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December 20, 2017

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

Dear Sirs:

Attached please find the Report of Receipts and Disbursements (Form 3X) for the Health Partners of Philadelphia, Inc. Political Action Committee (FEC ID C00484246) for the period November 1, 2017 thru November 30, 2017. You may contact me at 215.991.4419 or radams@hpplans.com if you have any questions concerning this form.

Sincerely,



Ronnetta Adams
Treasurer
Health Partners Inc PAC

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Health Partners of Philadelphia, Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		4803.23
(b) Cash on Hand at Beginning of Reporting Period.....	8116.73	
(c) Total Receipts (from Line 19)	0.00	3313.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	8116.73	8116.73
7. Total Disbursements (from Line 31).....	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8116.73	8116.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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 (Rev. 06/2004)

Page 3

Write or Type Committee Name
Health Partners Of Philadelphia, Inc. Political Action Committee

Report Covering the Period: From: 11 / 01 / 2017 To: 11 / 30 / 2017

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).....		
(ii) Unitemized.....	455.00	3313.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	455.00	3313.50
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	455.00	3313.50
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	455.00	3313.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	455.00	3313.50

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share			
(ii) Non-Federal Share			
(b) Other Federal Operating Expenditures	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	
24. Independent Expenditures (use Schedule E)			
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees			
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))			
29. Other Disbursements			
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share			
(ii) "Levin" Share			
(b) Federal Election Activity Paid Entirely With Federal Funds			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))			
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0.00	0.00	

NON-FEDERAL SHARE

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3)	455.00	3313.50
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

NON-FEDERAL CAMPAIGN DISBURSEMENTS

**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)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Health Partners of Philadelphia, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) _____ Mailing Address _____ City _____ State _____ Zip Code _____ Purpose of Disbursement _____ Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ _____		Date of Disbursement M M M / D D D / Y Y Y Y Y Y _____ / _____ / _____ Amount of Each Disbursement this Period _____
B. Full Name (Last, First, Middle Initial) _____ Mailing Address _____ City _____ State _____ Zip Code _____ Purpose of Disbursement _____ Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ _____		Date of Disbursement M M M / D D D / Y Y Y Y Y Y _____ / _____ / _____ Amount of Each Disbursement this Period _____
C. Full Name (Last, First, Middle Initial) _____ Mailing Address _____ City _____ State _____ Zip Code _____ Purpose of Disbursement _____ Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____		Date of Disbursement M M M / D D D / Y Y Y Y Y Y _____ / _____ / _____ Amount of Each Disbursement this Period _____
SUBTOTAL of Disbursements This Page (optional)..... ▶		_____
TOTAL This Period (last page this line number only)..... ▶		_____

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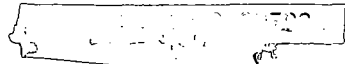
STATEMENT OF ACCOUNT

HEALTH PARTNERS OF PHILADELPHIA INC
FEDERAL POLITICAL ACTION COMMITTEE
901 MARKET ST STE 500
PHILADELPHIA PA 19107

Page: 1 of 2
Statement Period: Nov 01 2017-Nov 30 2017
Cust Ref #: 4250500703-420-E-###
Primary Account #: [REDACTED]

NP Advantage Checking

HEALTH PARTNERS OF PHILADELPHIA INC
FEDERAL POLITICAL ACTION COMMITTEE



ACCOUNT SUMMARY

Beginning Balance	8,116.73	Average Collected Balance	8,116.73
Ending Balance	8,116.73	Interest Earned This Period	0.00
		Interest Paid Year-to-Date	0.00
		Annual Percentage Yield Earned	0.00%
		Days in Period	30

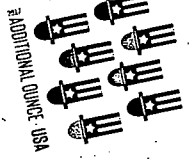
DAILY ACCOUNT ACTIVITY

No Transactions this Statement Period

11/30/2017 10:00 AM

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401 Market Street
Ste 500
Philadelphia PA 19107

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

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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.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Bew S

PREPARER

(3/2015)

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