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2008 SEP -2 AM 8: 14

August 26, 2008

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

Re: Harborside Healthcare Corporation PAC ("HHC PAC")  
FEC ID# C00350074

Dear Sir/Madam:

Enclosed please find the following:

- Amended FEC Form 1 identifying HHC PAC's new treasurer and disclosing the affiliation with Sun Healthcare Group, Inc. Political Action Committee dba Sun HealthCare PAC (FEC ID# C00398826);
- FEC Form 3X July 31 Mid-Year Report covering January 1, 2007 - June 30, 2007;
- FEC Form 3X January 31 Year-End Report covering July 1, 2007 - December 31, 2007;
- FEC Form 3X April 15 Quarterly Report covering January 1, 2008 - March 31, 2008; and
- FEC Form 3X July 15 Quarterly Report covering April 1, 2008 - June 30, 2008.

Sun Healthcare Group, Inc. acquired Harborside Healthcare Corporation ("Harborside"), HHC PAC's connected organization, on April 19, 2007. During the transition and the relocation of Harborside's corporate function to Albuquerque, New Mexico and Irvine, California, we inadvertently failed to timely file HHC PAC's reports. Also, because of the significant management changes and the office move, receipt of the FEC's notification letters was delayed. Upon

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receiving the letters and becoming aware of the deficiency, we contacted the FEC and election law counsel so that we would take the appropriate steps to ensure that all filings for HHC PAC are current and in compliance. The enclosed reports respond to your letters dated 8/16/07, 2/19/08, 4/30/08. and 7/31/08.

If you have any questions, please contact me at (505) 468-4101.

Sincerely,



David W. Mason  
Treasurer

Enclosures

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FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Harborside Healthcare Corporation PAC

ADDRESS (number and street)

101 Sun Avenue NE

(Check if address  
is changed)

Albuquerque

NM

87109

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

dmason@sunh.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

505 - 468 - 4023

2. DATE

04 / 19 / 2007

3. FEC IDENTIFICATION NUMBER

C 00350074

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

David W. Mason

Signature of Treasurer

*David W. Mason*

Date

08 / 26 / 2008

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 12/2007)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (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 \_\_\_\_\_

Party Committee:

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

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
2. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
3. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
4. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
5. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_

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Write or Type Committee Name

Harborside Healthcare Corporation PAC

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Harborside Healthcare Corporation

Mailing Address

101 Sun Avenue NE  
Albuquerque NM 87109  
CITY STATE ZIP CODE

Relationship:

- Connected Organization (checked)
Affiliated Committee
Leadership PAC Sponsor
Joint Fundraising Representative

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: David W. Mason
Mailing Address: 101 Sun Avenue NE, Albuquerque NM 87109
Title or Position: Treasurer Telephone number: 505-468-4101

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: David W. Mason
Mailing Address: 101 Sun Avenue NE, Albuquerque NM 87109
Title or Position: Treasurer Telephone number: 505-468-4101

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Write or Type Committee Name

Harborside Healthcare Corporation PAC

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Sun Healthcare Group, Inc. Political Action Committee  
dba Sun HealthCare PAC

Mailing Address

101 Sun Avenue NE  
Albuquerque NM 87109  
CITY STATE ZIP CODE

Relationship:

- Connected Organization
[X] Affiliated Committee
Leadership PAC Sponsor
Joint Fundraising Representative

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

Mailing Address

Title or Position

Telephone number

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

Mailing Address

Title or Position

Telephone number

28039823300

Full Name of Designated Agent

David W. Mason

Mailing Address

101 Sun Avenue NE

Albuquerque NM 87109

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number 505-468-4101

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.

JP Morgan Chase Bank

Mailing Address

P O Box 260180

Baton Rouge LA 70826

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

28039823301

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 Postmarked (R/C)  
8/27/08

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

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

*Jm*  
 PREPARER

9/2/08  
 DATE PREPARED

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