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REIMBURSEMENT TECHNOLOGIES INC

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2004 MAR 29 A 10:47

March 23, 2004

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

To Whom It May Concern:

As per instructions for filing, you will find enclosed the FEC Form 1 Statement of Organization for the EmCare Political Action Committee.

Thank you for your prompt attention to this matter.

Sincerely,

Gregory W. Hufstetler

Gregory W. Hufstetler, VP
Reimbursement & Regulatory Affairs
800-355-3818 ext. 5040

GH/bb
Encl.

GHufstetler/FEC_filingletter_032304

1000 River Road • Suite 100 • Conshohocken, PA 19428-2437 • (610) 834-9100 • (800) 355-0808 • Fax: (610) 834-9292
An EmCare Subsidiary

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FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

EMCARE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1717 MAIN STREET

SUITE 5200

☐ (Check if address is changed)

DALLAS TX 75201-7365

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

GREG_HUFSTETLER@EMCARE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

610-834-2829

2. DATE 03 22 2004

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT ☒ NEW (N) OR ☐ AMENDED (A)

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

Type or Print Name of Treasurer Gregory W. Hufstetler

Signature of Treasurer Gregory W. Hufstetler Date 03 22 2004

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

(a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)

(b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought: ☐ House ☐ Senate ☐ President State District

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee

Name of Candidate

(d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party

(e) ☒ This committee is a separate segregated fund.

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

EMCARE INC.

Mailing Address 1717 MAIN STREET
SUITE 5200
DALLAS TX 75201-7365

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED

Type of Connected Organization:

☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

EMCARE POLITICAL ACTION COMMITTEE

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: GREGORY W. HUFSTETLER

Mailing Address: 1000 RIVER ROAD
SUITE 100
CONSHOHOCKEN | PA | 19428-2937

Title or Position ▼: TREASURER

CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 610-834-2828

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: GREGORY W. HUFSTETLER

Mailing Address: 1000 RIVER ROAD
SUITE 100
CONSHOHOCKEN | PA | 19428-2937

Title or Position ▼: TREASURER

CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 610-834-2828

Full Name of Designated Agent: JOHN RANIERI

Mailing Address: 1000 RIVER ROAD
SUITE 100
CONSHOCKEN | PA | 19428-2937

Title or Position ▼: ADMINISTRATOR

CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 610-834-2828

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BANK ONE

Mailing Address

P.O. BOX 655415

DALLAS | TX | 75265-5415

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☑ USPS Registered/Certified/Priority/Express Mail	Postmarked (R/C) 3-24-04
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☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	3-29-04 DATE PREPARED

(2/2004)