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 7900	364			Rep File			CAND	COMMITTEE V LOBBYIST									
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		Hos	pita	l & He	ealthsys	tem A	Asso	c of	PA PA	C (HAPA	C)				
Street Address:	4750 LINDLE	RD PO I	BX 8600															
City:	HARRISBURG							State:	PA				Zip Cod	Zip Code: 17105-8600				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	ND FRIDAY PRE- 2.X 30 DAY POST- 3. PRIMARY						AMENDMENT Yes No REPORT?								
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	<u>-</u> !	5.	30 DA						TERMINA REPORT?	TERMINATION Yes No REPORT?				√
report type)	ANNUAL REPORT	7.	Year 2008					FILING METHOD () CHECK ONE					PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candidat	te:						DATE	OF E	LEC	TIOI	N	District Number	Office Code	Pai	ty Code	Cour	
								МО	DA	Y	YE	AR		1				
								1	1	4	1	2008		(SEE IN	STRUCTI	ONS FOR (ODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DA	Y	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		1 1	2	800	Т	0		4	7	7	2008						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				9,7	77.20						
B. Total Monet	ary Contributions /	And Rec	eipts (From	Sche	dule	I)	\$				5,8	43.50						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$:	15,6	20.70						
D. Total Expen	ditures (From Sche	edule II	I)				\$			1	13,39	91.38						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$				2,22	29.32						
F. Value Of In-	Kind Contributions	Receive	ed (From So	hedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00			•			
				AFF	IDA	\VI	T SE	CTION										
	a Committee repo	-	_						=	-		_						
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedule	s filed	d on	paper	or by ele	tronic	med	lium,	are to t	he best o	f my kno	wledge	and beli	ef , tr	ue
Sworn to and subs	cribed before me this day of	•	20								Si	gnature	of Perso	n Submit	ting Re	oort		_
			_				-						Prin	ted Name	e			_
My Commission Ex	Signatu pires	re											Ema	il				_
	мо	D	AY	YR			_			Area	Code	e	Daytim	e Telepi	none Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign	her	e.							
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not vi	olate	d any	, provisi	ons of the	e act of J	une 3,1	937 (P.L	. 133:	3,
Sworn to and subsc	ribed before me this											Si	gnature o	of Candid	ate			-
	day of						_		_				Drint-	d Name				_
	Signature						-						Printe	d Name				
My Commission Exp	-												Ema	il				_
	МО	D	AY	YR	ł		-		Ar	ea Co	ode		Da	aytime T	elephor	ne Numb	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:	1/1/200	<u>8</u> To:	4/7/2008						
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor										
TOTAL for the Reporting) Period	(1)	\$	340.00						
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)			\$	1,687.50						
TOTAL for the Reporting	Period	(2)	\$	1,687.50						
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)			\$	3,775.00						
TOTAL for the Reporting	Period	(3)	\$	3,775.00						
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)										
TOTAL for the Reporting) Period	(4)	\$	41.00						
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			\$	5,843.50						

PAGE TOTAL

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 Candidate			Reporting Period					
		F	rom:		То	:		
				DATE			AMOUNT	
Full Name of Contributing Committee			МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						

ary Page, Section 2. \$ 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				porting Period				
Hospital & Healthsystem Assoc of PA	A PAC (HAPAC)		From:	1/1/	2008 T o	<u>4/7/2008</u>		
				DATE		AMOUNT		
Full Name of Contributor Mr Edward Chabalowski	мо	DAY	YEAR					
	ailing Address Broad and Ontario Streets					\$ 75.00		
City Philadelphia	State PA) 3	4	2008				
Full Name of Contributor Ms. Kathleen C. Mebus			мо	DAY	YEAR			
Mailing Address 4750 Lindle Road	P.O. Box 8600					\$ 250.00		
City Harrisburg	State Zip Code (Plus 4) PA 17111-245			4	2008			
Full Name of Contributor Ms. Cheri K. Rinehart			МО	DAY	YEAR			
Mailing Address 4750 Lindle Road	P.O. Box 8600					\$ 150.00		
City Harrisburg	State PA	Zip Code (Plus 4 17111-245) 3	4	2008			
Full Name of Contributor Ms. Tina True			мо	DAY	YEAR			
Mailing Address 2280 Forest Hills [Prive					\$ 75.00		
City Harrisburg	State PA	Zip Code (Plus 4 17112-100) 3	14	2008			
Full Name of Contributor Kate J. Flynn		-	мо	DAY	YEAR			
Mailing Address 4 Awbury Road						\$ 250.00		
City Philadelphia	State PA	Zip Code (Plus 4 19138-153	3	19	2008			
Full Name of Contributor Mr. Michael P. Strazzella			МО	DAY	YEAR			
Mailing Address 2860 S. Abingdon	Street					\$ 250.00		
City Arlington	State VA	Zip Code (Plus 4 22206-131) 3	21	2008			

