

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

ADDRESS (number and street) 1108 Lavaca Suite 700 Check if different than previously reported. (ACC) Austin TX 78701

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00301325 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

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 Jennifer C Banda

Signature of Treasurer Ms Jennifer C Banda [Electronically Filed] Date 01 / 27 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

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="2015"/>	<input type="text" value="2679.33"/>	<input type="text" value="2679.33"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17610.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="31713.61"/>	<input type="text" value="71670.22"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="49324.60"/>	<input type="text" value="74349.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="47010.60"/>	<input type="text" value="72035.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2314.00"/>	<input type="text" value="2314.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

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

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).....	26356.61	56713.02
(ii) Unitemized	5357.00	14957.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	31713.61	71670.22
(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 33, page 5)	31713.61	71670.22
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 37, page 5).....	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 Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	31713.61	71670.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	31713.61	71670.22

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10.60	35.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10.60	35.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	47000.00	72000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	47010.60	72035.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47010.60	72035.55

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)	31713.61	71670.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31713.61	71670.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10.60	35.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10.60	35.55

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Dianne Adelfio
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6400

City Tyler	State TX	Zip Code 75711-6400
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer East Texas Medical Center Tyler	Occupation Vice President Operations
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

Transaction ID : AFE4106FD220D413CB99

Amount of Each Receipt this Period
250.00

B. Mr Norman Archibald
Full Name (Last, First, Middle Initial)
Mailing Address 1900 Pine St

City Abilene	State TX	Zip Code 79601-2432
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Hendrick Medical Center	Occupation Vice President, Foundation
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

Transaction ID : ADD2A37E5FBE2403A85D

Amount of Each Receipt this Period
19.23

C. Mr Norman Archibald
Full Name (Last, First, Middle Initial)
Mailing Address 1900 Pine St

City Abilene	State TX	Zip Code 79601-2432
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Hendrick Medical Center	Occupation Vice President, Foundation
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : A73CDB54C48B74E90BCB

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional).....▶	288.46
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015
Transaction ID : AA20CDB7D0CF348E3AD4
 Amount of Each Receipt this Period
 19.23

B. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.91

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015
Transaction ID : A97C202F5F3864792857
 Amount of Each Receipt this Period
 19.23

C. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : AD8AC2EF9933F4E26AD2
 Amount of Each Receipt this Period
 19.23

SUBTOTAL of Receipts This Page (optional).....▶	57.69
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 22 / 2015
Transaction ID : A135F5529A7F646FAB7D
 Amount of Each Receipt this Period 19.23

B. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 09 / 29 / 2015
Transaction ID : A141B599EDAD848E6BFE
 Amount of Each Receipt this Period 19.23

C. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 403.83

Date of Receipt 10 / 13 / 2015
Transaction ID : A3B18706C500741E4A4E
 Amount of Each Receipt this Period 19.23

SUBTOTAL of Receipts This Page (optional).....▶	57.69
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2015
Transaction ID : AFB19B61CCB8E4B55ABC
 Amount of Each Receipt this Period
 19.23

B. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 10 / 2015
Transaction ID : AE0931B4BBC6549F0A06
 Amount of Each Receipt this Period
 19.23

C. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : A6521737EC44442E4A54
 Amount of Each Receipt this Period
 19.23

SUBTOTAL of Receipts This Page (optional).....▶	57.69
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **480.75**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2015
Transaction ID : A9BC2EB1BD7DF4C29A8E
 Amount of Each Receipt this Period
19.23

B. Mr Norman Archibald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation Vice President, Foundation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **499.98**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2015
Transaction ID : A51AE7A33E80147899CA
 Amount of Each Receipt this Period
19.23

C. Mr Charles W Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Sr Vice President / Gen Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **291.76**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2015
Transaction ID : A06BA141176794CCC904
 Amount of Each Receipt this Period
41.68

