

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		7900364		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Hospital & Healthsystem Assoc of PA PAC (HAPAC)												
<b>Street Address:</b> 4750 LINDLE RD PO BX 8600												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17105-8600			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2009	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	3	2009				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	2009		12	31	2009				
<b>A. Amount Brought Forward From Last Report</b>						\$ 20,929.08						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 7,239.54						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 28,168.62						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 4,508.67						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 23,659.95						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 663.07</b>

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	<b>\$ 0.00</b>
<b>All Other Contributions (Part B)</b>	<b>\$ 2,177.36</b>
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 2,177.36</b>

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	<b>\$ 0.00</b>
<b>All Other Contributions (Part D)</b>	<b>\$ 4,387.50</b>
<b>TOTAL for the Reporting Period (3)</b>	<b>\$ 4,387.50</b>

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	<b>\$ 11.61</b>

<b>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.)</b>	<b>\$ 7,239.54</b>
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<b>PART A</b> <b>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</b> <b>\$50.01 TO \$250.00</b> <b>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.</b>							
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.**

<b>PAGE TOTAL</b>	
\$	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)**

<b>Name of Filing Committee or Candidate</b> Hospital & Healthsystem Assoc of PA PAC (HAPAC)				<b>Reporting Period</b> From: <u>1/1/2009</u> To: <u>12/31/2009</u>			
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b> Mr. Arnold Katz				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 112.50
<b>Mailing Address</b> 1270 Round Hill Road				12	7	2009	
<b>City</b> Bryn Mawr	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19010-195					
<b>Full Name of Contributor</b> Marilyn Rivers				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 112.50
<b>Mailing Address</b> 831 W. Mt. Airy Avenue				12	7	2009	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19119-332					
<b>Full Name of Contributor</b> Frank James MD				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 225.00
<b>Mailing Address</b> 610 Chatham Street				12	7	2009	
<b>City</b> Blue Bell	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19422-290					
<b>Full Name of Contributor</b> S. Ty Steinberg				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 112.50
<b>Mailing Address</b> 171 Linden Drive				12	7	2009	
<b>City</b> Elkins Park	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19027-134					
<b>Full Name of Contributor</b> Susan Borislow				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
<b>Mailing Address</b> 12 Copper Beech Drive				12	7	2009	
<b>City</b> Lafayette Hill	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19444-240					
<b>Full Name of Contributor</b> Ms. Sharon A. Bergen				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 112.50
<b>Mailing Address</b> 4200 Monument Road				12	21	2009	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19131-168					

Full Name of Contributor			MO	DAY	YEAR	\$ 150.00
Carol Keiper			12	21	2009	
Mailing Address	4200 Monument Road					
City	Philadelphia	State	PA	Zip Code (Plus 4)	19131-168	
Full Name of Contributor			MO	DAY	YEAR	\$ 112.50
Mr. Barry R. Freedman			12	21	2009	
Mailing Address	5501 Old York Road					
City	Philadelphia	State	PA	Zip Code (Plus 4)	19141-301	
Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
Dr. Kimberly R. Best MD			12	21	2009	
Mailing Address	1179 Dunsinane Hill					
City	Chester Springs	State	PA	Zip Code (Plus 4)	19425-131	
Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
Dr. Marc H. Zisselman MD			12	21	2009	
Mailing Address	6 Tohopeka Lane					
City	Philadelphia	State	PA	Zip Code (Plus 4)	19118-382	
Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
Thomas Tebbens Jr.			12	21	2009	
Mailing Address	801 Weadley Road					
City	Radnor	State	PA	Zip Code (Plus 4)	19087-282	
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Mrs. Linda M. Fanale			12	30	2009	
Mailing Address	600 Somerset Avenue					
City	Windber	State	PA	Zip Code (Plus 4)	15963-139	
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Cynthia LeComte			12	30	2009	
Mailing Address	160 Windy Ridge Lane					
City	Lilly	State	PA	Zip Code (Plus 4)	15938-640	
Full Name of Contributor			MO	DAY	YEAR	\$ 26.32
Mr. Robert E Greenwood			11	30	2009	
Mailing Address	4750 Lindle Road Post Office Box 8600					
City	Harrisburg	State	PA	Zip Code (Plus 4)	17111-245	
Full Name of Contributor			MO	DAY	YEAR	\$ 13.16
Mr. Robert E Greenwood			12	15	2009	
Mailing Address	4750 Lindle Road Post Office Box 8600					
City	Harrisburg	State	PA	Zip Code (Plus 4)	17111-245	

