07/23/2003 11 : 30

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

ADDRESS (number and street) ▼ P.O. Box 4449

Check if different than previously reported. (ACC)

Cary | NC | 27519 – 4449

CITY ▲ STATE ▲ ZIPCODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C00194647

3. IS THIS REPORT X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

X July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on in the State of

(d) 30-Day **P**ost -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2003 through 06 30 2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Suzanne L. Coker

Signature of Treasurer Electronically Filed by Ms. Suzanne L. Coker Date 07 23 2003

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only			**FEC FORM 3X** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name

North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

Report Covering the Period: From: 01 01 2003 To: 06 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		7465.79
(b) Cash on Hand at Begining of Reporting Period	7465.79	
(c) Total Receipts (from Line 19)	21002.00	21002.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28467.79	28467.79
7. Total Disbursements (from Line 30)	23145.41	23145.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5322.38	5322.38
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Revised 1/2001)

Write or Type Committee Name

North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

Report Covering the Period: From: 01 01 2003 To: 06 30 2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6020.00	
(ii) Unitemized	14982.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	21002.00	21002.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ..... ▶	21002.00	21002.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	21002.00	21002.00
20. Total Federal Receipts (subtract Line 16 from Line 19) ..... ▶	21002.00	21002.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	45.41	45.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	45.41	45.41
22. Transfers to Affiliated/Other Party Committees	22500.00	22500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	600.00	600.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	23145.41	23145.41
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	23145.41	23145.41
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	21002.00	21002.00
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	21002.00	21002.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	45.41	45.41
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	45.41	45.41

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 5 / 14

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A. Full Name (Last, First, Middle Initial): Mr. Dennis R Berry
Mailing Address: 107 Irving Park Court
City: Greensboro State: NC Zip Code: 27408
FEC ID number of contributing federal political committee.
Name of Employer: Moses Cone Health System
Occupation: President
Receipt For: 2004
X Primary General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 03 21 2003
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R17527

B. Full Name (Last, First, Middle Initial): Mr. Dennis R Berry
Mailing Address: 107 Irving Park Court
City: Greensboro State: NC Zip Code: 27408
FEC ID number of contributing federal political committee.
Name of Employer: Moses Cone Health System
Occupation: President
Receipt For: 2002
Primary X General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 06 05 2003
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R17785

C. Full Name (Last, First, Middle Initial): Mr. Jack A Galloway
Mailing Address: P. O. Box 922
City: Highlands State: NC Zip Code: 28741
FEC ID number of contributing federal political committee.
Name of Employer: Highlands-Cashiers Hospital
Occupation: Chief Executive Officer
Receipt For: 2002
Primary X General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 06 17 2003
Amount of Each Receipt this Period: 300.00
Check
Transaction ID: R18147

SUBTOTAL of Receipts This Page (optional) ..... ▶ **700.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 6 / 14

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A. Full Name (Last, First, Middle Initial): Mr. Christopher T Durrer
Mailing Address: 1705 Westbrook Drive
City: Wilson State: NC Zip Code: 27896
FEC ID number of contributing federal political committee.
Name of Employer: Wilson Memorial Hospital
Occupation: President / CEO
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt: 05 22 2003
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R17687

B. Full Name (Last, First, Middle Initial): Mr. Christopher T Durrer
Mailing Address: 1705 Westbrook Drive
City: Wilson State: NC Zip Code: 27896
FEC ID number of contributing federal political committee.
Name of Employer: Wilson Memorial Hospital
Occupation: President / CEO
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt: 06 23 2003
Amount of Each Receipt this Period: 120.00
Check
Transaction ID: R18271

C. Full Name (Last, First, Middle Initial): Mr. Laurence C. Hinedale
Mailing Address: 821 Tanglewood Drive, NE
City: Concord State: NC Zip Code: 28025
FEC ID number of contributing federal political committee.
Name of Employer: NorthEast Medical Center
Occupation: President/CEO
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 06 05 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17840

SUBTOTAL of Receipts This Page (optional) ..... ▶ **720.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 7 / 14