SUBTOTAL of Receipts This Page (optional).....	80.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Charles W Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Sr Vice President / Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : AE1F65D2AA40446E4B8E
 Amount of Each Receipt this Period
 41.68

B. Mr Charles W Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Sr Vice President / Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015
Transaction ID : A3CE906F7A4774E53AE0
 Amount of Each Receipt this Period
 41.68

C. Mr Charles W Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Sr Vice President / Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2015
Transaction ID : A142B102E6D9B4252A88
 Amount of Each Receipt this Period
 41.68

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.04
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Charles W Bailey
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation Sr Vice President / Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
458.48

Date of Receipt
11 / 24 / 2015
Transaction ID : A54F05428576D49A892D

Amount of Each Receipt this Period
41.68

B. Mr Charles W Bailey
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation Sr Vice President / Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.16

Date of Receipt
12 / 22 / 2015
Transaction ID : A214D129F119C4294AAA

Amount of Each Receipt this Period
41.68

C. Mr Joel Ballew
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd
Ste 1500

City Arlington State TX Zip Code 76011-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Government & Comm Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.00

Date of Receipt
07 / 07 / 2015
Transaction ID : ACC1B616EECA242BB940

Amount of Each Receipt this Period
41.50

SUBTOTAL of Receipts This Page (optional).....▶ 124.86

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Joel Ballew
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd
Ste 1500

City Arlington State TX Zip Code 76011-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Government & Comm Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.50

Date of Receipt
08 / 07 / 2015
Transaction ID : **A3E14E54DDC1042289B2**

Amount of Each Receipt this Period
41.50

B. Mr Joel Ballew
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd
Ste 1500

City Arlington State TX Zip Code 76011-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Government & Comm Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt
09 / 07 / 2015
Transaction ID : **AA9E7761446BE4E54AF7**

Amount of Each Receipt this Period
41.50

C. Mr Joel Ballew
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd
Ste 1500

City Arlington State TX Zip Code 76011-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Government & Comm Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.50

Date of Receipt
10 / 07 / 2015
Transaction ID : **A04BEDB5EB6B347669DD**

Amount of Each Receipt this Period
41.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.50

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Joel Ballew
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd
Ste 1500

City Arlington State TX Zip Code 76011-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Government & Comm Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
11 / 07 / 2015
Transaction ID : **A22DDBE60A5CD4A01BF**

Amount of Each Receipt this Period
41.50

B. Mr Joel Ballew
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd
Ste 1500

City Arlington State TX Zip Code 76011-4135

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Government & Comm Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.50

Date of Receipt
12 / 07 / 2015
Transaction ID : **A24FBEFF0159A436880B**

Amount of Each Receipt this Period
41.50

C. Ms Jennifer C Banda
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation VP Advocacy/Public Policy/HOSPAC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
07 / 21 / 2015
Transaction ID : **A90923DCA4F6147E497A**

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Jennifer C Banda
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Advocacy/Public Policy/HOSPAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 08 / 31 / 2015
Transaction ID : AFFDA5F767D984588A6F
 Amount of Each Receipt this Period
 41.00

B. Ms Jennifer C Banda
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Advocacy/Public Policy/HOSPAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 369.00

Date of Receipt
 09 / 29 / 2015
Transaction ID : A94E37FB774204629A06
 Amount of Each Receipt this Period
 41.00

C. Ms Jennifer C Banda
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Advocacy/Public Policy/HOSPAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 10 / 27 / 2015
Transaction ID : AFBF8A02088D14A3680B
 Amount of Each Receipt this Period
 41.00

SUBTOTAL of Receipts This Page (optional).....▶	123.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Jennifer C Banda
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation VP Advocacy/Public Policy/HOSPAC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
451.00

Date of Receipt
11 / 24 / 2015
Transaction ID : A06BD12E32405436FB0D

Amount of Each Receipt this Period
41.00

B. Ms Jennifer C Banda
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation VP Advocacy/Public Policy/HOSPAC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
492.00

