

# 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>												
<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 2002	<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	5	2002				
									(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	2002				
<b>A. Amount Brought Forward From Last Report</b>						\$ 11,237.47						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 10,334.55						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 21,572.02						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 1,741.01						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 19,831.01						
<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>12/31/2002</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 949.11</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>\$ 5,315.00</b>
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 5,315.00</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>\$ 4,050.00</b>
<b>TOTAL for the Reporting Period (3)</b>	<b>\$ 4,050.00</b>

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	<b>\$ 20.44</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>\$ 10,334.55</b>
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# PART B

## ALL OTHER CONTRIBUTIONS

**\$50.01 TO \$250.00**

**Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 to \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part A)**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE				<b>From:</b>		<b>To:</b> <u>12/31/2002</u>	

  

				DATE		AMOUNT	
<b>Full Name of Contributor</b> MARGARET O'DONOGHUE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				12	31	2002	
<b>City</b> MOORESTOWN	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 18057					
<b>Full Name of Contributor</b> VALLA AMSTERDAM				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				12	31	2002	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19103					
<b>Full Name of Contributor</b> LOUISE BODINE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				12	31	2002	
<b>City</b> VILLANOVA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19085					
<b>Full Name of Contributor</b> STEPHEN SMITH				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 90.00
<b>Mailing Address</b>				12	31	2002	
<b>City</b> RADNOR	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190875280					
<b>Full Name of Contributor</b> SCOTT ELDREDGE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 90.00
<b>Mailing Address</b>				12	31	2002	
<b>City</b> WILLIAMSTOWN	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08094					
<b>Full Name of Contributor</b> OKSANA BALTAROWICH M.D.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 90.00
<b>Mailing Address</b>				12	31	2002	
<b>City</b> HUNTINGTON VALLEY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19006					
<b>Full Name of Contributor</b> BROOKE WILLIAMS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				12	12	2002	
<b>City</b> BERWYN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19312					

Full Name of Contributor LOUISE HAVENS			MO	DAY	YEAR	\$ 180.00
Mailing Address			12	12	2002	
City WYNNEWOOD	State PA	Zip Code (Plus 4) 19096				

Full Name of Contributor RAYMOND GREENE			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	5	2002	
City SHARON	State PA	Zip Code (Plus 4) 161463395				

Full Name of Contributor ELAINE ABRUZZO			MO	DAY	YEAR	\$ 100.00
Mailing Address			12	31	2002	
City ROSEMONT	State PA	Zip Code (Plus 4) 19010				

Full Name of Contributor BRIAN CORBETT ESQ.			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	12	2002	
City BRYN MAWR	State PA	Zip Code (Plus 4) 190103143				

Full Name of Contributor GERALD MEYER			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191075096				

Full Name of Contributor STEPHEN STADLER			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191075096				

Full Name of Contributor C. SCOTT CAMPBELL			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	2	2002	
City LANCASTER	State PA	Zip Code (Plus 4) 176043434				

Full Name of Contributor ROGER DANIELS			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City RADNOR	State PA	Zip Code (Plus 4) 190875288				

Full Name of Contributor JOHN GRIFFITH MD			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191075084				

Full Name of Contributor LANA CRAWFORD			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	12	2002	
City	GLADWYNE	State PA				
Full Name of Contributor PEGGY MASON			MO	DAY	YEAR	\$ 180.00
Mailing Address			12	12	2002	
City	BERWYN	State PA				
Full Name of Contributor KIMBERLY RUSNACK			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	2	2002	
City	HERMITAGE	State PA				
Full Name of Contributor MARY RUSSELL			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	23	2002	
City	PITTSBURGH	State PA				
Full Name of Contributor JOANN NARDUZZI M.D.			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	16	2002	
City	PITTSBURGH	State PA				
Full Name of Contributor CARMHIEL BROWN			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	31	2002	
City	RADNOR	State PA				
Full Name of Contributor STEPHEN TRANQUILLO			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor ANDREW NATHANS			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor ELLIOT SUSSMAN MD			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	23	2002	
City	ALLENTOWN	State PA				

Full Name of Contributor MIRIAM SCHWED			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor DOUGLAS MACMASTER JR., ESQ.			MO	DAY	YEAR	\$ 180.00
Mailing Address			12	31	2002	
City	AMBLER	State PA				
Full Name of Contributor AL KURTZ			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor BARRY GOLDBERG			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor THEODORE CHRISTOPHER			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor IRA BRIND ESQ.			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor STEPHEN WOLFE			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	16	2002	
City	INDIANA	State PA				
Full Name of Contributor REBECCA O'SHEA			MO	DAY	YEAR	\$ 90.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				
Full Name of Contributor JOHN SULLIVAN			MO	DAY	YEAR	\$ 225.00
Mailing Address			12	31	2002	
City	PHILADELPHIA	State PA				

<b>Full Name of Contributor</b> THERESA KARTER RN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 90.00
<b>Mailing Address</b>			12	31	2002	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191483594				
<b>Full Name of Contributor</b> EILEEN MCANALLY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 225.00
<b>Mailing Address</b>			12	12	2002	
<b>City</b> BRYN MAWR	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190103160				
<b>Full Name of Contributor</b> JANET BURNHAM			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 225.00
<b>Mailing Address</b>			12	31	2002	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191074824				
<b>Full Name of Contributor</b> SHARON MILLINGHAUSEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 90.00
<b>Mailing Address</b>			12	31	2002	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19107				
<b>Full Name of Contributor</b> IRMA GOERTZEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 225.00
<b>Mailing Address</b>			12	23	2002	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152133180				

