

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		7900364		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> HEALTH ALLIANCE POLITICAL ACTION COMMITTEE												
<b>Street Address:</b> 4750 LINDLE RD PO BX 8600												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17105-8600			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2001		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	6	2001				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	1		12	31	2001				
<b>A. Amount Brought Forward From Last Report</b>						\$ 27,928.17						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 5,327.32						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 33,255.49						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 11,335.99						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 21,919.50						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	<b>From:</b> <b>To:</b> <u>12/31/2001</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 1,419.48</b>

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	<b>\$ 0.00</b>
<b>All Other Contributions (Part B)</b>	<b>\$ 2,587.50</b>
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 2,587.50</b>

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	<b>\$ 0.00</b>
<b>All Other Contributions (Part D)</b>	<b>\$ 1,260.00</b>
<b>TOTAL for the Reporting Period (3)</b>	<b>\$ 1,260.00</b>

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	<b>\$ 60.34</b>

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	<b>\$ 5,327.32</b>
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<b>PART A</b> <b>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</b> <b>\$50.01 TO \$250.00</b> <b>Use this Part to itemize only contributions received from political committees</b> <b>with an aggregate value from \$50.01 to \$250.00 in the reporting period.</b>							
Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

<b>PAGE TOTAL</b>	
\$	0.00



Full Name of Contributor PATRICIA RYAN			MO	DAY	YEAR	\$ 225.00
Mailing Address 414 PAOLI PIKE P.O. BOX 3007			12	4	2001	
City MALVERN	State PA	Zip Code (Plus 4) 193553300				
Full Name of Contributor S. DALE YAKISH			MO	DAY	YEAR	\$ 90.00
Mailing Address 2011 KENTUCKY LANE			12	4	2001	
City ROCHESTER	State PA	Zip Code (Plus 4) 15074				
Full Name of Contributor KEVIN MCCARL			MO	DAY	YEAR	\$ 90.00
Mailing Address EXECUTIVE DRIVE BLDG. 230			12	28	2001	
City CRANBERRY TWP.	State PA	Zip Code (Plus 4) 16066				
Full Name of Contributor LETHA REINHEIMER			MO	DAY	YEAR	\$ 90.00
Mailing Address ORCHARD LANE			12	4	2001	
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 18411				
Full Name of Contributor DANIEL NADLER			MO	DAY	YEAR	\$ 90.00
Mailing Address 471 SCHOOL ST.			12	28	2001	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143				
Full Name of Contributor JUDY REINER			MO	DAY	YEAR	\$ 90.00
Mailing Address 627 CIDERBERRY DR.			12	28	2001	
City WEXFORD	State PA	Zip Code (Plus 4) 15090				
Full Name of Contributor DAVID HAWK			MO	DAY	YEAR	\$ 90.00
Mailing Address 1705 MADISON AVENUE			12	4	2001	
City DUNMORE	State PA	Zip Code (Plus 4) 185092035				
Full Name of Contributor MARIAN WHITLOCK			MO	DAY	YEAR	\$ 225.00
Mailing Address 1015 WEST BALTIMORE PIKE			12	12	2001	
City WEST GROVE	State PA	Zip Code (Plus 4) 193909499				
Full Name of Contributor MARIE ZANOTTI			MO	DAY	YEAR	\$ 90.00
Mailing Address 720 BLACKBURN ROAD			12	4	2001	
City SEWICKLEY	State PA	Zip Code (Plus 4) 151431498				