Date of Receipt
12 / 22 / 2015
Transaction ID : A2D5683AB07CE43CE9BC

Amount of Each Receipt this Period
41.00

C. Dr T M Barrett M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 6901 Medical Pkwy

City Waco State TX Zip Code 76712-7910

FEC ID number of contributing federal political committee. **C**

Name of Employer Providence Healthcare Network Occupation Sr VP Medical Affairs / CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
11 / 07 / 2015
Transaction ID : A5C86FFDF009C4120BAA

Amount of Each Receipt this Period
20.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.50

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Dr T M Barrett M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 Medical Pkwy
 City Waco State TX Zip Code 76712-7910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Providence Healthcare Network Occupation Sr VP Medical Affairs / CMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.50**

Date of Receipt **12 / 07 / 2015**
Transaction ID : AA351E9B8BC014447B6C
 Amount of Each Receipt this Period **20.50**

B. Ms Donna Boatright
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 690
 City Sweetwater State TX Zip Code 79556-0690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rolling Plains Memorial Hospital Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **205.00**

Date of Receipt **10 / 07 / 2015**
Transaction ID : ADE52E0DC72A64972BAB
 Amount of Each Receipt this Period **20.50**

C. Ms Donna Boatright
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 690
 City Sweetwater State TX Zip Code 79556-0690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rolling Plains Memorial Hospital Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.50**

Date of Receipt **11 / 07 / 2015**
Transaction ID : A726648FB5F954A81907
 Amount of Each Receipt this Period **20.50**

SUBTOTAL of Receipts This Page (optional)..... **61.50**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial) A. Ms Donna Boatright		Date of Receipt
Mailing Address PO Box 690		M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2015
City	State	Zip Code
Sweetwater	TX	79556-0690
FEC ID number of contributing federal political committee.		Transaction ID : A55A5C1009CEF4AFF9FE
C		Amount of Each Receipt this Period
		20.50
Name of Employer	Occupation	
Rolling Plains Memorial Hospital	Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		246.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Jeffrey A Bourgeois		Date of Receipt
Mailing Address 11212 State Highway 151		M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2015
City	State	Zip Code
San Antonio	TX	78251-4498
FEC ID number of contributing federal political committee.		Transaction ID : A931F2A2F9F4E45FC8CA
C		Amount of Each Receipt this Period
		41.50
Name of Employer	Occupation	
CHRISTUS Santa Rosa Westover Hills	President / Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		290.50
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Jeffrey A Bourgeois		Date of Receipt
Mailing Address 11212 State Highway 151		M M M / D D D / Y Y Y Y Y Y 08 / 07 / 2015
City	State	Zip Code
San Antonio	TX	78251-4498
FEC ID number of contributing federal political committee.		Transaction ID : A37EE5B70A93A49FC8D2
C		Amount of Each Receipt this Period
		41.50
Name of Employer	Occupation	
CHRISTUS Santa Rosa Westover Hills	President / Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		332.00
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	103.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Jeffrey A Bourgeois
 Full Name (Last, First, Middle Initial)
 Mailing Address 11212 State Highway 151
 City San Antonio State TX Zip Code 78251-4498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRISTUS Santa Rosa Westover Hills Occupation President / Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 373.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2015
Transaction ID : A42813E3E4462484488D
 Amount of Each Receipt this Period
 41.50

B. Mr Jeffrey A Bourgeois
 Full Name (Last, First, Middle Initial)
 Mailing Address 11212 State Highway 151
 City San Antonio State TX Zip Code 78251-4498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRISTUS Santa Rosa Westover Hills Occupation President / Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2015
Transaction ID : AE7EAB329415D4872946
 Amount of Each Receipt this Period
 41.50

