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			Repor		CAI	NDI	DATE		СОМІ	4ITTEE	✓ [LOE	3BYI:	ST	
Name of Filing C	ommittee, Candida	ite or L	obbyist:	İ	Hospita	al & H	ealths	yste	em Ass	oc o	PA PA	C (HAPA	C)				
Street Address:	30 North Third	l Street	Suite 600				_										
City:	Harrisburg						State	e:	PA		Zip Code: 17101			_			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 D PRIM		F	POST-	3.		AMENDMENT REPORT?		Yes	1	No	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D	AY TION				TERMINA REPORT	Yes		No	\		
report type)	ANNUAL REPORT	7.	Year 2023				NG ME CHEC					PAPER		V	DI	SKETT	E
Name of Office S	ought by Candidat	e:			•		DAT	ΕO	F ELE	СТІС	N	District Number	Office Code	Pa	arty C	ode Co	ounty ode
							МО		DAY	YI	EAR						
								11	,	7	2023		(SEE IN	STRUCT	IONS	FOR COD	ES)
	Receipts and	МО	DAY	YEAR			МО		DAY	Y	EAR	FC	R OFFI	CE US	E ON	LY	
Expenditures	Trom:		3 28	20	023	ГО		5		1	2023						
A. Amount Bro	ught Forward From	Last R	eport			\$				70,	001.21						
B. Total Moneta	ary Contributions A	and Rec	eipts (From	Sched	dule I)	\$	5			34,	575.70						
C. Total Funds Available (Sum Of Lines A and B)						\$	5			104,	576.91						
D. Total Expend	ditures (From Sche	dule II	I)			\$	5			11,2	267.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$	5			93,3	309.91						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$	5				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')		\$	5				0.00			<u> </u>			
				AFF:	IDAV:	IT SE	CTIC	NC									
	a Committee repo	•	_														
I swear (or affirm) correct and comple	that this report, incluete.	uding the	attached sc	hedules	filed or	paper	or by e	elect	ronic m	edium	, are to	the best o	f my kno	wledge	e and	belief ,	true
Sworn to and subs	cribed before me this day of		20							5	Signature	of Perso	n Submit	ting Re	eport		
	Signatur	e				_						Prin	ted Name	e			
My Commission Ex	pires					_						Ema	il				
	МО	D	AY	YR					Are	ea Co	de	Daytin	ie Telepl	none N	umbe	r	
Part II- If this is	a report of a cand	idate's	authorized	Comm	ittee, (Candio	late sh	nall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	y knowle	edge and beli	ef this	politica	comn	nittee h	as n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,	1937	(P.L. 1	333,
Sworn to and subscribed before me this day of 20											s	ignature (of Candid	ate			_
						_						Printe	d Name				
My Commission Exp	Signature ires					_						Ema	il				-
	мо	D	AY	YR		_			Area	Code		D	aytime T	elepho	ne N	umber	$-\mid$

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:	3/28/202	<u>3</u> To:	5/1/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	25.00
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)			\$	200.00
TOTAL for the Reporting	g Period	(2)	\$	200.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	30,000.00
All Other Contributions (Part D)			\$	2,850.00
TOTAL for the Reporting	g Period	(3)	\$	32,850.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	1,500.70
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			\$	34,575.70

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	Reporting Period						
			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

Reporting Period

Hospital & Healthsystem Assoc of PA PAC (HAPAC)

From:

DATE

3/28/2023 **To:**

\$

5/1/2023

AMOUNT

Full Name of Contributor Mr. David Hunt				DAY	YEAR	
Mailing Address 349 Beech Avenu	e					\$ 200.00
City Hershey	State	Zip Code (Plus 4)	4	18	2023	
	PA	170331608				

PAGE TOTAL 200.00

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

PART C

Reporting Period

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.

