

Campaign Finance Report

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

Filer Identification Number :		7900364		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Hospital & Healthsystem Assoc of PA PAC (HAPAC)												
Street Address: 4750 LINDLE RD PO BX 8600												
City: HARRISBURG						State: PA		Zip Code: 17105-8600				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2009	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	3	2009	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
				1	1	2009		3	30	2009		
A. Amount Brought Forward From Last Report						\$ 5,918.59						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 5,522.50						
C. Total Funds Available (Sum Of Lines A and B)						\$ 11,441.09						
D. Total Expenditures (From Schedule III)						\$ 4,927.85						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 6,513.24						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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>1/1/2009</u> To: <u>3/30/2009</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 997.50

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)	\$ 3,525.00
TOTAL for the Reporting Period (2)	\$ 3,525.00

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)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 5,522.50
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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			
				From:		To:	
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL	
\$	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 Candidate Hospital & Healthsystem Assoc of PA PAC (HAPAC)				Reporting Period From: <u>1/1/2009</u> To: <u>3/30/2009</u>			
				DATE		AMOUNT	
Full Name of Contributor Mr. John Campbell				MO	DAY	YEAR	\$ 125.00
Mailing Address 70 E. Beau Street				3	16	2009	
City Washington	State PA	Zip Code (Plus 4) 15301-471					
Full Name of Contributor Lawrence H. Lee				MO	DAY	YEAR	\$ 175.00
Mailing Address 1272 McKnight Drive				3	16	2009	
City Bethel Park	State PA	Zip Code (Plus 4) 15102-244					
Full Name of Contributor Ms. Kirsten Saweikis				MO	DAY	YEAR	\$ 75.00
Mailing Address 4750 Lindle Road Post Office Box 8600				3	16	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17111-242					
Full Name of Contributor Ms. Tina True				MO	DAY	YEAR	\$ 75.00
Mailing Address 2280 Forest Hills Drive				3	17	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17112-100					
Full Name of Contributor Henry Koskoski				MO	DAY	YEAR	\$ 100.00
Mailing Address 155 Wilson Avenue				3	17	2009	
City Washington	State PA	Zip Code (Plus 4) 15301-339					
Full Name of Contributor Ms. Staci J. Covey				MO	DAY	YEAR	\$ 75.00
Mailing Address 100 John St				3	17	2009	
City Troy	State PA	Zip Code (Plus 4) 16947-113					

Full Name of Contributor Dr. Edward Foley MD			MO	DAY	YEAR	\$ 175.00
Mailing Address 118 Grandview Drive			3	20	2009	
City McMurray	State PA	Zip Code (Plus 4) 15317-303				
Full Name of Contributor Ms. Shirley Hardy			MO	DAY	YEAR	\$ 250.00
Mailing Address 111 Oakwood Road			3	20	2009	
City McMurray	State PA	Zip Code (Plus 4) 15317-268				
Full Name of Contributor Dr. E. Ronald Salvitti MD			MO	DAY	YEAR	\$ 100.00
Mailing Address 155 Wilson Avenue			3	20	2009	
City Washington	State PA	Zip Code (Plus 4) 15301-339				
Full Name of Contributor Mr. Michael P. Strazzella			MO	DAY	YEAR	\$ 250.00
Mailing Address 2860 S. Abingdon Street			3	20	2009	
City Arlington	State VA	Zip Code (Plus 4) 22206-131				
Full Name of Contributor Kristen J. Rogers			MO	DAY	YEAR	\$ 75.00
Mailing Address 133 Cameron Road			3	20	2009	
City Washington	State PA	Zip Code (Plus 4) 15301-954				
Full Name of Contributor Elizabeth A. Schmieler			MO	DAY	YEAR	\$ 75.00
Mailing Address 162 Fulton Road			3	20	2009	
City Canonsburg	State PA	Zip Code (Plus 4) 15317-480				
Full Name of Contributor Edmond Hardesty			MO	DAY	YEAR	\$ 100.00
Mailing Address 352 Burtrom Hollow Road			3	20	2009	
City Coudersport	State PA	Zip Code (Plus 4) 16915				
Full Name of Contributor Dr. Wolfgang Hans Baerwald MD			MO	DAY	YEAR	\$ 100.00
Mailing Address 42 James Street			3	20	2009	
City Kingston	State PA	Zip Code (Plus 4) 18704-472				
Full Name of Contributor Charles Updegraff Jr.			MO	DAY	YEAR	\$ 125.00
Mailing Address P.O. Box 502			3	20	2009	
City Coudersport	State PA	Zip Code (Plus 4) 16915502				