C. Mr Jeffrey A Bourgeois
 Full Name (Last, First, Middle Initial)
 Mailing Address 11212 State Highway 151
 City San Antonio State TX Zip Code 78251-4498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRISTUS Santa Rosa Westover Hills Occupation President / Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015
Transaction ID : AABF70D2AAE7A4A0388C
 Amount of Each Receipt this Period
 41.50

SUBTOTAL of Receipts This Page (optional).....▶	124.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Jeffrey A Bourgeois
 Full Name (Last, First, Middle Initial)
 Mailing Address 11212 State Highway 151
 City San Antonio State TX Zip Code 78251-4498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRISTUS Santa Rosa Westover Hills Occupation President / Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.00

Date of Receipt 12 / 07 / 2015
Transaction ID : A6BE5DAED62B24636837
 Amount of Each Receipt this Period 41.50

B. Mr Stephen Bowerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Rosalind Redfern Grover Pkwy
 City Midland State TX Zip Code 79701-5846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midland Memorial Hospital Occupation SVP / Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 07 / 2015
Transaction ID : A51C4150A5E5B4FF2B7B
 Amount of Each Receipt this Period 20.50

C. Mr Stephen Bowerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Rosalind Redfern Grover Pkwy
 City Midland State TX Zip Code 79701-5846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midland Memorial Hospital Occupation SVP / Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.50

Date of Receipt 11 / 07 / 2015
Transaction ID : A0B4CB42EA72F420AB61
 Amount of Each Receipt this Period 20.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Stephen Bowerman
Full Name (Last, First, Middle Initial)

Mailing Address 400 Rosalind Redfern Grover Pkwy

City Midland State TX Zip Code 79701-5846

FEC ID number of contributing federal political committee. **C**

Name of Employer Midland Memorial Hospital Occupation SVP / Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt
12 / 07 / 2015
Transaction ID : A0A8C64564D6340408EF

Amount of Each Receipt this Period
20.50

B. Mr Brian Brennan
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6400

City Tyler State TX Zip Code 75711-6400

FEC ID number of contributing federal political committee. **C**

Name of Employer East Texas Medical Center Regional Hea Occupation Vice President Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 01 / 2015
Transaction ID : AD3CE496A5A2B497CA04

Amount of Each Receipt this Period
250.00

c. Dr Jeffrey L Canose
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd Ste 900

City Arlington State TX Zip Code 76011-4130

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation Chief Operating Officer/Sr EVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
08 / 07 / 2015
Transaction ID : A10EAF74675164EAEA9B

Amount of Each Receipt this Period
917.00

SUBTOTAL of Receipts This Page (optional).....▶ 1187.50

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Stacy Cantu
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Healthcare Trustees Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
07 / 21 / 2015
Transaction ID : A287DAF0B33DA47FC8CD

Amount of Each Receipt this Period
41.00

B. Ms Stacy Cantu
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Healthcare Trustees Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt
08 / 31 / 2015
Transaction ID : AE3F8B7AEBCEC4891A63

Amount of Each Receipt this Period
41.00

c. Ms Stacy Cantu
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Healthcare Trustees Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
369.00

Date of Receipt
09 / 29 / 2015
Transaction ID : A697C23188D0B4F99AD7

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional).....▶	123.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Stacy Cantu
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Healthcare Trustees Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
10 / 27 / 2015
Transaction ID : AD1F855908B2B4A1386D

Amount of Each Receipt this Period
41.00

B. Ms Stacy Cantu
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Healthcare Trustees Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt
11 / 24 / 2015
Transaction ID : A0D87FAF482344F7D9CE

Amount of Each Receipt this Period
41.00

c. Ms Stacy Cantu
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Healthcare Trustees Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.00