Hospital & Healthsystem Assoc of PA PAC (HAPAC)		Froi	m: <u>3</u>	/28/2023	To:	<u>5/1/</u>	<u>2023</u>
			ı	ATE		AMOU	NT
Full Name of Contributing Committee	мо	DAY	YEAR				
HighMark Health PAC						 	25,000.00
Mailing Address 1800 Center Street			3	28	2023		,
City Camp Hill	State	Zip Code (Plus			2023		
	PA	170890089					

Full Name of Contributing Committee	мо	DAY	YEAR			
Select Medical PAC				\$ 5,000.00		
Mailing Address 4714 Gettysburg Road				26	2023	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City Mechanicsburg	State	Zip Code (Plus 4)				
PA 17055						

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. }$

Name of Filing Committee or Candidate

PAGE TOTAL \$ 30,000.00

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 Per	riod			
Hospital & Healthsystem Assoc of PA PA	AC (HAPAC)		Fron	n:	<u>3/28/2</u>	023 To: 5/1		5/1/2023
				DA	TE		АМО	DUNT
Full Name of Contributor				мо	DAY	YEAR	s	350.00
Rachael E Lattanzio DNP						1 = 7 (1)] *	350.00
Mailing Address 2845 Deer Leap Lan	е			4	3	2023		
City York	State	Zip Code (Plus	4)		J	2023		
	PA	174039579						
Employer Name Self-employed REL Fit	ness			Occupat	ion	Fitness ⁻	Trainer	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code	(Plus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	2,500.00
Dr. Jaewon Ryu MD, JD							-	,
Mailing Address 147 Glencoe Road	G-1-	The Code (Disc	4)	4	26	2023		
City Lewisburg	State	Zip Code (Plus	4)					
	PA I	178378515					<u> </u>	
Employer Name Geisinger				Occupat	ion	Presiden	nt and Chi	ef Execu
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code	(Plus 4)
100 North Academy Avenue		Danville			PA		1782298	00
Enter Grand Total of Part C on Scheo	lule I, Detailed Su	ımmary Page,	Section	on 3.		4		GE TOTAL 2,850.00

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			Report	ing Perio	od			
Hospital & Healthsystem Assoc of PA PA	AC (HAPAC)		From:		3/28/202	<u>:3</u> To:		5/1/2023
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.23
FNB-First National Bank					57.1	12/	_	, 0.23
Mailing Address 4250 Derry Street	r			3	31	2023	3	
City Harrisburg	State	Zip Code (Plus 4)					
	PA	17111						
Receipt Description March 2023 Inte	rest Income	ļ			l	ı		
Full Name				мо	DAY	YEAR	\$	1 000 00
Citizens for Grove				МО	DAT	TEAR	*	1,000.00
Mailing Address P.O. Box 412				4	25	2023	3	
City Harrisburg	State	Zip Code (Plus 4)					
	PA	17108						
Receipt Description Void - Citizens for	r Grove					•		
Full Name					DAY	VEAD	Π.	
Committee to Elect Ryan Bizzarro				МО	DAY	YEAR	\$	500.00
Mailing Address 3120 Broadlawn Drive	9			4	25	2023	3	
City Erie	State	Zip Code (Plus 4)	•				
	PA	16506						
Receipt Description Void - Committe	ı e to Elect Ryan Bizzar	ro					<u> </u>	
Full Name		·						
FNB-First National Bank				МО	DAY	YEAR	\$	0.47
Mailing Address 4250 Derry Street				4	28	2023	\Box	
City Harrisburg	State	Zip Code (Plus 4)	7	20	2025	<u> </u>	
	PA	17111						
Receipt Description April 2023 Interes	est Income	!			<u>I</u>	<u> </u>		
								PAGE TOTAL
Enter Grand Total of Part E on Schedu	le I, Detailed Sumn	ary Page,	Section	4.			¢	
						I	\$	1.500.70

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	od	
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From:	3/28/2023 To:	<u>5/1/2023</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	lame of Filing Committee or Candidate Re					Reporting Period					
	F					То:					
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						7 \$		0.00			
City	State	Zip Code (Plus 4)									
Description of Contribution:	-	-	•	•	•						
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L			
Section 2.						\$		0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ı			Re	porting	g Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor			•		Occu	pation			
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	ip Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	nedule II, In-K	ind	Contributions D	etaile	ed				PAGE TOTAL
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	3/28/2023	То:	<u>5/1/2023</u>

