Campaign Finance Report

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

Filer Identificat	ion 790	0364			Repo	ort		CAND	(DATE		СОМІ	MITTEE	✓	LOB	BYIS	г	
Number :	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Filed	-											
Name of Filing	Committee, Candio	date or L	obbyist:		Hospit	tal 8	& He	althsyst	em Ass	SOC O	f PA PA	C (HAPA	IC)				
Street Address:																	
City:	HARRISBURG	9						State:	PA			Zip Co	de: 17	105-8	3600		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	- 2.3		0 DA RIMA		POST- 3.			AMENDMENT REPORT?		Yes	\checkmark	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E- 5.		0 DA LECT		POST-	POST- 6.			TERMINATION REPORT?			No	\checkmark
report type)	ANNUAL REPORT	r 7.	Year 2008	8			FILING METHOD () CHECK ONE					PAPER		\checkmark	DIS	KETTE	•
Name of Office	Sought by Candida	ate:						DATE C)F ELE	CTI	ON	District Number	Office Code	Pa	rty Co	de Cou Coo	
								мо	DAY	Y	EAR		10000			1000	
								11		4	2008	<u> </u>	(SEE INS	TRUCTI	ONS FO	OR CODE	S)
	Receipts and	мо	DAY	YEAF	R			мо	DAY	Y	EAR	FC	R OFFIC	e use	ONL	Y	
Expenditure	s from:		1	1 2	2008	то)	4	ŀ	7	2008	_					
A. Amount Bro	ought Forward Fro	m Last F	Report		1		\$			9,	777.20						
B. Total Monet	tary Contributions	And Red	ceipts (Fro	m Sche	edule I)	\$			5,	843.50						
C. Total Funds	Available (Sum O	f Lines A	A and B)				\$			15,	620.70						
D. Total Exper	nditures (From Sch	nedule II	II)				\$			13,	391.38						
E. Ending Cast	h Balance (Subtra	ct Line D	From Line	e C)			\$			2,	229.32						
F. Value Of In-	-Kind Contribution	is Receiv	ved (From S	Schedu	ıle II)		\$				0.00	1					
G. Unpaid Deb	ots And Obligation	s (From :	Schedule I	V)			\$				0.00						
				AFF	-IDAV	/IT	SE	CTION									
PART I - If this i	is a Committee rej	oort, trea	asurer sign	here.	If this	is a	Can	didate r	eport,	candi	idate sig	gn here.					
I swear (or affirm correct and comp	 that this report, inelete. 	cluding th	e attached s	chedule	s filed o	on pa	iper o	or by elect	tronic m	ediun	n, are to i	the best o	f my know	ledge	and b	elief , t	true
Sworn to and sub	scribed before me th day of	is	20								Signatur	e of Perso	n Submitt	ing Re	port		
	Signati	ure				_						Prin	ted Name				—
My Commission E	-											Ema	il				—
	мо	D	AY	YR	1				Ar	ea Co	de	Daytim	e Teleph	one Nu	ımber		
Part II- If this is	a report of a can	didate's	authorize	d Comr	nittee,	Car	ndida	ate shall	sign h	ere.							
I swear (or affirm No 320) as amend) that to the best of led.	my knowl	edge and be	lief this	s politica	al co	ommi	ittee has r	not viola	ted a	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.L. 13	33,
Sworn to and subs	cribed before me this day of	5	20								s	ignature o	of Candida	te			—
												Printe	ed Name				
My Commission Ex	Signature											Ema	il				
	мо	D	AY	YF	ર				Area	Code		D	aytime Te	lepho	ne Nui	nber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Hospital & Healthsystem Assoc of PA PAC (HAPAC) From: <u>1/1/2008</u> **To:** 4/7/2008 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 340.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 1,687.50 All Other Contributions (Part B) \$ **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 3,775.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 3,775.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 41.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount 5,843.50 \$ totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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						
				m:						
					DATE AMOUNT					
Full Name of Contributing Committee					DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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)												
Name	of Filing Committee or Candid	ate		Repo	porting Period								
	al & Healthsystem Assoc of F			From	:	<u>1/1/</u>	΄ <u>2008</u> Τα):	<u>4/7/2008</u>				
								-	AMOUNT				
	Full Name of Contributor						YEAR						
Ms. Lillian C. Beattie													
Mailing Address						7	2008	\$	75.00				
City Charleroi State Zip Code (Plus 4) PA 15022-126						/	2008						
Full Nam	e of Contributor	-											
Robert Pecarchik Ph.D.						DAY	YEAR						
Mailing A								\$	75.00				
City M	Monongahela	State	Zip Code (Plus 4	•)	4	7	2008						
Full Nam	e of Contributor				мо	DAY	YEAR						
Mr Danie	el F Simmons				MO	DAT							
Mailing A	Address	1	-					\$	75.00				
City N	Monongahela	State	Zip Code (Plus 4	•)	4	7	2008						
		PA	15063-109										
Full Nam	e of Contributor				мо	DAY	YEAR						
	e J. Rusnock			-									
Mailing A					4	7	2008	\$	75.00				
City N	Monongahela	State PA	Zip Code (Plus 4 15063-109	•)	4	/	2008						
		FA	13003-109	-									
	ne of Contributor mbrescia				мо	DAY	YEAR						
Mailing A				-1				\$	75.00				
	Monongahela	State	Zip Code (Plus 4	l)	4	4	2008		, 5.00				
	5	PA	15063-109										
Full Nam	e of Contributor		•										
Mr. Davi	d Clark				мо	DAY	YEAR						
Mailing A	Mailing Address							\$	112.50				
CityMonongahelaStateZip Code (Plus 4)					4	4	2008						
	PA 15063-109												
Full Nam	e of Contributor				мо	DAY	YEAR						
	na Ramusivich												
	Aailing Address						2000	\$	75.00				
City N	Monongahela	State	Zip Code (Plus 4	•)	4	4	2008						
1		PA	15063-109			1	1	I					