Date of Receipt
12 / 22 / 2015
Transaction ID : A5B4893BBAF30466D83E

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional).....▶ 123.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial) A. Ms Susie Cassle		Date of Receipt
Mailing Address 1900 Pine St		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Abilene State TX Zip Code 79601-2432		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A7526AF381B184D8AB17
Name of Employer Hendrick Medical Center Occupation Vice President/CNO		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) B. Mr John M Checkley		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Austin State TX Zip Code 78701-2180		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A4AE26DFD470C4F05901
Name of Employer HealthSHARE Occupation Pres/CEO Healthshare		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="82.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="574.00"/>		

Full Name (Last, First, Middle Initial) C. Mr John M Checkley		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Austin State TX Zip Code 78701-2180		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AFF8262F7E4E04641944
Name of Employer HealthSHARE Occupation Pres/CEO Healthshare		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="82.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="656.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="414.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial) A. Mr John M Checkley		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A22FC2E4F46EB427EA77
Name of Employer HealthSHARE	Occupation Pres/CEO Healthshare	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="82.00"/>
	<input type="text" value="738.00"/>	

Full Name (Last, First, Middle Initial) B. Mr John M Checkley		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2E4CD521080841E4A9C
Name of Employer HealthSHARE	Occupation Pres/CEO Healthshare	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="82.00"/>
	<input type="text" value="820.00"/>	

Full Name (Last, First, Middle Initial) C. Mr John M Checkley		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2015"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AE1B8954D93CD4B32BE7
Name of Employer HealthSHARE	Occupation Pres/CEO Healthshare	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="82.00"/>
	<input type="text" value="902.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="246.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 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)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr John M Checkley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSHARE Occupation Pres/CEO Healthshare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 984.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2015
Transaction ID : A923D4EE57C6D49AC994
 Amount of Each Receipt this Period
 82.00

B. Ms Joan S Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 E Lamar Blvd
 Ste 900
 City Arlington State TX Zip Code 76011-4130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Resources Occupation Sr VP System Chief Nurse Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2015
Transaction ID : AEEA70B3D38C6445E954
 Amount of Each Receipt this Period
 250.00

C. Ms Taylor Coffey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1828 16th St N
 Apt 2
 City Arlington State VA Zip Code 22209-2838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Vice President of Federal Affair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2015
Transaction ID : A75A6457CA35A4DCDA68
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	582.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr George S Conklin
 Full Name (Last, First, Middle Initial)
 Mailing Address 919 Hidden Rdg
 City Irving State TX Zip Code 75038-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRISTUS Health Occupation Sr VP Information Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **07 / 29 / 2015**
Transaction ID : AE17B1AC419084805B68
 Amount of Each Receipt this Period **250.00**

B. Mr Craig A Cordola
 Full Name (Last, First, Middle Initial)
 Mailing Address 6411 Fannin St
 City Houston State TX Zip Code 77030-1501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Texas Medical Center Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 15 / 2015**
Transaction ID : A84701F7FC40F4127ACE
 Amount of Each Receipt this Period **250.00**

C. Mr Michael H Covert
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 20269
 City Houston State TX Zip Code 77225-0269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Lukes Episcopal Health System Occupation President/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 30 / 2015**
Transaction ID : AA584F89CB6C746AEA4F
 Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Elmer G Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 6400
 City Tyler State TX Zip Code 75711-6400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer East Texas Medical Center Regional Hea Occupation President / CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2015
Transaction ID : AD6AA0AF6B12747848F9
 Amount of Each Receipt this Period
500.00

B. Mr Brett Esrock FACHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 Medical Pkwy
 City Waco State TX Zip Code 76712-7910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Providence Healthcare Network Occupation President/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : A9D856080B47341B7B09
 Amount of Each Receipt this Period
250.00

C. Mr Matthew Feehery
 Full Name (Last, First, Middle Initial)
 Mailing Address 3033 Gessner Rd
 City Houston State TX Zip Code 77080-1000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Prevention Recovery C Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015
Transaction ID : A1F82DE85C64C4388BE4
 Amount of Each Receipt this Period
250.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Dr John A Gillean
Full Name (Last, First, Middle Initial)