				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Citizens for Grove			1.0				
Mailing Address P.O. Box 412			3	28	2023	\$	1,000.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	Rubicor	n 3/20/23			
To Whom Paid			мо	DAY	YEAR		
People for Abigail Salisbury			MO	DAI	ILAK		
Mailing Address 7800 Edgewo	ood Avenue		3	28	2023	\$	250.00
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l .	
	PA	15218	Old Tov	vn Deli, 3/2	21/23		
To Whom Paid			мо	DAY	YEAR		
FNB-First National Bank			MO	DAI	ILAK		
Mailing Address 4250 Derry S	treet		4	3	2023	\$	153.50
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17111	April 20)23 Bank F	ees: Hea	rtland	
To Whom Paid			МО	DAY	YEAR		
FNB-First National Bank			МО	DAY	TEAK		
Mailing Address 4250 Derry Street			4	4	2023	\$	10.00
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17111	April 20)23 Bank F	ees: Auth	norize.net	
To Whom Paid			МО	DAY	YEAR		
Senate Democratic Campaign Co	ommittee		МО	DAT	TEAR		
Mailing Address P.O. Box 593	8		4	13	2023	\$	1,000.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı	
	PA	19102	Harrisb	urg Hilton	4/25/23		
To Whom Paid			МС	DAY	YEAR		
Senate Republican Campaign Co	mmittee		МО	DAT	TEAR		
Mailing Address P.O. Box 792	Federal Square Station	on	4	13	2023	\$	1,000.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	l	
Ţ	PA	17108		hore Count		-/25/23	
	-	-	-				

							JL 12	
To Whom Paid			МО	DAY	YEAR			
Baker for Senate Committee				13			500.00	
Mailing Address P.O. Box 792					2023	\$	500.00	
City Harrisburg	State	Zip Code (Plus 4) Description of Expenditure						
	PA	17108	Rubicon	4/25/23				
To Whom Paid HRCC			мо	DAY	YEAR			
Mailing Address P.O. Box 117			4	13	2023	\$	500.00	
	·							
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure Historic King Mansion 4/24/23					
To Whom Paid	PA	17108	HISTORIC	King Mans	ion 4/24,	/23		
HRCC				DAY	YEAR			
Mailing Address P.O. Box 117			4	13	2023	\$	1,000.00	
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17108	PA Chamber Courtyard 5/1/23					
To Whom Paid			мо	DAY	YEAR			
Friends of Martin Causer			МО	DAI	ILAK			
Mailing Address 430 Franklin	Church Road		4	13	2023	\$	500.00	
City Dillsburg	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17019	Stocks	on Second	4/25/23			
To Whom Paid			МО	DAY	YEAR			
Friends of Gene Yaw for Senate			110		,			
Mailing Address P.O. Box 792			4	13	2023	\$	500.00	
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17108	Rubicon	4/24/23				
To Whom Paid			МО	DAY	YEAR			
Volunteers for Argall - Senate								
Mailing Address P.O. Box 241	Ī		4	13	2023	\$	500.00	
City Tamaqua	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	18252	Hilton H	larrisburg	1700 Ste	akhouse 3/	30/23	
To Whom Paid			мо	DAY	YEAR			
Friends of Kristin Phillips-Hill (Senate)					7 = 7 1111			
Mailing Address P.O. Box 156			4	13	2023	\$	500.00	
City Jacobus	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17407	Cafe Fre	esco 4/25/	23			
To Whom Paid			мо	DAY	YEAR			
Friends of Martina White			140		LAN			
Mailing Address P.O. Box 160)41		4	13	2023	\$	150.00	
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19114	National Society of Colonial Dames 4/13/23					
		· · · · · · · · · · · · · · · · · · ·	_					

