Campaign Finance Report

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

Filer Identificati Number :	on	79003	364				port		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, C	Candida	te or Lo	obbyist:		HEA	LTH	ALLI	ANCE PA	C (HO	SP AS	SSN)						
Street Address:	4750 LI	NDLE F	RD PO E	3X 8600														
City:	HARRIS	BURG							State:	PA			Zip Cod	ie: 17	7105-8	600		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA' PRIMARY	Y PRE	-	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	Y	
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	~	
report type)	ANNUAL RE	PORT	7.	Year 2004					NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Ca	ndidat	e:						DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County	,
									МО	DAY	YE	AR		10000				
									11		2	2004		(SEE IN	STRUCTI	ONS FOR (CODES)	
Summary of Expenditures		nd	МО	DAY	YEAR			_	МО	DAY		EAR	FO	R OFFI	CE USE	ONLY		
				1 1		1	I	<u> </u>	4		12	2004						
A. Amount Bro	ught Forwar	d From	Last R	eport				\$			30,1	132.48						
B. Total Monet	ary Contribu	itions A	nd Rec	eipts (From	Sche	dule	(I)	\$			8,5	511.61						
C. Total Funds	Available (S	um Of	Lines A	and B)				\$			38,6	544.09						
D. Total Expen	ditures (Fro	m Sche	dule III	[)				\$			9,8	882.72						
E. Ending Cash	Balance (Su	ubtract	Line D	From Line (C)			\$			28,7	61.37						
F. Value Of In-	Kind Contrib	outions	Receive	ed (From Se	chedu	le II	()	\$				0.00						
G. Unpaid Debt	ts And Obliga	ations ((From S	chedule IV)			\$				0.00			1			
					AFF	IDA	۱۷۶	T SE	CTION									
PART I - If this is		-	•															
I swear (or affirm) correct and comple		ort, inclu	iding the	attached scl	hedule	s file	d on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , true	1
Sworn to and subs	cribed before day of	me this		20							S	Signature	of Perso	n Submit	ting Rep	ort		
				-				- -					Prin	ted Nam	e			-
My Commission Ex		Signatur	e										Ema	il				
	мо)	DA	ΛΥ	YR			_		Are	ea Cod	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of	a cand	idate's	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							7
I swear (or affirm) No 320) as amende		est of m	y knowle	dge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc		ne this										Si	ignature o	of Candid	ate			
	day of 							_					Printe	d Name				
	Sian	nature						-			_							
My Commission Exp	_	- -											Ema	il				
	-	мо	D#	ΛΥ	YR	1		•		Area	Code		Da	aytime T	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
HEALTH ALLIANCE PAC (HOSP ASSN)	From:	То:	4/12/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g Period (1)	\$	555.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)	-	\$	0.00
All Other Contributions (Part B)		\$	2,000.00
TOTAL for the Reporting	Period (2)	\$	2,000.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	0.00
All Other Contributions (Part D)		\$	5,950.00
TOTAL for the Reporting	Period (3)	\$	5,950.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	6.61
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	8,511.61

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

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.

Name of Filing Commit	tee or Candidate	R	eporting	Period			
		Fi	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributin	g Committee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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)