Mailing Address 919 Hidden Rdg

City Irving State TX Zip Code 75038-3813

FEC ID number of contributing federal political committee. **C**

Name of Employer CHRISTUS Health Occupation EVP/Chief Clinical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2015

Transaction ID : A3892F62F9BDD4C95880

Amount of Each Receipt this Period
 500.00

B. Ms Susan E Griffin
Full Name (Last, First, Middle Initial)

Mailing Address 8109 Fredericksburg Rd

City San Antonio State TX Zip Code 78229-3311

FEC ID number of contributing federal political committee. **C**

Name of Employer Methodist Healthcare System of San Ant Occupation System Chief Nursing Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : AA2E4657628BA470D864

Amount of Each Receipt this Period
 250.00

C. Ms Paula Hagan
Full Name (Last, First, Middle Initial)

Mailing Address 612 E Lamar Blvd Ste 900

City Arlington State TX Zip Code 76011-4130

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation VP Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2015

Transaction ID : A8937F11F92FB46F388C

Amount of Each Receipt this Period
 250.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial) A. Mr John M Hawkins		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A76C293CE61D649DEB40
Name of Employer Texas Hospital Association		Amount of Each Receipt this Period
Occupation SVP Advocacy & Public Policy		<input type="text" value="90.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="630.00"/>	

Full Name (Last, First, Middle Initial) B. Mr John M Hawkins		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A3CA2330EFC23456CA7C
Name of Employer Texas Hospital Association		Amount of Each Receipt this Period
Occupation SVP Advocacy & Public Policy		<input type="text" value="90.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="720.00"/>	

Full Name (Last, First, Middle Initial) C. Mr John M Hawkins		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A1237D296D9EE41C2B3A
Name of Employer Texas Hospital Association		Amount of Each Receipt this Period
Occupation SVP Advocacy & Public Policy		<input type="text" value="90.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="810.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr John M Hawkins
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation SVP Advocacy & Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
10 / 27 / 2015
Transaction ID : A755C02740DDF43EC863

Amount of Each Receipt this Period
90.00

B. Mr John M Hawkins
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation SVP Advocacy & Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
990.00

Date of Receipt
11 / 24 / 2015
Transaction ID : ACC7EEEDF5CB742BDA7/

Amount of Each Receipt this Period
90.00

C. Mr John M Hawkins
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation SVP Advocacy & Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt
12 / 22 / 2015
Transaction ID : AA22169E4AA6F4A5BBBF

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Perry Henderson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6400

City Tyler	State TX	Zip Code 75711-6400
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer East Texas Medical Center Regional Hea	Occupation Sr VP Affiliate Operations
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : ABBF1F9984F91404CB09

Amount of Each Receipt this Period
250.00

B. Mr Marshall E Hicks
Full Name (Last, First, Middle Initial)
Mailing Address 1515 Holcombe Blvd
Unit 1491

City Houston	State TX	Zip Code 77030-4000
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer The University of TX MD Anderson Cance	Occupation Supervisor Diagnostic Imaging
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2015

Transaction ID : A5A9429677D4945E981E

Amount of Each Receipt this Period
250.00

C. Mr David D Huffstutler
Full Name (Last, First, Middle Initial)
Mailing Address 98 San Jacinto Blvd
Ste 1800

City Austin	State TX	Zip Code 78701-4237
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer St. David's HealthCare	Occupation President / CEO
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2015

Transaction ID : A136051CBC27C467084F

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Sally A Hurt-Deitch
Full Name (Last, First, Middle Initial)
Mailing Address 2001 N Oregon St
City El Paso State TX Zip Code 79902-3320
FEC ID number of contributing federal political committee. **C**
Name of Employer Sierra Providence Health Network Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 584.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2015
Transaction ID : A207CE505617B45E3A04
Amount of Each Receipt this Period
83.50