						PAGE 5
Full Name of Contributor			мо	DAY	YEAR	
Mr Patrick J Alberts			1-10	DAI	ILAK	
Mailing Address 1163 Country	Club Road, Rt 88					\$ 75.00
City Monongahela	State	Zip Code (Plus 4)	4	4	2008	
	PA	15063-109				
Full Name of Contributor			мо	DAY	YEAR	
Ms. Donna Ramusivich			1-10	DAI	ILAK	
Mailing Address 1163 Country	Club Road		_			\$ 75.00
City Monongahela	State Zip Code (Plus 4)		4	4	2008	
	PA	15063-109				
Full Name of Contributor			мо	DAY	YEAR	
Mr. David Clark						
Mailing Address 1163 Country	Club Road		<u> </u>			\$ 112.50
City Monongahela	State	Zip Code (Plus 4)	4	4	2008	
	PA	15063-109				
Full Name of Contributor			мо	DAY	YEAR	
Jeffrey Imbrescia				57(1		
Mailing Address 1163 Country	Club Road					\$ 75.00
City Monongahela	State	Zip Code (Plus 4)	4	4	2008	
	PA	15063-109				
Full Name of Contributor			МО	DAY	YEAR	
Lawrence J. Rusnock			1-10	DAI	ILAK	
Mailing Address 1163 Country	Club Road Rt 88					\$ 75.00
City Monongahela	State	Zip Code (Plus 4)	4	7	2008	
	PA	15063-109				
Full Name of Contributor			МО	DAY	YEAR	
Mr Daniel F Simmons						
Mailing Address 1163 Country	Club Road, Rt 88		<u> </u>			\$ 75.00
City Monongahela	State	Zip Code (Plus 4)	4	7	2008	
	PA	15063-109				
Full Name of Contributor			МО	DAY	YEAR	
Robert Pecarchik Ph.D.			140	DAT	ILAK	
Mailing Address 1163 Country	Club Road					\$ 75.00
City Monongahela	State	Zip Code (Plus 4)	4	7	2008	
	PA	15063-109				
Full Name of Contributor			МО	DAY	YEAR	
Ms. Lillian C. Beattie				DA1	ILAR	
Mailing Address 418 Shady Av	enue					\$ 75.00
City Charleroi	State	Zip Code (Plus 4)	4	7	2008	
	PA	15022-126				

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

PAGE TOTAL \$ 1,687.50

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:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0.0	00
Mailing Address							- \$	0.0	טע
City	State	Zip Code	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)

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.

Name of Filing Committee or Candidate

(Exclude contributions from political committees reported in Part C.)