Full Name of Contributor			MO	DAY	YEAR	\$ 45.00
JULIE KISSINGER			12	31	2001	
Mailing Address 4750 LINDLE ROAD P.O. BOX 8600						
City HARRISBURG	State PA	Zip Code (Plus 4) 171112428				
Full Name of Contributor			MO	DAY	YEAR	\$ 45.00
JULIE KISSINGER			12	4	2001	
Mailing Address 4750 LINDLE ROAD P.O. BOX 8600						
City HARRISBURG	State PA	Zip Code (Plus 4) 171112428				
Full Name of Contributor			MO	DAY	YEAR	\$ 180.00
PATRICIA DE ANGELIS			12	17	2001	
Mailing Address 2601 HOLME AVENUE						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191522096				
Full Name of Contributor			MO	DAY	YEAR	\$ 90.00
RICHARD MARQUARDT			12	4	2001	
Mailing Address ABINGTON EXECUTIVE PARK						
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 18411				
Full Name of Contributor			MO	DAY	YEAR	\$ 225.00
THOMAS WHITE FACHE			12	17	2001	
Mailing Address 1211 WILMINGTON AVENUE						
City NEW CASTLE	State PA	Zip Code (Plus 4) 161052595				
Full Name of Contributor			MO	DAY	YEAR	\$ 90.00
MARLIN MILLER JR.			12	21	2001	
Mailing Address 211 N. TULPCHOCKEN ROAD						
City READING	State PA	Zip Code (Plus 4) 19601				
Full Name of Contributor			MO	DAY	YEAR	\$ 225.00
RONALD VIOLI			12	4	2001	
Mailing Address 3705 FIFTH AVENUE						
City PITTSBURGH	State PA	Zip Code (Plus 4) 152132583				
Full Name of Contributor			MO	DAY	YEAR	\$ 90.00
JOSEPH PELUSO CHE			12	12	2001	
Mailing Address 532 WEST PITTSBURGH STREET						
City GREENSBURG	State PA	Zip Code (Plus 4) 156012239				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL**

\$ 2,587.50

## PART C

## Contributions Received From Political Committees

**OVER \$250.00**

**Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE TOTAL</b>	
\$	0.00

**PART D**  
**ALL OTHER CONTRIBUTIONS**  
**OVER \$250.00**

**Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C.)**

<b>Name of Filing Committee or Candidate</b>  HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <b>To:</b> <u>12/31/2001</u>
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				DATE			AMOUNT
<b>Full Name of Contributor</b> C. RICHARD HARTMAN MD				MO	DAY	YEAR	\$ 450.00
<b>Mailing Address</b> 1800 MULBERRY STREET							
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 185102375					
<b>Employer Name</b> COMMUNITY MEDICAL CENTER				<b>Occupation</b> PRESIDENT AND CHIEF EXECU			
<b>Employer Mailing Address/Principal Place of Business</b> 1800 MULBERRY STREET			<b>City</b> SCRANTON		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 185102375	
<b>Full Name of Contributor</b> THOMAS NIMICK JR.				MO	DAY	YEAR	\$ 450.00
<b>Mailing Address</b> P.O. BOX 672							
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152300672					
<b>Employer Name</b> CHILDREN'S INSTITUTE OF				<b>Occupation</b> TRUSTEE			
<b>Employer Mailing Address/Principal Place of Business</b> P.O. BOX 672			<b>City</b> PITTSBURGH		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152300672	
<b>Full Name of Contributor</b> CHARLES O'BRIEN JR.				MO	DAY	YEAR	\$ 360.00
<b>Mailing Address</b> 4800 FRIENDSHIP AVENUE							
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152241722					
<b>Employer Name</b> WEST PENN ALLEGHENY HEALT				<b>Occupation</b> PRESIDENT & CEO			
<b>Employer Mailing Address/Principal Place of Business</b> 4800 FRIENDSHIP AVENUE			<b>City</b> PITTSBURGH		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152241722	

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE TOTAL</b>
\$ 1,260.00



## PART E OTHER RECEIPTS

### REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

**Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.**

<b>Name of Filing Committee or Candidate</b>  HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	<b>Reporting Period</b>  <b>From:</b> _____ <b>To:</b> <u>12/31/2001</u>
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				DATE		AMOUNT	
<b>Full Name</b> PNCBANK				MO 12	DAY 31	YEAR 2001	\$ 28.88
<b>Mailing Address</b> P.O. BOX 8874							
<b>City</b> CAMP HILL		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170018874				
<b>Receipt Description</b> DECEMBER 2001 INTEREST INCOME							
<b>Full Name</b> PNC BANK				MO 11	DAY 30	YEAR 2001	\$ 31.46
<b>Mailing Address</b> P.O. BOX 8874							
<b>City</b> CAMP HILL		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170018874				
<b>Receipt Description</b> NOVEMBER 2001 INTEREST INCOME							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 60.34