Full Name of Contributor Mr. Robert E Greenwood			MO	DAY	YEAR	\$ 13.16
Mailing Address 4750 Lindle Road Post Office Box 8600			12	31	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17111-245				
Full Name of Contributor Mr. Brian Eury			MO	DAY	YEAR	\$ 67.99
Mailing Address 1835 Market Street 10 Floor			11	30	2009	
City Philadelphia	State PA	Zip Code (Plus 4) 19103-296				
Full Name of Contributor Mr. Brian Eury			MO	DAY	YEAR	\$ 33.99
Mailing Address 1835 Market Street 10 Floor			12	15	2009	
City Philadelphia	State PA	Zip Code (Plus 4) 19103-296				
Full Name of Contributor Mr. Brian Eury			MO	DAY	YEAR	\$ 33.99
Mailing Address 1835 Market Street 10 Floor			12	31	2009	
City Philadelphia	State PA	Zip Code (Plus 4) 19103-296				
Full Name of Contributor Mr Brian Derrick			MO	DAY	YEAR	\$ 75.00
Mailing Address 5501 Old York Road			12	31	2009	
City Philadelphia	State PA	Zip Code (Plus 4) 19141-301				
Full Name of Contributor Michael A. Nuccio			MO	DAY	YEAR	\$ 63.75
Mailing Address 110 Runnymede Drive			12	31	2009	
City Lansdale	State PA	Zip Code (Plus 4) 19446-636				
Full Name of Contributor Mr. Gerald Blaney			MO	DAY	YEAR	\$ 112.50
Mailing Address 5501 Old York Road			12	31	2009	
City Philadelphia	State PA	Zip Code (Plus 4) 19141-301				
Full Name of Contributor Mr. Kevin J. Kniele			MO	DAY	YEAR	\$ 75.00
Mailing Address 124 Newport Lane			12	31	2009	
City North Wales	State PA	Zip Code (Plus 4) 19454-145				
Full Name of Contributor Mrs. Luann Trainer			MO	DAY	YEAR	\$ 112.50
Mailing Address 106 Muirfield Court			12	31	2009	
City Moorestown	State NJ	Zip Code (Plus 4) 80573954				

Full Name of Contributor				MO	DAY	YEAR	\$ 112.50
Carl R. Chudnofsky							
Mailing Address 208 Edenton Place							
City Villanova	State PA	Zip Code (Plus 4) 19085-145		12	31	2009	

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

<b>PAGE TOTAL</b>	
\$	2,177.36

**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.

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>

				DATE		AMOUNT	
<b>Full Name of Contributor</b> John J. Kelly D.O.				MO	DAY	YEAR	\$ 262.50
<b>Mailing Address</b> 8617 Seminole St							
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19118-372				
<b>Employer Name</b> Albert Einstein Healthcare Network				<b>Occupation</b> Physician / Med Staff Pre			
<b>Employer Mailing Address/Principal Place of Business</b> 5501 Old York Road			<b>City</b> Philadelphia		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19141-309
<b>Full Name of Contributor</b> Mr. Fred E. Braemer				MO	DAY	YEAR	\$ 375.00
<b>Mailing Address</b> 1500 Melrose Avenue							
<b>City</b> Elkins Park		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19027-315				
<b>Employer Name</b> Albert Einstein Healthcare Network				<b>Occupation</b> Retired			
<b>Employer Mailing Address/Principal Place of Business</b> 5501 Old York Road			<b>City</b> Philadelphia		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19141-309
<b>Full Name of Contributor</b> Ms. Dorothy L. Hanna				MO	DAY	YEAR	\$ 375.00
<b>Mailing Address</b> 5421 Pepperwood Circle							
<b>City</b> Erie		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506-390				
<b>Employer Name</b> Saint Vincent Health Center				<b>Occupation</b> Senior Vice President			
<b>Employer Mailing Address/Principal Place of Business</b> 232 West 25th Street			<b>City</b> Erie		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 165442
<b>Full Name of Contributor</b> Mr. Victor L. Johnson				MO	DAY	YEAR	\$ 750.00
<b>Mailing Address</b> Hidden Glen 1585 Warner Road							
<b>City</b> Meadowbrook		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19046-191				
<b>Employer Name</b> Retired				<b>Occupation</b> Retired			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>		<b>Zip Code (Plus 4)</b>