							 PAGE 5
Full Na	ame of Contributor			мо	DAY	YEAR	
Mr Pa	trick J Alberts			MO	DAT	TEAR	
Mailin	g Address						\$ 75.00
City	Monongahela	State	Zip Code (Plus 4)	4	4	2008	
		PA	15063-109				
Full N	ame of Contributor			мо	DAY	YEAR	
Mr. Mi	ichael P. Strazzella			MO	DAT	TEAR	
Mailin	g Address						\$ 250.00
City	Arlington	State	Zip Code (Plus 4)	3	21	2008	
		VA	22206-131				
Full N	ame of Contributor					VEAD	
Kate J	J. Flynn			мо	DAY	YEAR	
Mailin	g Address						\$ 250.00
City	Philadelphia	State	Zip Code (Plus 4)	3	19	2008	
		PA	19138-153				
Full N	ame of Contributor		·				
Ms. Ti	ina True			мо	DAY	YEAR	
Mailin	g Address						\$ 75.00
City	Harrisburg	State	Zip Code (Plus 4)	3	14	2008	
	-	PA	17112-100				
Full N	ame of Contributor						
Ms. C	heri K. Rinehart			мо	DAY	YEAR	
	g Address						\$ 150.00
City	Harrisburg	State	Zip Code (Plus 4)	3	4	2008	
		PA	17111-245				
Full N	ame of Contributor		•				
Ms. K	athleen C. Mebus			мо	DAY	YEAR	
Mailin	g Address						\$ 250.00
City	Harrisburg	State	Zip Code (Plus 4)	3	4	2008	
		PA	17111-245				
Full N	ame of Contributor			мо	DAY	YEAR	
Mr Ed	ward Chabalowski			MO	DAT	TEAR	
	g Address						\$ 75.00
Mailin	Philadelphia	State	Zip Code (Plus 4)	3	4	2008	
Mailin City	Filladelpilla			1	1	I	
	Filladelpilla	PA	19140-518				
	Filliaucipilia	PA	19140-518				PAGE TOTAL
City		I	19140-518 Detailed Summary Page, S	<u> </u>			\$ 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									
				То:									
				DA	TE			AMOUNT					
Full Name of Contributing Committee	MO DAY			YEAR		0.00							
Mailing Address							- \$	0.00					
City	State	Zip Cod	e (Plus 4)										
							PAGE TOTAL						
Enter Grand Total of Part C on Scheo	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				Rep	porting Period					
Hospital & Healthsystem Assoc of PA PA	AC (HAPAC)			From	n:	<u>1/1/2</u>	<u>008</u> То	:	<u>4/7/200</u>	8
					DA	TE		A	MOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mr. Louis J. Panza Jr., CHE, CPA, FHFM	A				MO	DAT	TEAR	\$	37	5.00
Mailing Address					4	7	2008			
City Monongahela	State	Zip	Code (Plus	4)		,				
	PA	15	063-109							
Employer Name Monongahela Valley H	ospital				Occupat	ion	Preside	nt & Chi	ief Executi	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)	
Monongahela					PA		15063	-109		
Full Name of Contributor										
Dr Thomas Anderson M.D.				мо	DAY	YEAR	\$	50	0.00	
Mailing Address						-	2000			
City Chambersburg	State	Zip	Code (Plus	4)	4	7	2008			
	PA									
Employer Name Summit Health					Occupat	ion	Vice Pre	sident l	Medical Af	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)	
			Chambers	burg		PA		17201		
Full Name of Contributor										
Mr. Louis Gregorio					мо	DAY	YEAR	\$	30	0.00
Mailing Address					4	2	2008			
City Chambersburg	State	Zip	Code (Plus	4)	-	2	2000			
	PA	17	201-170							
Employer Name Chambersburg Hospit	al				Occupat	ion	Vice Pre	sident,	Human Res	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)	
			Chambers	burg		PA		17201	-170	
Full Name of Contributor						•				
Mr John P Massimilla					мо	DAY	YEAR	\$	30	0.00
Mailing Address						_				
City Chambersburg	State	Zip	Code (Plus	4)	4	2	2008			
PA 17201-600										
Employer Name Chambersburg Hospital				Occupat	ion	Vice Pre	sident	Administra		
mployer Mailing Address/Principal Place of Business City			State			Zip Code (Plus 4)				
Chamberst			burg	PA 17201-170						