B. Ms Sally A Hurt-Deitch
Full Name (Last, First, Middle Initial)
Mailing Address 2001 N Oregon St
City El Paso State TX Zip Code 79902-3320
FEC ID number of contributing federal political committee. **C**
Name of Employer Sierra Providence Health Network Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 668.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2015
Transaction ID : ABCF98FBD01C24594B68
Amount of Each Receipt this Period
83.50

C. Ms Sally A Hurt-Deitch
Full Name (Last, First, Middle Initial)
Mailing Address 2001 N Oregon St
City El Paso State TX Zip Code 79902-3320
FEC ID number of contributing federal political committee. **C**
Name of Employer Sierra Providence Health Network Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 751.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2015
Transaction ID : AD4AC65A2F95E4832B73
Amount of Each Receipt this Period
83.50

SUBTOTAL of Receipts This Page (optional).....▶	250.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Sally A Hurt-Deitch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2001 N Oregon St
 City El Paso State TX Zip Code 79902-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sierra Providence Health Network Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 835.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2015
Transaction ID : AA433477860E541F7985
 Amount of Each Receipt this Period
 83.50

B. Ms Sally A Hurt-Deitch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2001 N Oregon St
 City El Paso State TX Zip Code 79902-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sierra Providence Health Network Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 918.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015
Transaction ID : A1A99364B53204496AAB
 Amount of Each Receipt this Period
 83.50

C. Ms Sally A Hurt-Deitch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2001 N Oregon St
 City El Paso State TX Zip Code 79902-3320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sierra Providence Health Network Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1002.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : ADDBF5044835C4DF8A78
 Amount of Each Receipt this Period
 83.50

SUBTOTAL of Receipts This Page (optional).....▶	250.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Javier Iruegas
Full Name (Last, First, Middle Initial)

Mailing Address 900 S Bryan Rd

City Mission State TX Zip Code 78572-6613

FEC ID number of contributing federal political committee. **C**

Name of Employer Mission Regional Medical Center Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : A745AE89A5F4E435B8EB

Amount of Each Receipt this Period
 20.50

B. Mr Javier Iruegas
Full Name (Last, First, Middle Initial)

Mailing Address 900 S Bryan Rd

City Mission State TX Zip Code 78572-6613

FEC ID number of contributing federal political committee. **C**

Name of Employer Mission Regional Medical Center Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015

Transaction ID : AA48B51C74F354B4F9DF

Amount of Each Receipt this Period
 20.50

C. Mr Javier Iruegas
Full Name (Last, First, Middle Initial)

Mailing Address 900 S Bryan Rd

City Mission State TX Zip Code 78572-6613

FEC ID number of contributing federal political committee. **C**

Name of Employer Mission Regional Medical Center Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : A1FFD10BF1D744B22938

Amount of Each Receipt this Period
 20.50

SUBTOTAL of Receipts This Page (optional).....▶	61.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Susan K Jones
Full Name (Last, First, Middle Initial)

Mailing Address 3816 S Lamar Blvd
Apt 3308

City Austin State TX Zip Code 78704-7959

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSHARE Occupation THA Regional Exec South/Central

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 24 / 2015
Transaction ID : A12A2A45AE3984F89A93

Amount of Each Receipt this Period
20.00

B. Ms Susan K Jones
Full Name (Last, First, Middle Initial)

Mailing Address 3816 S Lamar Blvd
Apt 3308

City Austin State TX Zip Code 78704-7959

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSHARE Occupation THA Regional Exec South/Central

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
12 / 22 / 2015
Transaction ID : A4F07C71DDD8846008BE

Amount of Each Receipt this Period
20.00

c. Mr Carl Josehart
Full Name (Last, First, Middle Initial)

Mailing Address 1333 Moursund St

City Houston State TX Zip Code 77030-3405

FEC ID number of contributing federal political committee. **C**

Name of Employer TIRR Memorial Hermann Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
10 / 14 / 2015
Transaction ID : AEC7E96A54C04412E9A7