Reporting Period

Hospital & Healthsystem Assoc of PA Pa	AC (HAPAC)		Fre	om:	n: <u>1/1/20</u>		: <u>4/7/2008</u>		
				D/	ATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			.==
Mr. Louis J. Panza Jr., CHE, CPA, FHFM	Ą			МО	DAT	ILAK	\$		375.00
Mailing Address 1163 Country Club	Road			4	7	2008			
City Monongahela	State	Zip	Code (Plus 4)]		2000			
	PA	15063-109							
Employer Name Monongahela Valley H				Occupat	ion	Presider	nt & C	Chief Exec	uti
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip (Code (Plus	4)
1163 Country Club Road, Rt. 88			Monongahela		PA		1506	63-109	
Full Name of Contributor									
Dr Thomas Anderson M.D.				МО	DAY	YEAR	\$		500.00
Mailing Address 112 North Seventh	Street			1	7	2000	7		
City Chambersburg	State	Zip	Code (Plus 4)	4	7	2008			
	PA	172	201-172						
Employer Name Summit Health				Occupat	ion	Vice Pre	siden	nt Medical	Af
•									
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip (Code (Plus	4)
Employer Mailing Address/Principal Place 112 North Seventh Street	e of Business		City Chambersburg		State PA		Zip (4)
	e of Business		-						4)
112 North Seventh Street Full Name of Contributor	e of Business		-	МО		YEAR			300.00
112 North Seventh Street			-		PA DAY		\$		
112 North Seventh Street Full Name of Contributor Mr. Louis Gregorio			-	MO 4	PA	YEAR 2008	\$		
112 North Seventh Street Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Street	t	Zip	Chambersburg		PA DAY		\$		
112 North Seventh Street Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Street	t State PA	Zip	Code (Plus 4)		PA DAY	2008	\$	01	300.00
112 North Seventh Street Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Street City Chambersburg	t State PA	Zip 172	Code (Plus 4)	4	PA DAY	2008	\$		300.00 Res
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Stree City Chambersburg Employer Name Chambersburg Hospit	t State PA	Zip 172	Code (Plus 4)	4	DAY 2	2008	\$ siden	01 nt, Human	300.00 Res
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Stree City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place	t State PA	Zip 172	Code (Plus 4) 201-170 City	Occupat	DAY 2 cion State PA	2008 Vice Pre	\$ siden	ot, Human	300.00 Res
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Stree City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place 112 North Seventh Street	t State PA	Zip 172	Code (Plus 4) 201-170 City	4	DAY 2	2008	\$ siden	ot, Human	300.00 Res
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Street City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place 112 North Seventh Street Full Name of Contributor	t State PA	Zip 172	Code (Plus 4) 201-170 City	Occupat	DAY 2 ion State PA DAY	2008 Vice Pre	\$ siden 2ip (1720 \$	ot, Human	300.00 Res 4)
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Stree City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place 112 North Seventh Street Full Name of Contributor Mr John P Massimilla	t State PA	Zip 172	Code (Plus 4) 201-170 City	Occupat	DAY 2 cion State PA	2008 Vice Pre	\$ siden 2ip (1720 \$	ot, Human	300.00 Res 4)
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Street City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place 112 North Seventh Street Full Name of Contributor Mr John P Massimilla Mailing Address P O Box 6005	t State PA al e of Business	Zip 172	Code (Plus 4) 201-170 City Chambersburg	Occupat	DAY 2 ion State PA DAY	2008 Vice Pre	\$ siden 2ip (1720 \$	ot, Human	300.00 Res 4)
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Street City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place 112 North Seventh Street Full Name of Contributor Mr John P Massimilla Mailing Address P O Box 6005	state PA al e of Business State PA	Zip 172	Code (Plus 4) Coty Chambersburg Chambersburg Code (Plus 4)	Occupat	PA DAY 2 State PA DAY 2	2008 Vice Pre	\$ siden	ot, Human	300.00 Res 4)
Full Name of Contributor Mr. Louis Gregorio Mailing Address 112 North 7th Stree City Chambersburg Employer Name Chambersburg Hospit Employer Mailing Address/Principal Place 112 North Seventh Street Full Name of Contributor Mr John P Massimilla Mailing Address P O Box 6005 City Chambersburg	State PA al e of Business State PA al	Zip 172	Code (Plus 4) Coty Chambersburg Chambersburg Code (Plus 4)	Occupat	PA DAY 2 State PA DAY 2	2008 Vice Pre	\$ siden	ot, Human Code (Plus	300.00 Res 4) 300.00