<b>Full Name of Contributor</b> Richard H. Fine				<b>MO</b> 12	<b>DAY</b> 7	<b>YEAR</b> 2009	<b>\$</b> 375.00
<b>Mailing Address</b> 2 Emerald Court				12	7	2009	
<b>City</b> Princeton Jct	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 85505229					
<b>Employer Name</b> Albert Einstein Healthcare Network				<b>Occupation</b> Physician			
<b>Employer Mailing Address/Principal Place of Business</b> 5501 Old York Road			<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19141-309	

  

<b>Full Name of Contributor</b> Mr. Gregory T Wozniak				<b>MO</b> 12	<b>DAY</b> 15	<b>YEAR</b> 2009	<b>\$</b> 1,000.00
<b>Mailing Address</b> Langhorne-Newtown Road				12	15	2009	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047-129					
<b>Employer Name</b> St. Mary Medical Center				<b>Occupation</b> President and Chief Execu			
<b>Employer Mailing Address/Principal Place of Business</b> Langhorne-Newtown Road			<b>City</b> Langhorne		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047-129	

  

<b>Full Name of Contributor</b> Mr. Gregory Bauer				<b>MO</b> 12	<b>DAY</b> 21	<b>YEAR</b> 2009	<b>\$</b> 375.00
<b>Mailing Address</b> 763 Johnsonburg Road				12	21	2009	
<b>City</b> St. Marys	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15857-349					
<b>Employer Name</b> Elk Regional Health Center				<b>Occupation</b> President and Chief Execu			
<b>Employer Mailing Address/Principal Place of Business</b> 763 Johnsonburg Road			<b>City</b> Saint Marys		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15857-349	

  

<b>Full Name of Contributor</b> Donald Fleming				<b>MO</b> 12	<b>DAY</b> 21	<b>YEAR</b> 2009	<b>\$</b> 375.00
<b>Mailing Address</b> B&R Electric 26 Railroad Street				12	21	2009	
<b>City</b> St. Marys	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15857-178					
<b>Employer Name</b> Elk Regional Health Center, Inc.				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b> 763 Johnsonburg Road			<b>City</b> Saint Marys		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15857-349	

  

<b>Full Name of Contributor</b> Barbara J. Cliff				<b>MO</b> 12	<b>DAY</b> 30	<b>YEAR</b> 2009	<b>\$</b> 500.00
<b>Mailing Address</b> 473 Old Farm Lane				12	30	2009	
<b>City</b> Johnstown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15904-364					
<b>Employer Name</b> Windber Medical Center				<b>Occupation</b> CEO			
<b>Employer Mailing Address/Principal Place of Business</b> 600 Somerset Avenue			<b>City</b> Windber		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15963-133	

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

**PAGE TOTAL****\$** 4,387.50

## 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.**

<b>Name of Filing Committee or Candidate</b>  Hospital & Healthsystem Assoc of PA PAC (HAPAC)	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>12/31/2009</u>
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				DATE	AMOUNT	
Full Name				MO	DAY	YEAR
Commerce / Metro Bank-PA						
Mailing Address						
3801 Paxton St						
City	State	Zip Code (Plus 4)				
Harrisburg	PA	17111		12	31	2009
Receipt Description December 2009 interest income						
Full Name				MO	DAY	YEAR
Commerce / Metro Bank-PA						
Mailing Address						
3801 Paxton St						
City	State	Zip Code (Plus 4)				
Harrisburg	PA	17111		12	31	2009
Receipt Description December 2009 interest income						
Full Name				MO	DAY	YEAR
Commerce / Metro Bank-PA						
Mailing Address						
3801 Paxton St						
City	State	Zip Code (Plus 4)				
Harrisburg	PA	17111		12	8	2009
Receipt Description November 2009 Interest income						
Full Name				MO	DAY	YEAR
Commerce / Metro Bank-PA						
Mailing Address						
3801 Paxton St						
City	State	Zip Code (Plus 4)				
Harrisburg	PA	17111		12	8	2009
Receipt Description November 2009 interest income						
Full Name				MO	DAY	YEAR
Commerce / Metro Bank-PA						
Mailing Address						
3801 Paxton St						
City	State	Zip Code (Plus 4)				
Harrisburg	PA	17111		12	8	2009
Receipt Description November 2009 interest income						