ull Name of Contributor					DAY	YEAR	\$	200.00
Ms. Sherri H. Stahl				мо	DAI	TEAR	≯	300.00
Mailing Address				- 3	31	2008		
City Mercersburg	State	Zij	p Code (Plus 4)	J	51	2000		
	PA	17	236-967					
Employer Name Summit Health				Occupat	ion (CNO-VF	Patie	ent Services
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip C	Code (Plus 4)
			Chambersburg		PA		1720	01
Full Name of Contributor								
Mr. Thomas L. Grace				мо	DAY	YEAR	\$	500.00
Mailing Address					24	2000		
City Wayne	State	Zij	p Code (Plus 4)	- 3	31	2008		
	PA	19	087-232					
Employer Name DVHC of HAP				Occupat	ion	Adminis	stratio	n
Employer Mailing Address/Principal Place of Business City				State Zip Code (Plus 4)				
Philadelphia				PA		1910	03-296	
Full Name of Contributor				•		<u> </u>		
Full Name of Contributor Mr. David E. Loder Esq.			мо	DAY	YEAR	\$	1,000.00	
Mailing Address							1	
City Philadelphia	State	Zi	p Code (Plus 4)	3	31	2008	8	
	PA		9103-730					
Employer Name Duane, Morris & Heck		. 13	103 730	Occupat	ion	Partner		
Employer Mailing Address/Principal Plac			City	1	State	arther	1	Code (Plus 4)
			,					
Full Name of Contributor					•			
Ms. Patricia J. Raffaele				мо	DAY	YEAR	\$	500.00
Mailing Address								
City McMurray	State	Zij	p Code (Plus 4)	3	21	2008		
	PA	15	317-272					
Employer Name Hospital Council of We	estern PA			Occupat	ion	Vice Pre	esiden	ıt
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip C	Code (Plus 4)
			Warrendale		PA		1508	86-751
					•	Г		PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımn	nary Page, Secti	on 3.				FAGE IVIAL
							\$	3,775.00

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.