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A. Full Name (Last, First, Middle Initial): Mr. Roy M Hinson
Mailing Address: P.O. Box 1153
City: Norwood State: NC Zip Code: 28128
FEC ID number of contributing federal political committee.
Name of Employer: Stanly Memorial Hospital
Occupation: President
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 06 30 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R18455

B. Full Name (Last, First, Middle Initial): Linwood Jones
Mailing Address: 4501 Eliot Place
City: Raleigh State: NC Zip Code: 27609
FEC ID number of contributing federal political committee.
Name of Employer: NCHA
Occupation: General Counsel
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 06 05 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17820

C. Full Name (Last, First, Middle Initial): Richard Lang
Mailing Address: 2903 Bald Creek Rd.
City: Clyde State: NC Zip Code: 28721
FEC ID number of contributing federal political committee.
Name of Employer: Haywood Regional Medical Center
Occupation: Physician
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 06 05 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17894

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1200.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 8 / 14

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A. Full Name (Last, First, Middle Initial): Mr. Dave C McRae
Mailing Address: 708 Compton Rd.
City: Greenville State: NC Zip Code: 27858-6237
FEC ID number of contributing federal political committee.
Name of Employer: University Health Systems of Eastern C
Occupation: CEO
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 05 22 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17692

B. Full Name (Last, First, Middle Initial): Mr. David D Rice, Sr.
Mailing Address: 485 Summerset Drive
City: Clyde State: NC Zip Code: 28721
FEC ID number of contributing federal political committee.
Name of Employer: Haywood Regional Medical Center
Occupation: President & CEO
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 06 05 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17787

C. Full Name (Last, First, Middle Initial): Mr. James H Ross
Mailing Address: 1936-C White Hollow Drive
City: Greenville State: NC Zip Code: 27858
FEC ID number of contributing federal political committee.
Name of Employer: University Health Systems
Occupation: President
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 05 15 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17649

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1200.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 9 / 14

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A. Full Name (Last, First, Middle Initial): Mr. Wayne F Shovelin
Mailing Address: 3505 Country Club Dr.
City: Gastonia State: NC Zip Code: 28056
FEC ID number of contributing federal political committee.
Name of Employer: CaroMont Health
Occupation: President
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 05 08 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17566

B. Full Name (Last, First, Middle Initial): David S Spilers
Mailing Address: 210 Wildflower Road
City: Asheville State: NC Zip Code: 28804
FEC ID number of contributing federal political committee.
Name of Employer: Mission St. Joseph's Health System
Occupation: Chief Operating Officer
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 06 11 2003
Amount of Each Receipt this Period: 300.00
Check
Transaction ID: R18021

C. Full Name (Last, First, Middle Initial): Dean Swindle
Mailing Address: 524 Oaklawn Avenue
City: Winston-Salem State: NC Zip Code: 27104
FEC ID number of contributing federal political committee.
Name of Employer: NoventHealth
Occupation: Senior VP, Finance
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 05 02 2003
Amount of Each Receipt this Period: 300.00
Check
Transaction ID: R17539

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 10 / 14

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A.
Full Name (Last, First, Middle Initial): Sharon Tanner
Mailing Address: 4 Bateman Dr.
City: Elizabeth City State: NC Zip Code: 27909
FEC ID number of contributing federal political committee.
Name of Employer: Albemarle Hospital
Occupation: President & CEO
Receipt For: 2004
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 03 21 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17531

B.
Full Name (Last, First, Middle Initial): Mr. Michael C Tarwater
Mailing Address: 2137 Dilworth Rd., E.
City: Charlotte State: NC Zip Code: 28203
FEC ID number of contributing federal political committee.
Name of Employer: Carolinas HealthCare System
Occupation: Executive Vice President
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 06 27 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R18344

C.
Full Name (Last, First, Middle Initial): Frederick G Thompson, Ph.D
Mailing Address: 127 Trexler Drive
City: Wadesboro State: NC Zip Code: 28170
FEC ID number of contributing federal political committee.
Name of Employer: Anson County Hospital
Occupation: CEO
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 05 08 2003
Amount of Each Receipt this Period: 400.00
Check
Transaction ID: R17560

