Campaign Finance Report

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

						ed By :				СОМ	ITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:	Н	lospita	1 & He	ealthsyst	em Ass	oc of	PA PA	С (НАРА	.C)			
Street Address:															
City:	Harrisburg						State:	PA			Zip Co	de: 1	7101		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	RE-	2. X	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRELECTION	RE-	5.	30 DA		POST-	POST- 6.			TERMINATION REPORT?		No	Y
report type)	ANNUAL REPORT	7.	Year 2022				NG METH						/	DISKE	TTE
Name of Office S	Sought by Candida	te:					DATE C	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							МО	DAY	YE	AR					
							11		8	2022		(SEE I	ISTRUCTI	ONS FOR C	ODES)
	Receipts and	МО	DAY YEA	AR			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	s trom:		3 29	20	22 T	0	5		2	2022					
A. Amount Bro	ught Forward Froi	n Last R	eport			\$			61,0	59.26					
B. Total Monet	ary Contributions	And Rec	eipts (From Sch	ned	ule I)	\$			1,0	61.38					
C. Total Funds Available (Sum Of Lines A and B)									62,1	20.64					
D. Total Expenditures (From Schedule III)									17,5	77.28					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			44,5	43.36					
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sched	lule	II)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1		
			AF	FI	DAVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. If	this is	a Cai	ndidate r	eport, d	candio	date sig	jn here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached schedul	les 1	filed on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me this day of	5	20						s	ignature	of Perso	n Submit	tting Rep	oort	
	Signatu	ire				-					Prin	ted Nam	e		
My Commission Ex	cpires ————					_					Ema	il			
	МО	D.	AY Y	'R				Ar	ea Cod	e	Daytim	e Telep	hone Nu	mber	
Part II- If this is	a report of a can	didate's	authorized Com	nmi	ttee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief th	nis p	olitical	comm	ittee has r	ot viola	ted an	y provis	ions of th	e act of I	June 3,1	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20							S	ignature (of Candid	late		
-						_					Printe	d Name			
My Commission Exp	Signature					-					Ema	il			
•						_									
	МО	D	AY Y	ΥR				Area	Code		D	aytime 1	Telephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From:	<u>3/29/202</u>	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	60.00
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)			\$	0.00
TOTAL for the Reporting	(2)	\$	0.00	
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)			\$	1,000.00
TOTAL for the Reporting	Period	(3)	\$	1,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	1.38
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,061.38

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 Committee or Candida	1	Reporting Period						
		-1	From:		То	•		
		•		DATE			AMOUNT	
Full Name of Contributing 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 Candidate		Rep	oorting P	eriod			
			Fro	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
							$\overline{}$	PAGE TOTAL

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

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:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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.)

Name of Filing Committee or Candidate				eporting Period							
Hospital & Healthsystem Assoc of PA PAC (HAPAC)				n:	<u>3/29/2</u>	022 To:	<u>5/2/2022</u>				
				D	ATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR	_	1 000 00			
Ms. Heather Smith MBA, CHFP, CPPS						12/110	\$	1,000.00			
Mailing Address				4	14	2022					
City Meyersdale	State	Zip Code (Plus	4)] ~	14	2022					
	l _{PA}	155521247									
Employer Name Conemaugh Meyer	sdale Medical Center			Occupat	ion	Chief Exe	cutiv	e Officer			

City

Meyersdale

State

PΑ

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

Employer Mailing Address/Principal Place of Business

PAGE TOTAL
\$ 1,000.00

Zip Code (Plus 4)

155521249

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 of	or Candidate			Reporti	ing Perio	d			
Hospital & Healthsystem A	ssoc of PA PAC (HA	APAC)		From:		3/29/202	<u>2</u> To:		5/2/2022
			•		D	ATE			AMOUNT
Full Name					мо	DAY	YEAR	\$	0.49
FNB-First National Bank					1-10	JA1	ILAK	*	0.49
Mailing Address					3	31	2022	<u>.</u>	
City Harrisburg	State	e	Zip Code (I	Plus 4)					
	PA		17111						
Receipt Description Mar	ch 2022 Interest I	ncome							
Full Name					мо	DAY	YEAR	T.	0.24
FNB-First National Bank					МО	DAT	TEAR	\$	0.24
Mailing Address					3	31	2022		
City Harrisburg	State	e	Zip Code (I	Plus 4)					
	PA		17111						
Receipt Description Man	ch 2022 Interest I	ncome				•	•		
Full Name								Τ.	
FNB-First National Bank					МО	DAY	YEAR	\$	0.46
Mailing Address					4	29	2022	,]	
City Harrisburg	State	e	Zip Code (I	Plus 4)	•			Ī	
	PA		17111						
Receipt Description Apri	il 2022 Interest Inc	come		Į.					
Full Name						DAY	VEAD	T.	
FNB-First National Bank					МО	DAY	YEAR	\$	0.19
Mailing Address					4	29	2022	,]	
City Harrisburg	State	e	Zip Code (I	Plus 4)	•			Ī	
	PA		17111						
Receipt Description Apri	il 2022 Interest Inc	come	<u> </u>						
F-1 C	Cala 1	Datalla d C	P	C4'	4				PAGE TOTAL
Enter Grand Total of Part E	on Schedule I, I	Detailed Summ	ary Page,	Section	4.			\$	1.38
									1.00