Full Name of Contributor Mr. Edward C Pitchford			MO	DAY	YEAR	\$ 250.00
Mailing Address 1001 East Second Street			3	20	2009	
City Coudersport	State PA	Zip Code (Plus 4) 16915				
Full Name of Contributor Mrs. Wendy Cameron			MO	DAY	YEAR	\$ 250.00
Mailing Address 982 E. Beau Street			3	24	2009	
City Washington	State PA	Zip Code (Plus 4) 15301-292				
Full Name of Contributor R. Timothy Weston			MO	DAY	YEAR	\$ 125.00
Mailing Address 1 Westwind Drive			3	25	2009	
City Lemoyne	State PA	Zip Code (Plus 4) 17043-123				
Full Name of Contributor Ralph Andy			MO	DAY	YEAR	\$ 125.00
Mailing Address 75 Technology Drive PO Box 638			3	26	2009	
City California	State PA	Zip Code (Plus 4) 15419638				
Full Name of Contributor Richard E. Rohr			MO	DAY	YEAR	\$ 75.00
Mailing Address 275 Stillwater Drive			3	26	2009	
City Horseheads	State NY	Zip Code (Plus 4) 14845-133				
Full Name of Contributor Evelyn Oteng-Bediako			MO	DAY	YEAR	\$ 250.00
Mailing Address 134 W Lockhart St Apt 2			3	27	2009	
City Sayre	State PA	Zip Code (Plus 4) 18840-214				
Full Name of Contributor John Petersen			MO	DAY	YEAR	\$ 75.00
Mailing Address 100 Hospital Avenue			3	27	2009	
City Du Bois	State PA	Zip Code (Plus 4) 15801-149				
Full Name of Contributor Dr. Kyra Bannister MD			MO	DAY	YEAR	\$ 250.00
Mailing Address 154 Dr A Strathmont Pk.			3	27	2009	
City Elmira	State NY	Zip Code (Plus 4) 14905				
Full Name of Contributor John D. Six			MO	DAY	YEAR	\$ 75.00
Mailing Address 309 Deerfield Drive			3	27	2009	
City Canonsburg	State PA	Zip Code (Plus 4) 15317-238				

Full Name of Contributor				MO	DAY	YEAR	\$ 175.00
Kathryn Yecko							
Mailing Address				3	27	2009	
The Washington Hospital 155 Wilson Avenue							
City	Washington	State	PA	Zip Code (Plus 4)	15301-339		

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

PAGE TOTAL	
\$	3,525.00

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 Candidate	Reporting Period
	From: To:

			DATE			AMOUNT
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL	
\$	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 Hospital & Healthsystem Assoc of PA PAC (HAPAC)	Reporting Period From: <u>1/1/2009</u> To: <u>3/30/2009</u>
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				DATE		AMOUNT	
Full Name of Contributor Dr. William P Pearson M.D.				MO	DAY	YEAR	\$ 500.00
Mailing Address 155 Wilson Avenue							
City Washington	State PA	Zip Code (Plus 4) 15301-339					
Employer Name Washington Hospital				Occupation Vice President Medical Af			
Employer Mailing Address/Principal Place of Business 155 Wilson Avenue			City Washington		State PA		Zip Code (Plus 4) 15301-339
Full Name of Contributor Mr. Telford W. Thomas CHE				MO	DAY	YEAR	\$ 500.00
Mailing Address 155 Wilson Avenue							
City Washington	State PA	Zip Code (Plus 4) 15301-339					
Employer Name Washington Hospital				Occupation President & Chief Executi			
Employer Mailing Address/Principal Place of Business 155 Wilson Avenue			City Washington		State PA		Zip Code (Plus 4) 15301-339

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

PAGE TOTAL
\$ 1,000.00

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	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

PAGE TOTAL
\$ 0.00

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>1/1/2009</u> To: <u>3/30/2009</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From <u>1/1/2009</u> To: <u>3/30/2009</u>

				DATE		AMOUNT	
To Whom Paid Committee to Elect Frank Burns				MO	DAY	YEAR	\$ 200.00
Mailing Address 535 Fairfield Avenue				3	27	2009	
City Johnstown	State PA	Zip Code (Plus 4) 15906	Description of Expenditure Frank Burns, STATE HOUSE 72nd PA				
To Whom Paid HAPSCO Group				MO	DAY	YEAR	\$ 72.16
Mailing Address P.O. Box 8600				3	27	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17101-860	Description of Expenditure HAPSCO-ARGALL EVENT -PRINTING COSTS / \$72.16 Allocated To Volunteers for Argall				
To Whom Paid The Hospital & Healthsystem Association of Pennsylvania				MO	DAY	YEAR	\$ 305.69
Mailing Address P.O. Box 8600				3	27	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17105-860	Description of Expenditure HAP-ARGALL EVENT - ADMINISTRATIVE COSTS / \$305.69 Allocated To Volunteers for Argall				
To Whom Paid Robbins for Senate Committee				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 353 Greenville Road				3	27	2009	
City Greenville	State PA	Zip Code (Plus 4) 16125	Description of Expenditure Robert Robbins, STATE SENATE 50th PA				
To Whom Paid Friends of Chuck McIlhinney-Senate				MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. Box 792				3	23	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Charles McIlhinney, STATE SENATE 10th PA				
To Whom Paid Folmer for State Senate				MO	DAY	YEAR	\$ 350.00
Mailing Address P.O. Box 804				3	23	2009	
City Jonestown	State PA	Zip Code (Plus 4) 17038	Description of Expenditure Michael Folmer, STATE SENATE 48th PA				

To Whom Paid Friends of Kathy Watson			MO	DAY	YEAR	\$ 500.00
Mailing Address 1931 Appaloosa Road			3	23	2009	
City Warrington	State PA	Zip Code (Plus 4) 18976	Description of Expenditure Katherine Watson, STATE HOUSE 144th PA			

To Whom Paid Tomlinson for Senate			MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. Box 792			3	23	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Robert Tomlinson, STATE SENATE 6th PA			

To Whom Paid Pileggi for Senate Committee			MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. Box			3	23	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Dominic Pileggi, STATE SENATE 9th PA			

To Whom Paid Jay Costa for State Senate Committee			MO	DAY	YEAR	\$ 500.00
Mailing Address 314 Newport Road			3	23	2009	
City Pittsburgh	State PA	Zip Code (Plus 4) 15221	Description of Expenditure Jay Costa, STATE SENATE 43rd PA			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 4,927.85

