

# 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> Hospital & Healthsystem Assoc of PA PAC (HAPAC)												
<b>Street Address:</b> 4750 Lindle Road												
<b>City:</b> Harrisburg						<b>State:</b> PA			<b>Zip Code:</b> 17105			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2016	<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	8	2016	(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	2016		4	11	2016		
<b>A. Amount Brought Forward From Last Report</b>						\$ 123,054.68						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 10,288.57						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 133,343.25						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 23,548.82						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 109,794.43						
<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>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>From:</b> <u>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 279.05</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>\$ 2,527.50</b>
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 2,527.50</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>\$ 7,420.91</b>
<b>TOTAL for the Reporting Period (3)</b>	<b>\$ 7,420.91</b>

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	<b>\$ 61.11</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>\$ 10,288.57</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 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

## 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>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>From:</b> <u>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>

				DATE		AMOUNT	
Full Name of Contributor Ms. Sherry L. Fischer				MO	DAY	YEAR	\$ 75.00
Mailing Address 479 N. Lime Street				2	18	2016	
City Elizabethtown	State PA	Zip Code (Plus 4) 170221420					
Full Name of Contributor Kathryn Slatt				MO	DAY	YEAR	\$ 90.00
Mailing Address 32 Sweet Arrow Drive				2	18	2016	
City Hummelstown	State PA	Zip Code (Plus 4) 170362718					
Full Name of Contributor Mr. James M Collins				MO	DAY	YEAR	\$ 250.00
Mailing Address 1000 Bower Hill Road				2	19	2016	
City Pittsburgh	State PA	Zip Code (Plus 4) 152431873					
Full Name of Contributor Mr. David K Miles				MO	DAY	YEAR	\$ 250.00
Mailing Address 1405 Shady Avenue				2	23	2016	
City Pittsburgh	State PA	Zip Code (Plus 4) 152171350					
Full Name of Contributor Mr. Scott A. Bishop				MO	DAY	YEAR	\$ 37.50
Mailing Address 3133 Windsor Drive				2	12	2016	
City Landisville	State PA	Zip Code (Plus 4) 175381366					
Full Name of Contributor Mr. Scott A. Bishop				MO	DAY	YEAR	\$ 37.50
Mailing Address 3133 Windsor Drive				2	29	2016	
City Landisville	State PA	Zip Code (Plus 4) 175381366					

Full Name of Contributor Dr. Terrance L. Foust DO			MO	DAY	YEAR	\$ 75.00
Mailing Address 447 Peet Brook Road			3	1	2016	
City Coudersport	State PA	Zip Code (Plus 4) 169158132				
Full Name of Contributor Mr. David Crandall			MO	DAY	YEAR	\$ 62.50
Mailing Address 1143 Chipmunk Trail			3	1	2016	
City Coudersport	State PA	Zip Code (Plus 4) 169159419				
Full Name of Contributor Mr. Arvydas I. Svalbonas			MO	DAY	YEAR	\$ 150.00
Mailing Address 1106 Quincy Circle			3	4	2016	
City New Cumberland	State PA	Zip Code (Plus 4) 170702242				
Full Name of Contributor Ms. Tina L. True			MO	DAY	YEAR	\$ 250.00
Mailing Address 2280 Forest Hills Drive			3	8	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 171121004				
Full Name of Contributor Mr. David Hunt			MO	DAY	YEAR	\$ 250.00
Mailing Address 349 Beech Avenue			3	17	2016	
City Hershey	State PA	Zip Code (Plus 4) 170331608				
Full Name of Contributor Mr. Thomas Grace RN, Ph.D.			MO	DAY	YEAR	\$ 125.00
Mailing Address 594 Forest Road			3	22	2016	
City Wayne	State PA	Zip Code (Plus 4) 190872322				
Full Name of Contributor Mr. Alvin J Harper			MO	DAY	YEAR	\$ 250.00
Mailing Address 515 Dorchester Road			3	22	2016	
City Seven Fields	State PA	Zip Code (Plus 4) 160464705				
Full Name of Contributor Mr. J. David Buckler			MO	DAY	YEAR	\$ 125.00
Mailing Address 37 Southwood Rd			3	22	2016	
City Coudersport	State PA	Zip Code (Plus 4) 169158523				
Full Name of Contributor Mr. Scott A. Bishop			MO	DAY	YEAR	\$ 37.50
Mailing Address 3133 Windsor Drive			3	15	2016	
City Landisville	State PA	Zip Code (Plus 4) 175381366				

