Reported Public Bodies

Behavioral Healthcare, Developmental Disabilities & Hospitals, Department of

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of RECOVERY SOLUTIONS LLC

Reported Executive Officials

No executive officials reported.