Name of Filing Committee or Candida	te		Rep	orting Pe	eriod			
HEALTH ALLIANCE PAC (HOSP ASSN)		Froi	m:		То):	4/12/2004
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
MS. KATHLEEN C. MEBUS					27.11			
Mailing Address 4750 LINDLE ROAL	P.O. BOX 8600						\$	125.00
City HARRISBURG	State	Zip Code (Plus 4)	3	30	2004		
	PA	171112451						
Full Name of Contributor MS. KENDRIA KURTZ MCWILLIAMS				мо	DAY	YEAR		
Mailing Address 100 EAGLEVILLE R	OAD		\neg				\$	250.00
City EAGLEVILLE	State	Zip Code (Plus 4	,	3	30	2004	i i	230100
, ==	PA	194031829						
Full Name of Contributor			i					
MR. MARTIN J CICCOCIOPPO				МО	DAY	YEAR		
Mailing Address 4750 LINDLE ROAL	D P.O. BOX 8600						\$	250.00
City HARRISBURG	State	Zip Code (Plus 4)	3	30	2004		
	PA	171112451						
Full Name of Contributor				мо	DAY	YEAR		
MR GERALD OETZEL								
Mailing Address 7600 CENTRAL AV	ENUE						\$	100.00
City PHILADELPHIA	State	Zip Code (Plus 4)	3	30	2004		
	PA	191112442						
Full Name of Contributor				мо	DAY	YEAR		
MR. GARRY SCHEIB				1-10	DAI	ILAK		
Mailing Address 3400 SPRUCE STR	EET						\$	100.00
City PHILADELPHIA	State	Zip Code (Plus 4)	3	30	2004		
	PA	191044206						
Full Name of Contributor				мо	DAY	YEAR		
MR. C J URTAUB				МО	DAT	YEAK		
Mailing Address 746 JEFFERSON AV	/ENUE						\$	150.00
City SCRANTON	State	Zip Code (Plus 4)	3	30	2004		
	PA	185101624						

							F	AGE 5
Full Name of Contri	butor			мо	DAY	YEAR		
DR. ELLIOT J. SUS	SMAN M.D.			MO	DAY	YEAK		
Mailing Address	CEDAR CREST BOL	JLEVARD & I-78					\$	250.00
City ALLENTOW	N	State	Zip Code (Plus 4)	3	30	2004		
		PA	181036248					
Full Name of Contri	butor	•	•					
MR. JOSEPH SEBAS	STIANELLI			МО	DAY	YEAR		
Mailing Address	259 NORTH RADNO	OR CHESTER ROAD	SUITE 290				\$	75.00
City RADNOR		State	Zip Code (Plus 4)	4	6	2004		
		PA	190875240					
Full Name of Contri	butor			мо	DAY	YEAR		
MS. SUSAN HUNTS	BERGER							
Mailing Address	4750 LINDLE ROAI)	_	_			\$	75.00
City HARRISBUF	₹G	State	Zip Code (Plus 4)	4	6	2004		
		PA	171112451					
Full Name of Contri	butor			мо	DAY	YEAR		
MS. ANITA COLON				1-10	אמ	ILAK		
Mailing Address	1311 FAIRVIEW C	Г.					\$	150.00
City WOODLYN		State	Zip Code (Plus 4)	4	6	2004		
		PA	190941119					
Full Name of Contri	butor			мо	DAY	VEAD		
TODD A. SHAMASH	l			МО	DAY	YEAR		
Mailing Address	259 RADNOR-CHE	STER ROAD, STE. 2					\$	75.00
City WAYNE		State	Zip Code (Plus 4)	4	6	2004		
		PA	190875240					
Full Name of Contri	butor			мо	DAY	YEAR		
MR. TIMOTHY L. O	HRUM			МО	DAT	IEAR		
Mailing Address	404 WEST NORTH	AVENUE					\$	250.00
City PITTSBURG	:H	State	Zip Code (Plus 4)	4	8	2004		
		PA	152124523					
Full Name of Contri	butor	-				w=a=		
MS. LYNN LEIGHTC	DN			МО	DAY	YEAR		
Mailing Address	4750 LINDLE ROAI	D P.O. BOX 8600					\$	75.00
City HARRISBUF	₹G	State	Zip Code (Plus 4)	4	8	2004		
		PA	171112451					
Full Name of Contri	butor			Ma	DAY	VECT		
ANNE E. FULTZ				МО	DAY	YEAR		
Mailing Address	121 SOUTH BROAD 20TH FLOOR	O ST NORTH AMER	ICAN BUILDING,				\$	75.00
City PHILADELPI		State	Zip Code (Plus 4)	4	8	2004		
		PA	191074518	I	l	I		
		I	1					

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

PAGE TOTAL\$ 2,000.00

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Þ	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							*	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary Pa	age, Sectio	n 3.			\$	0.00

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.)