<b>Full Name of Contributor</b> Mr. Scott A. Bishop			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 37.50
<b>Mailing Address</b> 3133 Windsor Drive			3	31	2016	
<b>City</b> Landisville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175381366				
<b>Full Name of Contributor</b> Jennifer N. Jordan			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> 1403 S. Juniper Street			4	1	2016	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191474924				
<b>Full Name of Contributor</b> Mr. Peter M Grollman			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 1013 Wellington Terrace			4	7	2016	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 181039797				
<b>Full Name of Contributor</b> Mrs. Rhonda B. Ulrich			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 169 Martin Avenue P.O. Box 1002			1	30	2016	
<b>City</b> Ephrata	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175221755				

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

**PAGE TOTAL**

\$ 2,527.50

**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: <span style="float: right;">To:</span>

DATE				AMOUNT
Full Name of Contributing Committee				
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
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**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>	<b>Reporting Period</b>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>From:</b> <u>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>

				DATE	AMOUNT
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$	375.00
Mr. Steven P Johnson FACHE					
<b>Mailing Address</b> 700 High Street					
<b>City</b> Williamsport	4	7	2016		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 177013100					
<b>Employer Name</b> Susquehanna Health System	<b>Occupation</b> President and Chief Execu				
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
700 High Street	Williamsport	PA	177013109		
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$	85.23
Mr. Andrew W. Carter					
<b>Mailing Address</b> 4750 Lindle Road Post Office Box 8600					
<b>City</b> Harrisburg	2	29	2016		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 171112428					
<b>Employer Name</b> Hospital and Healthsystem Association of Penns, Th	<b>Occupation</b> President and Chief Execu				
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
P O Box 8600	Harrisburg	PA	171058600		
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$	85.23
Mr. Andrew W. Carter					
<b>Mailing Address</b> 4750 Lindle Road Post Office Box 8600					
<b>City</b> Harrisburg	3	15	2016		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 171112428					
<b>Employer Name</b> Hospital and Healthsystem Association of Penns, Th	<b>Occupation</b> President and Chief Execu				
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
P O Box 8600	Harrisburg	PA	171058600		
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$	85.23
Mr. Andrew W. Carter					
<b>Mailing Address</b> 4750 Lindle Road Post Office Box 8600					
<b>City</b> Harrisburg	3	31	2016		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 171112428					
<b>Employer Name</b> Hospital and Healthsystem Association of Penns, Th	<b>Occupation</b> President and Chief Execu				
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
P O Box 8600	Harrisburg	PA	171058600		



<b>Full Name of Contributor</b> Mr. Andrew W. Carter			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 85.22
<b>Mailing Address</b> 4750 Lindle Road Post Office Box 8600			2	12	2016	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171112428				
<b>Employer Name</b> Hospital and Healthsystem Association of Penns, Th			<b>Occupation</b> President and Chief Execu			
<b>Employer Mailing Address/Principal Place of Business</b> P O Box 8600		<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 171058600	

  

<b>Full Name of Contributor</b> Ms. Paula Bussard			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 900.00
<b>Mailing Address</b> 99 E. Yellow Breeches Rd.			2	18	2016	
<b>City</b> Carlisle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170159174				
<b>Employer Name</b> Hospital and Healthsystem Assn of Pennsylvania			<b>Occupation</b> Senior VP, Policy and Re			
<b>Employer Mailing Address/Principal Place of Business</b> 4750 Lindle RoadPost Office Box 8600		<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 171112451	

  