							_		
Full Name of Contributor		мо	DAY	YEAR	_{\$}	300.00			
Ms. Sherri H. Stahl							_ *	300.00	
Mailing Address 4316 Lemar Road				3	31	2008			
City Mercersburg	State	Zip	Code (Plus 4)						
	PA	172	236-967				1		
Employer Name Summit Health					ion (CNO-VP	Patient	Services	
Employer Mailing Address/Principal Place of Business City					State		Zip Coc	le (Plus 4)	
112 North Seventh Street			Chambersburg		PA		17201		
Full Name of Contributor					- 427	V =45			
Mr. Thomas L. Grace				МО	DAY	YEAR	\$	500.00	
Mailing Address 594 Forest Road				3	31	2008			
City Wayne	State	Zip	Code (Plus 4)]]	31	2000			
	PA	190)87-232						
Employer Name DVHC of HAP				Occupation Administration					
Employer Mailing Address/Principal Plac	e of Business		City		State Zip Code (Plus 4)			le (Plus 4)	
1835 Market Street10 Floor			Philadelphia		PA 19103-296			-296	
Full Name of Contributor									
			МО	DAV	VEAD				
Mr. David E. Loder Esq.				MO	DAY	YEAR	\$	1,000.00	
Mr. David E. Loder Esq. Mailing Address One Liberty Place							\$	1,000.00	
•	State	Zip	Code (Plus 4)	. 3	31	2008	*	1,000.00	
Mailing Address One Liberty Place	State	_	Code (Plus 4)				_ \$ 	1,000.00	
Mailing Address One Liberty Place	PA	_	• •		31		<u></u> \$	1,000.00	
Mailing Address One Liberty Place City Philadelphia	PA scher	_	• •	3	31	2008		1,000.00	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck	PA scher	_	103-730	3	31 ion	2008			
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck	PA scher	_	103-730	3 Occupat	31	2008 Partner	Zip Coc	le (Plus 4)	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place	PA scher	_	103-730	3	31 ion	2008			
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place Full Name of Contributor	PA scher e of Business	_	103-730	Occupat	31 ion State	2008 Partner	Zip Coc	le (Plus 4)	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place Full Name of Contributor Ms. Patricia J. Raffaele	PA scher e of Business	191	103-730	3 Occupat	31	2008 Partner	Zip Coc	le (Plus 4)	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place Full Name of Contributor Ms. Patricia J. Raffaele Mailing Address 125 Sherwood Drive	PA scher se of Business	191	L03-730 City	Occupat	31 ion State	2008 Partner	Zip Coc	le (Plus 4)	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place Full Name of Contributor Ms. Patricia J. Raffaele Mailing Address 125 Sherwood Drive	PA scher se of Business State PA	191	City Code (Plus 4)	Occupat	31 ion State DAY	2008 Partner	Zip Coo	le (Plus 4)	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place Full Name of Contributor Ms. Patricia J. Raffaele Mailing Address 125 Sherwood Drive City McMurray	PA scher e of Business State PA estern PA	191	City Code (Plus 4)	Occupat	31 ion State DAY	2008 Partner YEAR 2008	Zip Coc	le (Plus 4)	
Mailing Address One Liberty Place City Philadelphia Employer Name Duane, Morris & Heck Employer Mailing Address/Principal Place Full Name of Contributor Ms. Patricia J. Raffaele Mailing Address 125 Sherwood Drive City McMurray Employer Name Hospital Council of We	PA scher e of Business State PA estern PA	191	City Code (Plus 4) 317-272	Occupat	31 State DAY 21	2008 Partner YEAR 2008	Zip Coc	500.00 le (Plus 4)	

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

PAGE TOTAL
\$ 3,775.00

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	Reporting Period						
Hospital & Healthsystem Assoc of PA PA	AC (HAPAC)		From:		1/1/200	<u>8</u> To:		4/7/2008		
				D	ATE		Α	MOUNT		
Full Name				мо	DAY	YEAR		10.60		
Commerce Bank-PA				МО	DAT	TEAR	\$	18.68		
Mailing Address 3801 Paxton St				3	10	2008				
City Harrisburg	State	Zip Code (I	Plus 4)							
	PA	17111								
Receipt Description February 2008 in	nterest income									
Full Name										
Commerce Bank-PA				МО	DAY	YEAR	\$	22.32		
Mailing Address 3801 Paxton St				3	10	2008				
City Harrisburg	State	Zip Code (I	Plus 4)	3	10	2000				
	PA	17111								
Receipt Description February 2008 in	nterest income	•					•			
						Г		OF TOTAL		