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS  
DURING THE REPORTING PERIOD.**

**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE		<b>From:</b>	<b>To:</b> <u>12/31/2001</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	



To Whom Paid COMMITTEE TO ELECT MIKE VEON			MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. BOX 327			11	27	2001	
City BEAVER FALLS	State PA	Zip Code (Plus 4) 15010	Description of Expenditure MICHAEL VEON, STATE HOUSE REP. 14TH PA			

To Whom Paid PA. ASSN. OF REHAB FACILITIES			MO	DAY	YEAR	\$ 767.50
Mailing Address 2400 PARK DRIVE			11	27	2001	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure REHAB PAC GENERAL CONTRIBUTION			

To Whom Paid JANE BAKER FOR STATE REPRESENTATIVE COMMITTEE			MO	DAY	YEAR	\$ 250.00
Mailing Address 421 TAMARACK DRIVE			12	3	2001	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	Description of Expenditure BAKER, STATE HOUSE REP. 134TH PA			

To Whom Paid WILL TO WIN COMMITTEE			MO	DAY	YEAR	\$ 150.00
Mailing Address 430 FRANKLIN CHURCH ROAD			12	3	2001	
City DILLSBURG	State PA	Zip Code (Plus 4) 17019	Description of Expenditure STATE HOUSE REP. 199TH PA			

To Whom Paid CITIZENS FOR LYNN HERMAN CTE.			MO	DAY	YEAR	\$ 300.00
Mailing Address POST OFFICE BOX 641			12	3	2001	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16804	Description of Expenditure LYNN HERMAN, STATE HOUSE REP. 77TH PA			

To Whom Paid WIN WITH WAUGH COMMITTEE			MO	DAY	YEAR	\$ 50.00
Mailing Address P.O. BOX 545			12	3	2001	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure MICHAEL WAUGH, STATE HOUSE REP. 93RD PA			

To Whom Paid RENDELL FOR GOVERNOR			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 124 SOUTH 15TH STREET THIRD FLOOR			12	10	2001	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure G RENDELL, GOVERNOR PA			

To Whom Paid FRIENDS OF JIM ROEBUCK COMMITTEE			MO	DAY	YEAR	\$ 250.00
Mailing Address 435 S. 46TH STREET			12	10	2001	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143	Description of Expenditure JAMES ROEBUCK, STATE HOUSE REP. 188TH PA			

<b>To Whom Paid</b> CITIZENS TO ELECT DWIGHT EVANS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,000.00
<b>Mailing Address</b> P.O. BOX 19097			12	10	2001	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19138	<b>Description of Expenditure</b> DWIGHT EVANS, STATE HOUSE REP. 203RD PA			

<b>To Whom Paid</b> FRIENDS OF JUDGE EAKIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> POST OFFICE BOX 545			12	10	2001	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> MICHAEL EAKIN, STATEWIDE COURT JDG PA			

<b>To Whom Paid</b> FRIENDS OF MATT RYAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> P.O. BOX 677			12	20	2001	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171080677	<b>Description of Expenditure</b> MATTHEW RYAN, STATE HOUSE REP. 168TH PA			

<b>To Whom Paid</b> RAY BUNT FOR LEGISLATURE COMMITTEE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> P.O. BOX 545			12	20	2001	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> RAYMOND BUNT, STATE HOUSE REP. 147TH PA			

<b>To Whom Paid</b> FRIENDS OF KATHY WATSON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 1931 APPALOOSA ROAD			12	20	2001	
<b>City</b> WARRINGTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18976	<b>Description of Expenditure</b> M. WATSON, STATE HOUSE REP. PA			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 11,335.99