PAGE TOTAL

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

\$ 5,315.00

**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

				DATE		AMOUNT	
Full Name of Contributor SHERRY JOSUE				MO	DAY	YEAR	\$ 900.00
				12	31	2002	
Mailing Address							
City BURLINGTON		State NJ	Zip Code (Plus 4) 08016				
Employer Name JEFFERSON HEALTH SYSTEM				Occupation REGISTERED NURSE			
Employer Mailing Address/Principal Place of Business			City BURLINGTON	State NJ		Zip Code (Plus 4) 08016	

<b>Full Name of Contributor</b> JAMES ROBINSON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 450.00
<b>Mailing Address</b>			12	31	2002	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191483594				
<b>Employer Name</b> METHODIST HOSPITAL DIVISION-TJUH			<b>Occupation</b> CHIEF ADMINISTRATIVE OFCR			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> PHILADELPHIA	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191483594	

<b>Full Name of Contributor</b> ALAN BRECHBILL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 450.00
<b>Mailing Address</b>			12	31	2002	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191075084				
<b>Employer Name</b> THOMAS JEFFERSON UNIVERSITY HOSPITAL			<b>Occupation</b> EXECUTIVE VP AND COO			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> PHILADELPHIA	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191075084	

Full Name of Contributor				MO	DAY	YEAR	\$ 900.00
IAN RAWSON PH.D.				12	18	2002	
Mailing Address							
City WARRENDALE		State PA	Zip Code (Plus 4) 150867516				
Employer Name HOSPITAL COUNCIL OF WESTERN PA				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business			City WARRENDALE		State PA		Zip Code (Plus 4) 150867516

<b>Full Name of Contributor</b> VICTOR JOHNSON			<b>MO</b> 12	<b>DAY</b> 16	<b>YEAR</b> 2002	<b>\$</b> 450.00
<b>Mailing Address</b>						
<b>City</b> CINNAMINSON	<b>State</b> NJ	<b>Zip Code (Plus 4)</b>				
<b>Employer Name</b> JEFFERSON HEALTH SYSTEM			<b>Occupation</b> CHAIRMAN OF THE BOARD			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> CINNAMINSON	<b>State</b> NJ		<b>Zip Code (Plus 4)</b>	

  

<b>Full Name of Contributor</b> THOMAS LEWIS			<b>MO</b> 12	<b>DAY</b> 31	<b>YEAR</b> 2002	<b>\$</b> 900.00
<b>Mailing Address</b>						
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191075096				
<b>Employer Name</b> THOMAS JEFFERSON UNIVERSITY HOSPITAL			<b>Occupation</b> PRESIDENT & CEO			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> PHILADELPHIA	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 191075096	

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

<b>PAGE TOTAL</b>
<b>\$</b> 4,050.00

## 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>	<b>Reporting Period</b>
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	<b>From:</b> <b>To:</b> <u>12/31/2002</u>

				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 9.43
PNC BANK							
Mailing Address							
City	CAMP HILL	State	Zip Code (Plus 4)	12	5	2002	
		PA	170018874				
Receipt Description							
NOVEMBER 2002 INTEREST INCOME							

<b>Full Name</b> PNC BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 11.01
<b>Mailing Address</b>			12	31	2002	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170018874				
<b>Receipt Description</b> DECEMBER 2002 INTEREST INCOME						

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

<b>PAGE TOTAL</b>	
\$	20.44

## 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>12/31/2002</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 RECIEVED - 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	

## SCHEDULE III

# STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	<b>From</b> <b>To:</b> <u>12/31/2002</u>

<b>To Whom Paid</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 107.15
PNC BANK			12	5	2002	
<b>Mailing Address</b>						
<b>City</b>	HARRISBURG	<b>State</b>	PA	<b>Zip Code (Plus 4)</b>	17001	<b>Description of Expenditure</b> NOVEMBER 2002 BANK FEES

<b>To Whom Paid</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 83.86
PNC BANK			12	31	2002	
<b>Mailing Address</b>						
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17001	<b>Description of Expenditure</b> DECEMBER 2002 BANK FEES			

<b>To Whom Paid</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 450.00
ROBBINS FOR SENATE COMMITTEE						
<b>Mailing Address</b>			12	6	2002	
<b>City</b> GREENVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16125	<b>Description of Expenditure</b> ROBERT ROBBINS, STATE SENATE 50TH PA			

<b>To Whom Paid</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 250.00
CITIZENS FOR SEMMEL						
<b>Mailing Address</b>			12	6	2002	
<b>City</b>	SCHNECKSVILLE	<b>State</b>	PA	<b>Zip Code (Plus 4)</b>	18078	<b>Description of Expenditure</b>
						PAUL SEMMEL, STATE HOUSE REP. 187TH PA

<b>To Whom Paid</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
FRIENDS OF JOE SCARNATI						
<b>Mailing Address</b>			12	20	2002	
<b>City</b> BROCKWAY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15824	<b>Description of Expenditure</b> JOSEPH B. SCARNATI, STATE SENATE 25TH PA			

<b>To Whom Paid</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 350.00
FRIENDS OF JOHN PIPPY						
<b>Mailing Address</b>			12	20	2002	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> JOHN PIPPY, STATE HOUSE REP. 44TH PA			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>	<b>PAGE TOTAL</b>
	<b>\$ 1,741.01</b>