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

PAGE TOTAL
\$ 41.00

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 Period	I	
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From:	<u>1/1/2008</u> To:	4/7/2008
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 Candid	ate		Reportin	g Period			
			From:			To:	
		-		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 S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	ΙΤ
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 _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	ution
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 Per	iod		
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From	1/1/2008	То:	<u>4/7/2008</u>

			DATE			AMOUNT
		МО	DAY	YEAR		
		1.10				
Street		3	7	2008	\$	250.00
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA	18064	Craig D	ally, STATI	HOUSE	138 PA	
		МО	DAY	VEAD		
		МО	DAT	TEAK		
7		3	7	2008	\$	1,400.00
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA	19138	Dwight	Evans, ST	ATE HOUS	SE 203 PA	
			DAY	VEAD		
sentative		МО	DAT	TEAK		
8		3	7	2008	\$	250.00
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA	19128-004	Kathy M	1anderino,	STATE H	OUSE 194 F	PA
•	<u> </u>					
		МО	DAY	YEAR		
		3	7	2008	\$	500.00
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA	17108	John Pip	opy, STATE	SENATE	37 PA	
	· · · · · · · · · · · · · · · · · · ·					
		140	DAY	VEAD		
r 168		МО	DAY	YEAR		
r 168 idence Road		MO 3	DAY 7	YEAR 2008	\$	250.00
	Zip Code (Plus 4)	3		2008	\$	250.00
idence Road	Zip Code (Plus 4) 19063	3 Descrip	7 tion of Exp	2008 enditure	\$ JSE 168 PA	250.00
idence Road State		3 Descrip	7 tion of Exp	2008 enditure		250.00
idence Road State		3 Descrip	7 tion of Exp	2008 enditure		250.00
idence Road State		3 Descrip	7 tion of Exp	2008 enditure		
idence Road State		3 Descrip Thomas MO	7 tion of Exp Killion, ST	2008 enditure TATE HOL YEAR 2008	JSE 168 PA	500.00
-	State PA 7 State PA sentative 8 State PA State PA	State Zip Code (Plus 4) 18064	State PA State Zip Code (Plus 4) Descrip 18064 Craig D MO 7	Street 3 7 State Zip Code (Plus 4) Description of Exp. Craig Dally, STATE MO DAY 7 3 7 State Zip Code (Plus 4) Description of Exp. Daily, STATE MO DAY 8 2ip Code (Plus 4) Description of Exp. Dwight Evans, STATE MO DAY State Zip Code (Plus 4) Description of Exp. Daily, STATE MO DAY State Zip Code (Plus 4) Description of Exp. State PA 19128-004 Kathy Manderino, MO DAY 3 7 State Zip Code (Plus 4) Description of Exp. State PA 19128-004 Description of Exp. State State Zip Code (Plus 4) Description of Exp. State State Zip Code (Plus 4) Description of Exp. State State Zip Code (Plus 4) Description of Exp. State State Zip Code (Plus 4) Description of Exp. State	Street State PA State PA	MO

To Whom Paid			МО	DAY	YEAR		
Friends of Bob Regola							
Mailing Address P.O. B	ox 792		3	7	2008	\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	Bob Reg	gola, STAT	E SENATE	39 PA	
To Whom Paid			МО	DAY	YEAR		
Friends of Jack Wagner-A	uditor General						
Mailing Address P.O. B	ox 99995		3	7	2008	\$	250.00
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15233	Jack Wa	gner, AUD	ITOR GE	NERAL PA	4
To Whom Paid			МО	DAY	YEAR		
Friends of Pat Harkins							
Mailing Address 2805	Schley Street		3	7	2008	\$	100.00
City Erie	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16508	Patrick	Harkins, S	TATE HO	USE 1st PA	4
To Whom Paid			МО	DAY	YEAR		
Campaign for Pennsylvan	ia's Future						
Mailing Address 101 W	est Baltimore Avenue 2nd Floor		3	7	2008	\$	1,000.00
City Media	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19063	CIVERA	gn for Peni /PILEGGI	nsylvania	's Future-	
To Whom Paid							
Catering By Design			МО	DAY	YEAR		
Mailing Address 110 Ea	ast Hector Street		3	7	2008	\$	2,291.13
City Conshohocken	State	Zip Code (Plus 4)	Descript	l tion of Exp	l enditure	<u> </u>	
on an	PA	19428	· ·	•		ZEL EVEN	T 2/21/08 /
	' 	·	\$2,291.	13 Allocate	ed To Frie	ends of Jol	nn Perzel Cte.
To Whom Paid			мо	DAY	YEAR		
Commerce Bank-PA						_	50.25
Mailing Address 3801	Paxton St		3	10	2008	\$	50.25
City Harrisburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	PA	17111	Februar	y 2008 ba	nk fees		
To Whom Paid			мо	DAY	YEAR		
Friends of Vince Biancucc							200.00
Mailing Address 226 Pl	easant Drive		3	25	2008	\$	300.00
City Aliquippa	State	Zip Code (Plus 4)	1	tion of Exp			
	PA	15001	Vincent	Biancucci,	STATE H	IOUSE 15t	h PA
To Whom Paid			мо	DAY	YEAR		
Friends of Caltagirone						_	F00 00
Mailing Address 234 N	orth Street		3	25	2008	\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	1	tion of Exp			
	PA	17101	Thomas	Caltagiror	ne, STATE	E HOUSE 1	L27 PA