Name of Filing Committee or Candidate			Repo	orting Pei	riod			
HEALTH ALLIANCE PAC (HOSP ASSN)			Fron	n:		То	: <u>4</u>	/12/2004
				DA	ATE		AMOL	JNT
Full Name of Contributor				мо	DAY	YEAR		1 000 00
MR. STUART H. FINE				МО	DAI	ILAK	\$	1,000.00
Mailing Address 700 LAWN AVENUE				3	30	2004		
City SELLERSVILLE	State	Zip Code (Plu	s 4)			200.		
	PA	189601587						
Employer Name GRAND VIEW HOSPIT	AL			Occupat	ion (CHIEF E	XECUTIVE (OFFICER
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (I	Plus 4)
700 LAWN AVENUE		SELLERS	/ILLE		PA		18960158	7
Full Name of Contributor				мо	DAY	YEAR	\$	200.00
MR. CHARLES B. SULLIVAN							ļ `	200.00
Mailing Address SIXTH AVENUE & SI				3	30	2004		
City READING	State	Zip Code (Plu	s 4)					
	PA I	196121428					I	
Employer Name READING HOSPITAL A	ND MEDICAL CENTE	ĒR		Occupat	ion	PRESIDE	NT & CHIE	F EXECUTI
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (I	Plus 4)
SIXTH AVENUE AND SPRUCE STREET		READING			PA		19611142	3
Full Name of Contributor				мо	DAY	YEAR		
MR. RICHARD REIF				MO	DAT	TEAK	\$	500.00
Mailing Address 595 WEST STATE S	TREET			3	30	2004		
City DOYLESTOWN	State	Zip Code (Plu	s 4)		30	2001		
	PA	189012597						
Employer Name DOYLESTOWN HOSPIT	ΓAL			Occupat	ion	PRESIDE	ENT & CEO	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (I	Plus 4)
595 WEST STATE STREET		DOYLEST	OWN		PA		18901259	7
Full Name of Contributor				мо	DAY	YEAR		F00.00
MR. JAMES M. REDMOND				1-10	DAI	ILAK	\$	500.00
Mailing Address 1016 CHIPPENHAM	ROAD			3	30	2004		
City MECHANICSBURG	State	Zip Code (Plu	s 4)					
	PA	170507687						
Employer Name HOSPITAL & HEALTHS	SYSTEM ASSN OF PE	NNSYLVANIA,	THE	Occupat	ion	SR. VICI	E PRESIDEN	IT, LEGIS
Employer Mailing Address/Principal Plac	e of Business	City			State	Ţ	Zip Code (I	Plus 4)
4750 LINDLE ROADPOST OFFICE BOX 8	600	HARRISB	URG		PA		17111245	L