Name of Filing Committee or Candidate					ting Period					
Hospital & Healthsys	stem Assoc of PA PA	AC (HAPAC)		From:		<u>1/1/200</u>	1 <u>8</u> To:		<u>4/7/2008</u>	
					D	ATE			AMOUNT	
Full Name Commerce Bank-PA	Commerce Bank-PA						YEAR		\$ 18.68	
Mailing Address					3	10	200	8		
City Harrisburg		State	Zip Code (Plus 4)						
	PA 17111									
Receipt Description	February 2008 ir	nterest income	•					•		
Full Name					мо	DAY	YEAR		\$ 22.32	
Commerce Bank-PA					MO	DAT	TLAN		₽ 22.32	
Mailing Address					3	10	200	8		
City Harrisburg		State	Zip Code (Plus 4)	_	_				
		РА	17111							
Receipt Description	February 2008 ir	nterest income	•							
					_				PAGE TOTAL	
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section					4.			\$	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		
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From:	<u>1/1/2008</u> To:	<u>4/7/2008</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, 3		\$	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					
F					То:	То:		
		DATE		AMOUNT				
Full Name of Contributor				DAY	YEAR			
Mailing Address						\$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
Enter Grand Total of Part F on Sched Section 2.	iled Sum	mary Pag	e,		PAGE TOTA	<u>، ۱</u>		
						\$		0.00

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period					
					m:				
						DATE		Α	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zip Code(Pl	lus 4)						
Employer of Contributor					Occupa	ition			
Employer Mailing Address/Principal Plac	e of Business	City		State	e Zip	Code(Plus 4)	Descri	ption of Co	ntribution
Enter Grand Total of Part G on Schedule II, In-Kind Contribution Summary Page, Section 3.				etaile	d			P	AGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period					
Hospital & Healthsystem Assoc of PA	PAC (HAPAC)		From	<u>1/</u>	1/2008	То:	<u>4/7/2008</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
Citizens to Elect Craig Dally			no		,				
Mailing Address			3	7	2008	\$	250.00		
City Nazareth	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
	PA	18064	Craig D	ally, STATI	E HOUSE	138 PA			
To Whom Paid			мо	DAY	YEAR				
Citizens to Elect Dwight Evans									
Mailing Address				7	2008	\$	1,400.00		
City Philadelphia State Zip Code (Plus 4)				tion of Exp	enditure	•			
PA 19138				Evans, ST	ATE HOU	SE 203 P	A		
To Whom Paid Kathy Manderino for State Represent	мо	DAY	YEAR						
Mailing Address			3	7	2008	\$	250.00		
City Philadelphia	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure				
	PA	19128-004		1anderino,		OUSE 19	4 PA		
To Whom Paid	•	•		DAY	VEAD				
Friends of John Pippy			мо	DAY	YEAR				
Mailing Address			3	7	2008	\$	500.00		
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17108	John Pij	opy, STATE	E SENATE	37 PA			
To Whom Paid			мо	DAY	YEAR				
Killion's Victory CteCandidate for 16	58		no						
Mailing Address			3	7	2008	\$	250.00		
City Media	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19063	Thomas	s Killion, ST	TATE HOU	JSE 168 F	PA		
To Whom Paid			мо	DAY	YEAR				
Friends of Tom Corbett									
Mailing Address			3	7	2008	\$	500.00		
City Harrisburg State Zip Code (Plus 4)			Description of Expenditure						
	Tom Co	rbett, ATT	ORNEY G	ENERAL	PA				