<b>Full Name of Contributor</b> Dr. Brian Nester DO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 900.00
<b>Mailing Address</b> 1995 Augusta Drive			2	10	2016	
<b>City</b> Center Valley	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180348926				
<b>Employer Name</b> Lehigh Valley Health Network			<b>Occupation</b> President and Chief Execu			
<b>Employer Mailing Address/Principal Place of Business</b> P O Box 689		<b>City</b> Allentown	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 181051556	

  

<b>Full Name of Contributor</b> Dr. Brian Nester DO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 900.00
<b>Mailing Address</b> 1995 Augusta Drive			2	10	2016	
<b>City</b> Center Valley	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180348926				
<b>Employer Name</b> Lehigh Valley Health Network			<b>Occupation</b> President and Chief Execu			
<b>Employer Mailing Address/Principal Place of Business</b> P O Box 689		<b>City</b> Allentown	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 181051556	

  

<b>Full Name of Contributor</b> Mr. Timothy L. Ohrum			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 450.00
<b>Mailing Address</b> 404 West North Avenue			2	15	2016	
<b>City</b> Pittsburgh	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152124637				
<b>Employer Name</b> Hospital and Healthsystem Assn of Pennsylvania			<b>Occupation</b> Vice President, Grassroot			
<b>Employer Mailing Address/Principal Place of Business</b> 4750 Lindle RoadPost Office Box 8600		<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 171112451	

  

<b>Full Name of Contributor</b> Jeffery W. Bechtel			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 900.00
<b>Mailing Address</b> 5016 Muirfield Place			2	8	2016	
<b>City</b> Mechanicsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170508311				
<b>Employer Name</b> Hospital and Healthsystem Assn of Pennsylvania			<b>Occupation</b> Sr. VP, Health Economics			
<b>Employer Mailing Address/Principal Place of Business</b> 4750 Lindle RoadPost Office Box 8600		<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 171112451	

<b>Full Name of Contributor</b> Mr. Martin Ciccocioppo			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,440.00
<b>Mailing Address</b> 1769 Wellington Drive			2	8	2016	
<b>City</b> Middletown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170573425				
<b>Employer Name</b> Hospital and Healthsystem Assn of Pennsylvania			<b>Occupation</b> Vice President, Research			
<b>Employer Mailing Address/Principal Place of Business</b> 4750 Lindle RoadPost Office Box 8600		<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 171112451	

  

<b>Full Name of Contributor</b> Kimberly S. McCoy			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 315.00
<b>Mailing Address</b> 1117 Charles St			1	28	2016	
<b>City</b> Mechanicsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170553947				
<b>Employer Name</b> Hospital and Healthsystem Assn of Pennsylvania			<b>Occupation</b> Director, HR			
<b>Employer Mailing Address/Principal Place of Business</b> 4750 Lindle RoadPost Office Box 8600		<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 171112451	

  

<b>Full Name of Contributor</b> Ms. Barbra Wadsworth RN, MSN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 900.00
<b>Mailing Address</b> 1749 Sorrel Road			1	8	2016	
<b>City</b> Warrington	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189762229				
<b>Employer Name</b> Main Line Health/Main Line Hospitals			<b>Occupation</b> Senior Vice President/Chi			
<b>Employer Mailing Address/Principal Place of Business</b> 130 South Bryn Mawr Avenue		<b>City</b> Bryn Mawr	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 190103143	