							_	
Full Name of Contributor				мо	DAY	YEAR	 	500.00
MS. PAULA BUSSARD	D.O. BOY 0600						-	
Mailing Address 4750 LINDLE ROAD City HARRISBURG	State	7in	Code (Plus 4)	3	30	2004		
HARRISBURG		_						
Francisco Nomes - LIGGRITAL & LIGALTUS	PA		1112451	0		CENTOR	\(\(\mathbb{D}\) \(\mathbb{D}\) \(\m	0 DECI!!
Employer Name HOSPITAL & HEALTHS		ININS		Occupat	T	SENIOR	VP, POLICY	
Employer Mailing Address/Principal Plac			City		State		Zip Code (P	•
4750 LINDLE ROADPOST OFFICE BOX 8	3600		HARRISBURG		PA		171112451	
Full Name of Contributor MR. RICHARD L. JONES JR., FACHE				мо	DAY	YEAR	\$	500.00
Mailing Address 1200 YORK ROAD							1	
City ABINGTON	State	Zip	Code (Plus 4)	3	30	2004		
	PA	190	0013788					
Employer Name ABINGTON MEMORIAL	· · · · · · · · · · · · · · · · · · ·			Occupat	ion	PRESIDI	ENT & CHIEF	EXECUTI
Employer Mailing Address/Principal Place			City	1	State	- KEGID	Zip Code (P	
1200 OLD YORK ROAD			ABINGTON		PA		190013788	-
		_	7,821,61,61,		117		1	
Full Name of Contributor DAVID F. SIMON				МО	DAY	YEAR	\$	1,000.00
Mailing Address 259 RADNOR-CHES	TER RD			3	30	2004		
City WAYNE	State	Zip	Code (Plus 4)					
	PA	190	0875240					
Employer Name JEFFERSON HEALTH S	SYSTEM			Occupat	ion	SR. VIC	E PRESIDEN	T & GENE
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code (P	lus 4)
259 RADNOR-CHESTER RD., STE. 2			WAYNE		PA		190875240	
Full Name of Contributor MR. MICHAEL A. SUCHANICK				МО	DAY	YEAR	\$	500.00
Mailing Address 4750 LINDLE ROAD					_		1	
City HARRISBURG	State	Zip	Code (Plus 4)	4	6	2004		
	PA	17	1112428					
Employer Name HOSPITAL & HEALTHS				Occupat	ion (CHIEF C	PERATING (OFFICER
Employer Mailing Address/Principal Plac		T	City		State	02.	Zip Code (P	
4750 LINDLE ROADPOST OFFICE BOX 8			HARRISBURG		PA		171112451	•
		_			1		1	
Full Name of Contributor				МО	DAY	YEAR	\$	500.00
DR. JOHN R. COMBES MD Mailing Address 1905 CHRISTOPHER	DIACE						1	
City HARRISBURG	State	Zin	Code (Plus 4)	4	6	2004		
TARRESDORG	PA	-	1103573					
Employer Name HOSPITAL & HEALTHS				Occupat	ion	SENIOD	MEDICAL A	DVISOP
Employer Mailing Address/Principal Plac		1	City	1 Occupat	State	SLIVIOR	Zip Code (P	
4750 LINDLE ROADPOST OFFICE BOX 8			HARRISBURG		PA		171112451	•
	,,,,,		DANICIONAL		114		1/1112431	
Full Name of Contributor				мо	DAY	YEAR	\$	500.00
DR. IAN G. RAWSON PH.D., CHE	DOAD						-	
Mailing Address 6401 DARLINGTON	·	72:	Code (Disc 4)	4	6	2004		
City PITTSBURGH	State	-	Code (Plus 4)					
	PA	152	2171837	-	·	I 	<u> </u>	
Employer Name HOSPITAL COUNCIL C	OF WESTERN PA			Occupat	ion	PRESID	ENT	
	_				1			
Employer Mailing Address/Principal Place 500 COMMONWEALTH DRIVE	e of Business		City WARRENDALE		State PA		Zip Code (P 150867513	-

Full Name of Contributor				МО	DAY	YEAR	. 250.00
MR. CHARLES B. SI	ULLIVAN			140	DAI	ILAK	\$ 250.00
Mailing Address	SIXTH AVENUE & SF	PRUCE STREETS		4	8	2004	1
City READING		State	Zip Code (Plus 4)] '	J	2001	
		PA	196121428				
Employer Name R	≣R	Occupat	ion	PRESIDE	NT & CHIEF EXECUTI		
Employer Mailing Address/Principal Place of Business			City	State			Zip Code (Plus 4)
SIXTH AVENUE AND SPRUCE STREET R			READING		PA		196111428

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

PAGE TOTAL
\$ 5,950.00

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.

Name of Filing Committee or Candidate	Reporting Period			
HEALTH ALLIANCE PAC (HOSP ASSN)	From:	То:	4/12/2004	
	DATE		AMOUNT	

Full Name			мо	DAY	YEAR	C C1
PNC BANK			140	DAT	TEAR	\$ 6.61
Mailing Address P.O. BOX 8874			4	6	2004	
City CAMP HILL	State	Zip Code (Plus 4)	'		2001	
	PA	170018874				
Receipt Description MARCH 2004 IN	TEREST INCOME			-		