							FA	GL 14	
To Wh	om Paid			мо	DAY	YEAR			
Friends of Bob Regola				МО					
Mailing Address				3	7	2008	\$	500.00	
City	Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	17108	Bob Reg	gola, STAT	E SENATI	E 39 PA		
To Whom Paid				мо	DAY	YEAR			
Friends of Jack Wagner-Auditor General				MO	DAT	TEAR			
Mailing Address			3	7	2008	\$	250.00		
City	Pittsburgh State Zip Code (Plus 4)			Description of Expenditure					
		PA	15233	Jack Wagner, AUDITOR GENERAL PA					
To Wh	om Paid			мо	DAY	YEAR			
Friends of Pat Harkins				MO	DAT	TEAR			
Mailing Address				3	7	2008	\$	100.00	
City	Erie State Zip Code (Plus 4)		Zip Code (Plus 4)	Description of Expenditure					
		PA	16508	Patrick Harkins, STATE HOUSE 1st PA					
To Wh	om Paid			мо	DAY	YEAR			
Camp	aign for Pennsylvania's Fu	uture							
Mailin	g Address			3	7	2008	\$	1,000.00	
City	Media	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
		PA	19063	Campaign for Pennsylvania's Future- CIVERA/PILEGGI					
To Wh	om Paid			мо	DAY	YEAR			
Cateri	ng By Design			MO					
Mailin	g Address			3	7	2008	\$	2,291.13	
City	Conshohocken	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19428	CATERING BY DESIGN-PERZEL EVENT 2/21/08 /					
				\$2,291.13 Allocated To Friends of John Perzel Cte.					
	om Paid			мо	DAY	YEAR			
Commerce Bank-PA			3	10	2008	\$	50.25		
Mailing Address									
City	HarrisburgStateZip Code (Plus 4)			Description of Expenditure February 2008 bank fees					
		PA	17111	Februar	y 2008 ba	nk fees	1		
	om Paid			мо	DAY	YEAR			
Friends of Vince Biancucci Mailing Address					25	2008	\$	300.00	
	g Address			3				500100	
City	Aliquippa	State	Zip Code (Plus 4)		tion of Exp				
		PA	15001	Vincent	Biancucci,	STATE F	IOUSE 15tl	ו PA	
To Whom Paid				мо	DAY	YEAR			
Friends of Caltagirone Mailing Address					25	2000	\$	500.00	
Mailing Address				3	25	2008		500.00	
City	Harrisburg	State	Zip Code (Plus 4)		tion of Exp				
	PA 17101				Thomas Caltagirone, STATE HOUSE 127 PA				

To Whom Paid					DAY	YEAR					
Jane Orie for Senate Committee											
Mailing Address				3	25	2008	\$	500.00			
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	17108	Jane Or	ie, STATE	SENATE 4	40 PA				
To Whom Paid				мо	DAY	YEAR					
Leach for State Representative				no	2	12/40					
Mailing Address			3	25	2008	\$	500.00				
City	King of PrussiaStateZip Code (Plus 4)			Description of Expenditure							
		PA	19406	Daylin L	each, STA	TE HOUS	E 149 PA				
To W	nom Paid			мо	DAY	YEAR					
Citize	ns for Ron Buxton			MO	DAT	TEAR					
Mailin	ng Address			4	7	2008	\$	1,000.00			
City	Harrisburg State Zip Code (Plus 4)		Zip Code (Plus 4)	Description of Expenditure							
		PA 17108				Ronald Buxton, STATE HOUSE 103 PA					
To Wł	nom Paid			мо	DAY	YEAR					
House	e Democratic Campaign Cte			но	DAT	TEAR					
Mailin	ng Address			4	7	2008	\$	500.00			
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1				
		PA	17108-055		louse Democratic Campaign Cte-RECEPTION 8/11/08						
To W	nom Paid										
Friend	ds of Bob Mellow			мо	DAY	YEAR					
Mailing Address											
	ig Address			4	7	2008	\$	1,000.00			
City	Peckville	State	Zip Code (Plus 4)		7 tion of Exp		\$	1,000.00			
City		State PA	Zip Code (Plus 4) 18452	Descrip	tion of Exp	enditure					
				Descript Robert	tion of Exp Mellow, ST	enditure ATE SEN					
To Wł	Peckville	РА		Descrip	tion of Exp	enditure					
To Wr Nat'l J	Peckville nom Paid	РА		Descript Robert	tion of Exp Mellow, ST	enditure ATE SEN					
To Wr Nat'l / Mailin	Peckville nom Paid Assoc of Psychiatric Health Sys ng Address	PA s (NAPHS/PAC)	18452	MO 4	tion of Exp Mellow, ST DAY 7	enditure ATE SEN YEAR 2008	ATE 22 PA				
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Enter	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							13,391.38