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

<b>PAGE TOTAL</b>
<b>\$</b> 7,420.91

## 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>  Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>
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				DATE		AMOUNT	
<b>Full Name</b> Metro Bank				<b>MO</b>  1	<b>DAY</b>  29	<b>YEAR</b>  2016	<b>\$</b>  10.53
<b>Mailing Address</b> 3801 Paxton St							
<b>City</b> Harrisburg	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17111					
<b>Receipt Description</b> January interest income							
<b>Full Name</b> Metro Bank				<b>MO</b>  1	<b>DAY</b>  29	<b>YEAR</b>  2016	<b>\$</b>  31.20
<b>Mailing Address</b> 3801 Paxton St							
<b>City</b> Harrisburg	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17111					
<b>Receipt Description</b> Jan interest income							
<b>Full Name</b> Metro Bank				<b>MO</b>  2	<b>DAY</b>  12	<b>YEAR</b>  2016	<b>\$</b>  10.93
<b>Mailing Address</b> 3801 Paxton St							
<b>City</b> Harrisburg	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17111					
<b>Receipt Description</b> Feb interest income							
<b>Full Name</b> FNB-First National Bank				<b>MO</b>  2	<b>DAY</b>  29	<b>YEAR</b>  2016	<b>\$</b>  0.18
<b>Mailing Address</b> 4250 Derry Street							
<b>City</b> Harrisburg	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17111					
<b>Receipt Description</b> Feb interest income							
<b>Full Name</b> FNB-First National Bank				<b>MO</b>  2	<b>DAY</b>  29	<b>YEAR</b>  2016	<b>\$</b>  0.45
<b>Mailing Address</b> 4250 Derry Street							
<b>City</b> Harrisburg	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17111					
<b>Receipt Description</b> Feb interest income							

<b>Full Name</b> FNB-First National Bank				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 6.63
<b>Mailing Address</b> 4250 Derry Street				2	29	2016	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111					
<b>Receipt Description</b> Feb interest income							

<b>Full Name</b> FNB-First National Bank				<b>MO</b>  3	<b>DAY</b>  31	<b>YEAR</b>  2016	<b>\$</b>  
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<b>Full Name</b> FNB-First National Bank				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 0.77
<b>Mailing Address</b> 4250 Derry Street				3	31	2016	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111					
<b>Receipt Description</b> March interest income							

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

<b>PAGE TOTAL</b>	
<b>\$</b>	61.11

## 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>	
Hospital & Healthsystem Assoc of PA PAC (HAPAC)		From: <u>1/1/2016</u> To: <u>4/11/2016</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>
---------------------------------------	--

			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>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From <u>1/1/2016</u> To: <u>4/11/2016</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Metro Bank				
<b>Mailing Address</b> 3801 Paxton St	1	4	2016	\$ 127.51
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Bank fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Metro Bank				
<b>Mailing Address</b> 3801 Paxton St	1	4	2016	\$ 355.40
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Bank fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Metro Bank				
<b>Mailing Address</b> 3801 Paxton St	1	5	2016	\$ 15.50
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Bank fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Metro Bank				
<b>Mailing Address</b> 3801 Paxton St	2	1	2016	\$ 28.57
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Bank fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Metro Bank				
<b>Mailing Address</b> 3801 Paxton St	2	2	2016	\$ 10.50
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Bank fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Metro Bank				
<b>Mailing Address</b> 3801 Paxton St	2	8	2016	\$ 40.53
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Bank fees	



To Whom Paid Citizens for Hughes			MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. Box 13031			2	25	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 191013031	Description of Expenditure Vincent Hughes, STATE SENATE 7th PA			
To Whom Paid Senate Republican Campaign Committee			MO	DAY	YEAR	\$ 10,000.00
Mailing Address P.O. Box 792 Federal Square Station			2	25	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure SRCC- 2016 WINTER RECEPTION 2/8/16			
To Whom Paid Committee to Elect Brian Ellis			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1 Evergreen Road			2	25	2016	
City Lyndora	State PA	Zip Code (Plus 4) 16045	Description of Expenditure Brian Ellis, STATE HOUSE 11th PA			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 2,000.00
Mailing Address P.O. Box 11787			2	25	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure HRCC - KICKOFF			
To Whom Paid Friends of Marcy Toepel			MO	DAY	YEAR	\$ 300.00
Mailing Address 307 Hampton Circle			2	25	2016	
City Gilbertsville	State PA	Zip Code (Plus 4) 19525	Description of Expenditure Marcy Toepel, STATE HOUSE 147th PA			
To Whom Paid Citizens for Grove			MO	DAY	YEAR	\$ 300.00
Mailing Address P.O. Box 412			2	25	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Seth Grove, STATE HOUSE 196th PA			
To Whom Paid Committee to Elect Pam Snyder			MO	DAY	YEAR	\$ 300.00
Mailing Address P.O. Box 545			2	25	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Pam Snyder, STATE HOUSE 50th PA			
To Whom Paid Committee to Re-Elect John Sabatina, Jr.			MO	DAY	YEAR	\$ 500.00
Mailing Address 7718 Castor Avenue 2nd Floor			2	25	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19152	Description of Expenditure John Sabatina, STATE HOUSE 174th PA			