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

PAGE TOTAL	
\$	11.61

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Hospital & Healthsystem Assoc of PA PAC (HAPAC)		From: <u>1/1/2009</u> To: <u>12/31/2009</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <span style="float: right;"><b>To:</b></span>
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			DATE			AMOUNT
<b>Full Name of Contributor</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.00
<b>Mailing Address</b>						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
<b>Description of Contribution:</b>						
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>						<b>PAGE TOTAL</b>  <b>\$ 0.00</b>

**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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Hospital & Healthsystem Assoc of PA PAC (HAPAC)	From <u>1/1/2009</u> To: <u>12/31/2009</u>

				DATE	AMOUNT		
To Whom Paid Commerce / Metro Bank-PA				MO	DAY	YEAR	\$ 7.50
Mailing Address 3801 Paxton St				12	31	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17111	Description of Expenditure December 2009 bank fees				
To Whom Paid Friends of Todd Eachus				MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. Box 2174				12	30	2009	
City Hazelton	State PA	Zip Code (Plus 4) 18201	Description of Expenditure Todd Eachus, STATE HOUSE 116th PA				
To Whom Paid Friends of John Siptroth				MO	DAY	YEAR	\$ 250.00
Mailing Address 414 Airport Road				12	18	2009	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301	Description of Expenditure John Siptroth, STATE HOUSE 189th PA				
To Whom Paid Friends of Bob Mellow				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 524 Main Street P.O. Box B				12	18	2009	
City Peckville	State PA	Zip Code (Plus 4) 18452	Description of Expenditure Robert Mellow, STATE SENATE 22nd PA				
To Whom Paid Commerce / Metro Bank-PA				MO	DAY	YEAR	\$ 51.17
Mailing Address 3801 Paxton St				12	8	2009	
City Harrisburg	State PA	Zip Code (Plus 4) 17111	Description of Expenditure November 2009 bank fees				
To Whom Paid People for Matzie				MO	DAY	YEAR	\$ 150.00
Mailing Address 315 Wilson Avenue				11	25	2009	
City Ambridge	State PA	Zip Code (Plus 4) 15003	Description of Expenditure Robert Matzie, STATE HOUSE 16th PA				

To Whom Paid			MO	DAY	YEAR	\$ 250.00
Friends of Matt Bradford						
Mailing Address P.O. Box			11	25	2009	
City Norristown	State PA	Zip Code (Plus 4) 19404349	Description of Expenditure Matthew Bradford, STATE HOUSE 70th PA			
To Whom Paid			MO	DAY	YEAR	\$ 100.00
Friends of Brendan Boyle Committee						
Mailing Address 602 Avon Road			11	25	2009	
City Philadelphia	State PA	Zip Code (Plus 4) 19116	Description of Expenditure Brendan Boyle, STATE HOUSE 170th PA			
To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
The Committee to Re-elect Keith McCall						
Mailing Address P.O. Box 244			11	25	2009	
City Lansford	State PA	Zip Code (Plus 4) 18232	Description of Expenditure Keith McCall, STATE HOUSE 122nd PA			
To Whom Paid			MO	DAY	YEAR	\$ 300.00
Friends of Scott Petri						
Mailing Address P.O. Box 161			11	25	2009	
City Richboro	State PA	Zip Code (Plus 4) 18954	Description of Expenditure Scott Petri, STATE HOUSE 178th PA			
To Whom Paid			MO	DAY	YEAR	\$ 250.00
Friends of Dave Reed						
Mailing Address 550 Philadelphia Street			11	25	2009	
City Indiana	State PA	Zip Code (Plus 4) 15701	Description of Expenditure Dave Reed, STATE HOUSE 62nd PA			
To Whom Paid			MO	DAY	YEAR	\$ 200.00
Team Gillespie						
Mailing Address 5225 Picking Road			11	25	2009	
City York	State PA	Zip Code (Plus 4) 17406	Description of Expenditure Keith Gillespie, STATE HOUSE 47th PA			
To Whom Paid			MO	DAY	YEAR	\$ 150.00
Killion's Victory Cte.-Candidate for 168						
Mailing Address 50 South Providence Road			11	25	2009	
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Thomas Killion, STATE HOUSE 168th PA			
To Whom Paid			MO	DAY	YEAR	\$ 300.00
Kerry Benninghoff for Rep. Cte.						
Mailing Address 723 E. Bishop Street			11	25	2009	
City Bellefonte	State PA	Zip Code (Plus 4) 16823	Description of Expenditure Kerry Benninghoff, STATE HOUSE 171st PA			



Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$ 4,508.67