To Whom Paid Friends of Joe Pittman Mailing Address P. O. Box 792 City Harrisburg State PA To Whom Paid Friends of Bridget Malloy Kosierowski Mailing Address P.O. Box 38 P.O. Box 38 P.O. Box 38 Application of Expenditure Downtown Harrisburg 4/17/23 To Whom Paid Friends of Bridget Malloy Kosierowski Application of Expenditure Downtown Harrisburg 4/17/23 Friends of Bridget Malloy Kosierowski Application of Expenditure Downtown Harrisburg 4/17/23 Friends of Bridget Malloy Kosierowski	1,000.00
Friends of Joe Pittman Mailing Address P. O. Box 792 State Zip Code (Plus 4) Description of Expenditure PA 17108 To Whom Paid Friends of Bridget Malloy Kosierowski Mailing Address P.O. Box 38 Friends of P.O. Box 38	1,000.00
City Harrisburg State PA Zip Code (Plus 4) Description of Expenditure Downtown Harrisburg 4/17/23 To Whom Paid Friends of Bridget Malloy Kosierowski Mailing Address P.O. Box 38 Zip Code (Plus 4) Downtown Harrisburg 4/17/23 **MO DAY YEAR 4 13 2023 **	1,000.00
To Whom Paid Friends of Bridget Malloy Kosierowski Mailing Address P.O. Box 38 PA 17108 Downtown Harrisburg 4/17/23 MO DAY YEAR 4 13 2023 \$	
To Whom Paid Friends of Bridget Malloy Kosierowski Mailing Address P.O. Box 38 P.O. Box 38 MO DAY YEAR 4 13 2023	
Friends of Bridget Malloy Kosierowski Mo DAY YEAR Mailing Address P.O. Box 38 4 13 2023 \$	
Friends of Bridget Malloy Kosierowski Mailing Address P.O. Box 38 4 13 2023 *	
15 2025	
	250.00
City Clarks Summit State Zip Code (Plus 4) Description of Expenditure	
PA 18411 McGrath's Pub 3/28/23	
To Whom Paid MO DAY YEAR	
Citizens for Grove	
Mailing Address P.O. Box 412 4 25 2023 \$	1,000.00
City Harrisburg State Zip Code (Plus 4) Description of Expenditure	
PA 17108 Rubicon 3/20/23	
To Whom Paid MO DAY YEAR	
Committee to Elect Ryan Bizzarro	
Mailing Address3120 Broadlawn Drive4252023\$	500.00
City Erie State Zip Code (Plus 4) Description of Expenditure	
PA 16506 McGrath's Pub 4/25/23	
To Whom Paid MO DAY YEAR	
Friends of Milou Mackenzie	
Mailing Address2050 Dennis Lane4252023\$	300.00
City Bethlehem State Zip Code (Plus 4) Description of Expenditure	
PA 18015 Deco Grab and Go 5/2/23	
To Whom Paid MO DAY YEAR	
To Whom Paid Friends of Tracy Pennycuick MO DAY YEAR	
MO DAY YEAR	500.00
Friends of Tracy Pennycuick MO DAY YEAR	500.00
Friends of Tracy Pennycuick Mo DAY YEAR Mailing Address 937 Clubhouse Drive 4 25 2023 **	500.00
Friends of Tracy Pennycuick Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR 4 25 2023 \$ City Harleysville State PA 19438 Description of Expenditure Lux Rooftop 5/8/23	500.00
Friends of Tracy Pennycuick Mailing Address 937 Clubhouse Drive City Harleysville State Zip Code (Plus 4) Description of Expenditure PA 19438 Lux Rooftop 5/8/23	500.00
Friends of Tracy Pennycuick Mo DAY YEAR Mailing Address 937 Clubhouse Drive City Harleysville State PA 19438 Lux Rooftop 5/8/23 To Whom Paid MO DAY YEAR PA 4 25 2023 \$ MO DAY YEAR	500.00 153.50
Friends of Tracy Pennycuick Mailing Address 937 Clubhouse Drive City Harleysville State PA 2ip Code (Plus 4) 19438 Lux Rooftop 5/8/23 To Whom Paid FNB-First National Bank MO DAY YEAR \$ 4 25 2023 \$ To Whom Paid FNB-First National Bank	
Friends of Tracy Pennycuick Mailing Address 937 Clubhouse Drive State Zip Code (Plus 4) Description of Expenditure PA 19438 Lux Rooftop 5/8/23 To Whom Paid FNB-First National Bank Mo DAY YEAR ### Paid	
Friends of Tracy Pennycuick Mailing Address 937 Clubhouse Drive City Harleysville State 2ip Code (Plus 4) 19438 To Whom Paid FNB-First National Bank Mo DAY YEAR \$ 2023 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	