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 Perio	d									
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From:	3/29/2022 To :	5/2/2022								
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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							
						То:		
				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 on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate				porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From	3/29/2022	То:	<u>5/2/2022</u>

					DATE		AMOUNT	
To Whom Paid				мо	DAY	YEAR		
Citizens for Hughes				М		1 Z / LIK		
Mailing Address				3	31	2022	\$	500.00
City Philadelph	ia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	191013031	Vincent Hughes, STATE SENATE 7th PA				
To Whom Paid				мо	DAY	YEAR		
Senate Republicar	n Campaign Committe	e		МО		ILAK		
Mailing Address				3	31	2022	\$	5,000.00
City Harrisburg		State	Zip Code (Plus 4)	Description of Expenditure				
		PA	17108	SRCC-Reception 4/12/22				
To Whom Paid				МО	DAY	YEAR		
Friends of Marci M	lustello			1-10		12/11		
Mailing Address				3	31	2022	\$	250.00
City Butler State Zip Code (Plus 4)				Description of Expenditure				
		PA	16001	Marci Mustello, STATE HOUSE 11th PA				PA .
To Whom Paid				мо	DAY	YEAR		
Friends of Martin	Causer			1-10		I Z / LIK		
Mailing Address				3	31	2022	\$	500.00
City Dillsburg		State	Zip Code (Plus 4)) Description of Expenditure				
		PA	17019	Martin Causer, STATE HOUSE 67th PA				
To Whom Paid				МО	DAY	YEAR		
Citizens for Lynda	Schlegel-Culver			П		12/11		
Mailing Address				3	31	2022	\$	250.00
City Sunbury		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
		PA	17801	Lynda S	Schlegel-Cu	ılver, STA	ATE HOUS	E 108th PA
To Whom Paid				мо	DAY	YEAR		
Friends of Peter Schweyer				1.13				
Mailing Address				3	31	2022	\$	500.00
City Harrisburg		State	Zip Code (Plus 4)	4) Description of Expenditure				
		PA	17108	Peter Schweyer, STATE HOUSE 22nd PA				PA

To Wi	nom Paid			мо	DAY	YEAR				
Friends of Greg Rothman				140	DAI	ILAK				
Mailing Address				3	31	2022	\$	250.00		
City	City Harrisburg State Zip Code (Plus 4)				Description of Expenditure					
		PA	17108	Greg Rothman, STATE HOUSE 87th PA						
To Wi	nom Paid			МО	DAY	YEAR				
Friend	ds of Ben Sanchez			MO	DAT	TEAR				
Mailin	g Address			3	31	2022	\$	250.00		
City Jenkintown State Zip Code (Plus 4)			Description of Expenditure							
		PA	19046	Benjamin Sanchez, STATE HOUSE 153rd PA						
To Wi	nom Paid				DAY	YEAR				
Citize	ns for Kail			МО	DAY	TEAK				
Mailin	g Address			3	31	2022	\$	500.00		
City	Beaver	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	15009	Joshua Kail, STATE HOUSE 15th PA						
To Wi	nom Paid			МО	DAY	YEAR				
Friend	ds of Craig Williams			MO	DAT	TEAR				
Mailin	g Address			3	31	2022	\$	250.00		
City	Harrisburg	Zip Code (Plus 4)	Description of Expenditure							
		PA	17108	Craig Williams, STATE HOUSE 160th PA						
To Wi	nom Paid				l _{DAY}	VEAD				
FNB-F	First National Bank			МО	DAY	YEAR				
Mailin	g Address			4	1	2022	\$	153.50		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
		PA	17111	April 2022 Bank Fees - Heartland						
To Wi	nom Paid			МО	DAY	YEAR				
FNB-F	First National Bank			MO	DAT	TEAR				
Mailin	g Address			4	1	2022	\$	50.25		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	ı enditure	l			
	j	PA	17111	April 20	22 Bank F	ees - Hea	artland			
To Wi	nom Paid	•			l					
FNB-F	First National Bank			МО	DAY	YEAR				
Mailing Address				4	4	2022	\$	10.00		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
PA 17111				April 2022 Bank Fees - Authorize.net						
To Whom Paid				MO	DAY	YEAR				
FNB-First National Bank				МО	DAT	TEAK				
Mailing Address				4	4	2022	\$	5.07		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı			
PA 17111				April 20	April 2022 Bank Fees - Authorize.net					