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1200.00**

TOTAL This Period (last page this line number only) ..... ▶ **6020.00**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A.
Full Name (Last, First, Middle Initial)
Wachovia Bank & Trust

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary General / Other (specify)

Date of Disbursement
03 12 2003

Amount of Each Disbursement this Period
4.40

Bank Charges

Transaction ID: D882

B.
Full Name (Last, First, Middle Initial)
Wachovia Bank & Trust

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary General / Other (specify)

Date of Disbursement
04 10 2003

Amount of Each Disbursement this Period
4.40

Bank Charges

Transaction ID: D883

C.
Full Name (Last, First, Middle Initial)
Wachovia Bank & Trust

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary General / Other (specify)

Date of Disbursement
05 06 2003

Amount of Each Disbursement this Period
4.40

Bank Charges

Transaction ID: D884

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **13.20**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A.
Full Name (Last, First, Middle Initial)
Wachovia Bank & Trust

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement
06 30 2003

Amount of Each Disbursement this Period
12.00

Bank Charges

Transaction ID: D885

B.
Full Name (Last, First, Middle Initial)
Wachovia Bank & Trust

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement
06 11 2003

Amount of Each Disbursement this Period
13.00

Bank Charges

Transaction ID: D886

C.
Full Name (Last, First, Middle Initial)
Wachovia

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Category/ Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement
06 11 2003

Amount of Each Disbursement this Period
7.21

Bank Charges

Transaction ID: D888

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **32.21**

TOTAL This Period (last page this line number only) ..... ▶ **45.41**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

☐ 21b	☒ 22	☐ 23	☐ 24	☐ 25	
☐ 26	☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A.

Full Name (Last, First, Middle Initial)
AHAPAC

Mailing Address
325 Seventh Street, NW

City: Washington
State: DC
Zip Code: 20004

Purpose of Disbursement
Contribution to Affiliated Federal PAC

Candidate Name
AHAPAC

Office Sought: House / Senate / President
State: DC District:

Disbursement For: 2004
X Primary / General / Other (specify)

Category/Type: Contribution to Affiliated Federal PAC

Date of Disbursement: 03 / 28 / 2003

Amount of Each Disbursement this Period: 7000.00

Transaction ID: D871

B.

Full Name (Last, First, Middle Initial)
AHAPAC

Mailing Address
325 Seventh Street, NW

City: Washington
State: DC
Zip Code: 20004

Purpose of Disbursement
Transfer to Affiliated PAC

Candidate Name
AHAPAC

Office Sought: House / Senate / President
State: DC District:

Disbursement For: 2003
Primary / General / X Other (specify)
Other

Category/Type: Transfer to Affiliated PAC

Date of Disbursement: 06 / 27 / 2003

Amount of Each Disbursement this Period: 15500.00

Transaction ID: D873

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **22500.00**

TOTAL This Period (last page this line number only) ..... ▶ **22500.00**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	
☐ 26	☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29

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NAME OF COMMITTEE (In Full)
North Carolina Hospital Association Political Action Committee - Federal (HOSPAC-Federal

A.

Full Name (Last, First, Middle Initial)
Charles Taylor for Congress Committee

Mailing Address
22 South Pack Square Suite 201 PO Box 2355

City	State	Zip Code
Asheville	NC	28801

Purpose of Disbursement
Contribution: Charles H. Taylor (NC-11-R

Candidate Name
Charles H. Taylor (NC-11-R)

Office Sought: X House / Senate / President
State: NC District: 11

Disbursement For: 2004
X Primary / General / Other (specify)

Date of Disbursement
05 22 2003

Amount of Each Disbursement this Period
600.00

Category/Type
Contribution: Charles H. Taylor (NC-11-R)

Transaction ID: D872

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**600.00**
TOTAL This Period (last page this line number only) ..... ▶	**600.00**