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

PAGE TOTAL \$ 6.61

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

Name of Filing Committee or Candidate	Reporting Period							
HEALTH ALLIANCE PAC (HOSP ASSN)	From:	To:	<u>4/12/2004</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)							
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	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:			To:	:		
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						— \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•	-		•					
Enter Grand Total of Part F (Section 2.		PAGE TOTAL							
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Place of Business			ty	Stat	e Zi _l	Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL			
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
HEALTH ALLIANCE PAC (HOSP ASSN)			From			То:	4/12/2004	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
FRIENDS OF STEVE BARRAR								
Mailing Address P.O. BOX 545			3	26	2004	\$	200.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
	PA	17108	STEPHE	N BARRAR	, STATE I	HOUSE 16	OTH PA	
To Whom Paid FRIENDS OF VINCE BIANCUCCI			мо	DAY	YEAR			
Mailing Address 226 PLEASANT DRIV	/E		3	26	2004	\$	200.00	
City ALIQUIPPA	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15001	VINCENT BIANCUCCI, STATE HOUSE 15TH PA					
To Whom Paid FRIENDS OF JIM RHOADES COMMITTE	<u> </u>		МО	DAY	YEAR			
Mailing Address P.O. BOX 792			3	26	2004	\$	400.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
	PA	17108	JAMES RHOADES, STATE SENATE 29TH PA				TH PA	
To Whom Paid HOUSE DEMOCRATIC CAMPAIGN CTE			МО	DAY	YEAR			
Mailing Address P.O. BOX 555 FEDE	RAL SQUARE STATION	N	3	26	2004	\$	500.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
PA 171080555			HDCC 3,	/22/04 RE	CEPTION			
To Whom Paid			МО	DAY	YEAR	-		
FRIENDS OF GEORGE KENNEY				DAT	ILAK			
Mailing Address 13420 PRIESTLY STREET				26	2004	\$	500.00	

	PA	19116	GEORGE KENNEY, STATE HOUSE 170TH PA					
To Whom Paid	мо	DAY	YEAR					
LEVDANSKY FOR LEGISLATURE				DAT	ILAK			
Mailing Address 5118 DORRIS DRIVE			3	26	2004	\$	500.00	
City ELIZABETH	State	Zip Code (Plus 4)) Description of Expenditure					
	PA	15037	DAVID LEVDANSKY, STATE HOUSE 39TH PA					

Zip Code (Plus 4)

State PA **Description of Expenditure**

City

PHILADELPHIA

								OL 13		
	om Paid			мо	DAY	YEAR				
MIKE STURLA FOR STATE REPRESENTATIVE Mailing Address P.O. BOX 206					26	2004	\$	250.00		
City	LANCASTER	State	Zip Code (Plus 4)	Description of ExpenditureP. STURLA, STATE HOUSE 96TH PA						
		PA	17608	P. STUR	LA, STATE	HOUSE	961H PA			
	om Paid :NS FOR JAKE WHEATLEY			мо	DAY	YEAR				
Mailing	Address P.O. BOX 53044			3	26	2004	\$	200.00		
City	PITTSBURGH	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure				
		PA	15219	JAKE WI	HEATLEY,	STATE HO	OUSE 19TH	l PA		
	om Paid OS OF JEFF PICCOLA			мо	DAY	YEAR				
Mailing	Address P.O. BOX 741			3	26	2004	\$	3,000.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure				
		PA	17108	JEFFREY	PICCOLA	, STATE S	SENATE 15	TH PA		
	om Paid OS FOR DENNIS LEH			мо	DAY	YEAR				
Mailing	Address 3 MAGNOLIA COURT	-		3	26	2004	\$	300.00		
City DOUGLASSVILLE State Zip Code (Plus 4)				Description of Expenditure						
		PA	19518	DENNIS LEH, STATE HOUSE 130TH PA						
	om Paid OS TO ELECT NAILOR			мо	DAY	YEAR				
Mailing	Address 506 COCKLIN STREE	ΞΤ		3	26	2004	\$	150.00		
City	MECHANICSBURG	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	17055	JERRY NAILOR, STATE HOUSE 88TH PA				PA		
	om Paid E FOR NICKOL			мо	DAY	YEAR				
Mailing	Address C/O BARBARA METZ	LER 860 RAVER LANE		3	26	2004	\$	500.00		
City	GLEN ROCKS	State	Zip Code (Plus 4)	Descript	ion of Exp	 enditure				
		PA	17327	STEVEN	NICKOL,	STATE HO	OUSE 193F	RD PA		
	om Paid S FOR REPRESENTATIVE			мо	DAY	YEAR				
	Address 314 WASHINGTON A	AVENUE		3	26	2004	\$	250.00		
City		State	Zip Code (Plus 4)		tion of Exp					
City MIFFLINTOWN State Zip Code (Plus 4) PA 17059					ARRIS, ST		SF 82ND I	ΡΑ		
To Whom Paid										
PNC BANK				МО	DAY	YEAR				
Mailing	Address P.O. BOX 8874			4	6	2004	\$	32.72		
City	CAMP HILL	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure	I			
		PA	170018874	MARCH	2004 BAN	K FEES				
_										