To Whom Paid					DAY	YEAR				
Senate Democratic Campaign Committee				МО						
Mailing Address				4	20	2022	\$	1,000.00		
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp					
PA 19102					SDCC Reception 4/4/22					
To Wh	nom Paid			мо	DAY	YEAR				
Friend	ds of Bryan Cutler									
Mailin	g Address			4	20	2022	\$	1,000.00		
City Harrisburg State Zip Code (Plus 4)			Description of Expenditure							
		PA	17108	Bryan Cutler, STATE HOUSE 100th PA						
To Wh	nom Paid			l MO	DAY	YEAR				
Friend	ds of Kate Klunk			МО	DAY	TEAK				
Mailin	g Address			4	20	2022	\$	500.00		
City	Hanover	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17331	Kate Klı	ınk, STATI	HOUSE	169th PA			
To W	nom Paid			МО	DAY	YEAR				
Friend	ds of Kristin Phillips-Hill (Sena	te)		МО	DAY	TEAR				
Mailin	g Address			4	20	2022	\$	1,000.00		
City	Jacobus	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	17407	Kristin Hill, STATE SENATE 28th PA						
To W	nom Paid				DAY	VEAD				
Friends of Donna Bullock				МО	DAY	YEAR				
Mailin	g Address			4	20	2022	\$	500.00		
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
		PA	19102	Donna Bullock, STATE HOUSE 195th PA						
To W	nom Paid				DAY	VEAD				
House	e Democratic Campaign Cte			МО	DAY	YEAR				
Mailin	g Address			4	27	2022	\$	1,000.00		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	-	PA	171080555	House [Democratio	Campaig	gn Reception	n - 4/25/22		
To Wh	nom Paid			МС	DAY	VEAS				
Team	Gillespie			МО	DAY	YEAR				
Mailing Address				4	27	2022	\$	300.00		
City	York	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
		PA	17406	Keith G	llespie, ST	ATE HOU	JSE 47th PA			
To Whom Paid				MO	DAY	YEAR				
Citizens for Pat Browne-Senate				МО	DAT	TEAK				
Mailing Address				4	27	2022	\$	1,000.00		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	I			
		PA	17108	Patrick	Browne, S	TATE SEN	NATE 16th P	'A		
		•	•	•						

To W	nom Paid			МО	DAY	YEAR			
People for Matzie				140		ILAK			
Mailing Address				4	27	2022	\$	500.00	
City	Ambridge	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	15003	Robert Matzie, STATE HOUSE 16th PA					
To Wh	nom Paid			мо	DAY	YEAR			
Comn	nittee to Elect Joe Emrick			МО		ILAK			
Mailin	g Address			4	27	2022	\$	300.00	
City Nazareth State Zip Code (Plus 4)			Description of Expenditure						
		PA	18064	Joe Emrick, STATE HOUSE 137th PA					
To W	nom Paid			l MO	DAY	YEAR			
Friend	ds of Fee			МО	DAY	TEAK			
Mailin	g Address			4	27	2022	\$	250.00	
City	Manheim	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	17545	Mindy F	ee, STATE	HOUSE 3	37th PA		
To Wh	nom Paid			МО	DAY	YEAR			
Friend	ds of Joanna McClinton			1-10		I Z / II K			
Mailin	g Address			4	27	2022	\$	1,000.00	
City	Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	19139	Joanna McClinton, STATE HOUSE 191st PA					
To W	nom Paid			МО	DAY	YEAR			
Тахра	yers for Torren			1-10		12/11			
Mailin	g Address			4	27	2022	\$	250.00	
City	New Oxford	State	Zip Code (Plus 4)	4) Description of Expenditure					
		PA	17350	Torren Ecker, STATE HOUSE 193rd PA					
To Wi	nom Paid			МО	DAY	YEAR			
We Be	elieve in Lori Mizgorski			1-10		ILAK			
Mailin	g Address			4	27	2022	\$	300.00	
City	Glenshaw	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	15116	Lori Miz	gorski, ST	ATE HOU	SE 30th PA		
To Wh	nom Paid			мо	DAY	YEAR			
FNB-F	First National Bank			МО	DAT	TEAR			
Mailin	g Address			5	2	2022	\$	153.50	
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
PA 17111				May 2022 Bank Fees - Heartland					
To Whom Paid				МО	DAY	YEAR			
FNB-First National Bank						LAK			
Mailing Address				5	2	2022	\$	54.96	
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
PA 17111 May 2022 Bank Fees - Hea					es - Hea	rtland			

PAGE 15

		PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	17,577.28	