To Whom Paid			MO	DAY	YEAR	\$ 20.00
FNB-First National Bank						
Mailing Address 4250 Derry Street			3	1	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17111	Description of Expenditure Bank fees			
To Whom Paid			MO	DAY	YEAR	\$ 18.54
FNB-First National Bank						
Mailing Address 4250 Derry Street			3	1	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17111	Description of Expenditure Bank fees-heartland			
To Whom Paid			MO	DAY	YEAR	\$ 10.00
FNB-First National Bank						
Mailing Address 4250 Derry Street			3	3	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17111	Description of Expenditure bank fees			
To Whom Paid			MO	DAY	YEAR	\$ 52.15
United States Treasury - IRS						
Mailing Address			3	11	2016	
City Ogden	State UT	Zip Code (Plus 4) 84201	Description of Expenditure EIN# 23-2125904, 12/31/2015, 1120POL			
To Whom Paid			MO	DAY	YEAR	\$ 508.00
Sue Stewart						
Mailing Address 792 Garriston Road			3	11	2016	
City Lewisberry	State PA	Zip Code (Plus 4) 17339	Description of Expenditure SUE STEWART-VENUE COSTS-COSTA EVENT 2/25/16 / \$508.00 Allocated To Jay Costa for State Senate Committee			
To Whom Paid			MO	DAY	YEAR	\$ 2,000.00
Jay Costa for State Senate Committee						
Mailing Address 314 Newport Road			4	4	2016	
City Pittsburgh	State PA	Zip Code (Plus 4) 15221	Description of Expenditure Jay Costa, STATE SENATE 43rd PA			
To Whom Paid			MO	DAY	YEAR	\$ 500.00
Citizens for Hughes						
Mailing Address P.O. Box 13031			4	4	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 191013031	Description of Expenditure Vincent Hughes, STATE SENATE 7th PA			
To Whom Paid			MO	DAY	YEAR	\$ 462.12
Sue Stewart						
Mailing Address 792 Garriston Road			4	4	2016	
City Lewisberry	State PA	Zip Code (Plus 4) 17339	Description of Expenditure S.Stewart-Venue Costs-Cutler Event 3/29/16 / \$462.12 Allocated To Friends of Bryvan Cutler			

<b>To Whom Paid</b> Committee to Elect Frank Burns			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 535 Fairfield Avenue			4	4	2016	
<b>City</b> Johnstown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15906	<b>Description of Expenditure</b> Frank Burns, STATE HOUSE 72nd PA			

  

<b>To Whom Paid</b> Volunteers for Argall - Senate			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> P.O. Box 241			4	4	2016	
<b>City</b> Tamaqua	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18252	<b>Description of Expenditure</b> David Argall, STATE SENATE 29th PA			

  

<b>To Whom Paid</b> Friends of Bob Mensch - Senate			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> P.O. Box 1061			4	4	2016	
<b>City</b> Quakertown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18951	<b>Description of Expenditure</b> Bob Mensch, STATE SENATE 24th PA			

  

<b>To Whom Paid</b> Build PA PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> P.O. Box 412			4	4	2016	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> Jake Corman, STATE SENATE 34th PA			

  

<b>To Whom Paid</b> Aument for Senate			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> P.O. Box 792			4	4	2016	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> Ryan Aument, STATE SENATE 36th PA			

  

<b>To Whom Paid</b> Friends of Joanna McClinton			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> P.O. Box 1668			4	4	2016	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19139	<b>Description of Expenditure</b> Joanna McClinton, STATE HOUSE 191st PA			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 23,548.82