								JL 13
To Who	om Paid			мо	DAY	YEAR		
Jane O	rie for Senate Committee							
Mailing	Address P.O. Box 545	i		3	25	2008	\$	500.00
City	Harrisburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	17108	Jane Or	ie, STATE	SENATE 4	10 PA	
To Who	om Paid			мо	DAY	YEAR		
Leach	for State Representative							
Mailing	Address P.O. Box 601	.78		3	25	2008	\$	500.00
City	King of Prussia	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	19406	Daylin L	each, STA	TE HOUS	E 149 PA	
To Who	om Paid			мо	DAY	YEAR		
Citizen	s for Ron Buxton			1-10		I = Aux		
Mailing	Address P.O. Box 117	'81		4	7	2008	\$	1,000.00
City	Harrisburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	17108	Ronald	Buxton, S1	TATE HOL	JSE 103 PA	
To Who	om Paid			мо	DAY	YEAR		
House	Democratic Campaign Cte	9		FIG		TEAR		
Mailing	Address P.O. Box 555	Federal Square Station	1	4	7	2008	\$	500.00
City	Harrisburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	17108-055			Campaig	ın Cte-REC	EPTION
				3/11/08	<u> </u>			
	om Paid s of Bob Mellow			мо	DAY	YEAR		
		act D.O. Pov. P		4	7	2008	\$	1,000.00
	Address 524 Maiii Sti	eet P.O. Box B		4		2006	<u> </u>	
City	Peckville	State	Zip Code (Plus 4)	1	tion of Exp			
		PA	18452	Robert I	Mellow, ST	ATE SEN	ATE 22 PA	
	om Paid	G (NABUG (BAG)		мо	DAY	YEAR		
	ssoc of Psychiatric Health			4		2000	\$	500.00
Mailing	Address 325 Seventh	Street, NW Suite 625		4	7	2008	Ψ	300.00
City	Washington	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		DC	20004-280	Nat'l As	soc of Psy	chiatric H	ealth Sys (NAPHS/PAC)
	om Paid			мо	DAY	YEAR		
	ch for State House							F00.00
Mailing	Address 351 Stanley	Drive		4	7	2008	\$	500.00
City	Palmyra	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	17078	Mauree	Gingrich,	STATE HO	OUSE 101 F	PA
	om Paid			мо	DAY	YEAR		
	Rapp for Representative							
Mailing	Address 660 Follett R	un Road		4	7	2008	\$	250.00
City	Warren	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	16365	Kathy R	app, STAT	E HOUSE	65 PA	

To Who	om Paid				МО	DAY	YEAR		
Friends	s of Rich Alloway				140	DA!	IZAK		
Mailing	Address 62 South Ma	ain Street			4	7	2008	\$	500.00
City	Chambersburg	State	Zip Co	ode (Plus 4)	Descript	ion of Exp	enditure		
		PA	1720:	1	Rich Allo	way, STA	TE SENA	ГЕ РА	
									PAGE TOTAL
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