								,L 10				
To Wh	nom Paid			мо	DAY	YEAR						
FRIENDS OF BOB FLICK												
Mailing Address P.O. BOX 34					8	2004	\$	300.00				
City DEVON State Zip Code (Plus 4)					Description of Expenditure							
		PA	19333	ROBERT	FLICK, ST	TATE HOL	JSE 167TH	PA				
To Wh	nom Paid			МО	DAY	YEAR						
FRIEN	NDS OF BILL ADOLPH, JR.											
Mailin	ng Address P.O. BOX 545			4	8	2004	\$	300.00				
City	HARRISBURG	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure						
		PA	17108	WILLIAN	4 ADOLPH	, STATE H	HOUSE 165	TH PA				
To Wi	nom Paid			мо	DAY	YEAR						
ARMS	TRONG FOR SENATE COMM	ITTEE										
Mailin	g Address R.D. 1 BOX 43	3		4	8	2004	\$	350.00				
City	REFTON	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure						
		PA	17568	GIBSON	ARMSTRO	NG, STA	TE SENATE	13RD PA				
To W	nom Paid			мо	DAY	YEAR						
COMM	MITTEE TO ELECT JEFF HABA	ΛΥ										
Mailin	g Address 617 SEIFRIED	LANE		4	8	2004	\$	300.00				
City	PITTSBURGH	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure						
		PA	15215	JEFFREY	' HABAY, S	STATE HO	USE 30TH	PA				
To W	nom Paid			мо	DAY	YEAR						
COMM	1ITTEE TO RE-ELECT JOHN 1	TAYLOR										
Mailin	ng Address 1205 LOCUST	STREET SUITE 100		4	8	2004	\$	100.00				
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure								
		PA	19107	JOHN T	AYLOR, ST	ATE HOU	SE 177TH F	PA				
To W	nom Paid			мо	DAY	YEAR						
COMM	ITTEE TO RE-ELECT JOHN 1	ΓAYLOR										
Mailin	g Address 1205 LOCUST	STREET SUITE 100		4	8	2004	\$	500.00				
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure						
		PA	19107	JOHN T	AYLOR, ST.	ATE HOU	SE 177TH F	PA				
To W	nom Paid			мо	DAY	YEAR						
СОММ	1ITTEE TO ELECT JOHN WOZ	ZNIAK		1-10	- DA1	ILAK						
Mailin	g Address P.O. BOX 545			4	8	2004	\$	300.00				
City	HARRISBURG	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure						
PA 17108			JOHN W	OZNIAK, S	STATE SE	NATE 35TH	PA					
To Whom Paid				мо	DAY	YEAR						
FRIENDS OF EUENE MCGILL				HU	DAT	ILAK						
Mailin	g Address P.O. BOX 545			4	8	2004	\$	200.00				
City	HARRISBURG	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure						
		PA	17108	EUGENE	MCGILL,	STATE HO	OUSE 151S	T PA				
		•										

To Whom Paid				DAY	YEAR			
FRIENDS OF SCOTT PETRI			МО	DAI	ILAK			
Mailing Address P.O. BOX 161	Mailing Address P.O. BOX 161			8	2004	\$	300.00	
City RICHBORO	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	18954	SCOTT PETRI, STATE HOUSE 178TH PA				1 PA	
To Whom Paid				DAY	YEAR			
THE COMMITTEE TO ELECT KELLY LEWI	S		МО					
Mailing Address P.O. BOX 474			4	8	2004	\$	250.00	
City DELAWARE WATER GAP	State	Zip Code (Plus 4)	Description of Expenditure					
	PA 183270474				KELLY LEWIS, STATE HOUSE 189TH PA			
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	9,882.72	