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 790.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Leni Kirkman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4502 Medical Dr
 City San Antonio State TX Zip Code 78229-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Health System Occupation VP Strat Comm/Patient Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2015
Transaction ID : A12C7529B709A4953831
 Amount of Each Receipt this Period
 20.50

B. Ms Leni Kirkman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4502 Medical Dr
 City San Antonio State TX Zip Code 78229-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Health System Occupation VP Strat Comm/Patient Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015
Transaction ID : A1455432D8F244E20BE5
 Amount of Each Receipt this Period
 20.50

C. Ms Leni Kirkman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4502 Medical Dr
 City San Antonio State TX Zip Code 78229-4402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Health System Occupation VP Strat Comm/Patient Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : A926BE935BBC64EBCAE7
 Amount of Each Receipt this Period
 20.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Blake W Kretz
Full Name (Last, First, Middle Initial)

Mailing Address 800 W Randol Mill Rd

City State Zip Code
Arlington TX 76012-2504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Texas Health Arlington Memorial Hospit President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2015

Transaction ID : A2AE2FF1C6BE54A61870

Amount of Each Receipt this Period
250.00

B. Ms Carrie Kroll
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City State Zip Code
Austin TX 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Texas Hospital Association VP Advocacy/Quality/Pub Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : AEA05AAA6E7D846AAA42

Amount of Each Receipt this Period
41.00

c. Ms Carrie Kroll
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City State Zip Code
Austin TX 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Texas Hospital Association VP Advocacy/Quality/Pub Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : A6A3DD074AADB4824953

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional).....▶	332.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Carrie Kroll
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation VP Advocacy/Quality/Pub Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
369.00

Date of Receipt
09 / 29 / 2015
Transaction ID : AA04851BC43A34027B33

Amount of Each Receipt this Period
41.00

B. Ms Carrie Kroll
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation VP Advocacy/Quality/Pub Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
10 / 27 / 2015
Transaction ID : A4D9ED237696A49CE88F

Amount of Each Receipt this Period
41.00

C. Ms Carrie Kroll
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation VP Advocacy/Quality/Pub Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
451.00

Date of Receipt
11 / 24 / 2015
Transaction ID : AB312F225E2F241D0A42

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Carrie Kroll
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Advocacy/Quality/Pub Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 492.00

Date of Receipt 12 / 22 / 2015
Transaction ID : AB9679180CF634C91980
 Amount of Each Receipt this Period 41.00

B. MS Janice Lamy
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 20269
 City Houston State TX Zip Code 77225-0269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St Lukes Episcopal Health System Occupation Division Vice President, Marketing & C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 03 / 2015
Transaction ID : AD40FCE1FEFE04C09A36
 Amount of Each Receipt this Period 250.00

C. Mr Tim Lancaster
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 08 / 2015
Transaction ID : A65579DA73B5D4839A56
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 1291.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Jorge E Leal
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2068

City Laredo State TX Zip Code 78044-2068

FEC ID number of contributing federal political committee. **C**

Name of Employer Laredo Medical Center Occupation Assistant Chief Exec Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 07 / 2015
Transaction ID : A0B5743A554BD43DA95F

Amount of Each Receipt this Period 20.50

B. Mr Jorge E Leal
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2068

City Laredo State TX Zip Code 78044-2068

FEC ID number of contributing federal political committee. **C**

Name of Employer Laredo Medical Center Occupation Assistant Chief Exec Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.50

Date of Receipt 12 / 07 / 2015
Transaction ID : A66A597EF8ED1462DA01

Amount of Each Receipt this Period 20.50

C. Mr Mark S Leitner FACHE
Full Name (Last, First, Middle Initial)

Mailing Address 300 Wilson St

City Henderson State TX Zip Code 75652-5956

FEC ID number of contributing federal political committee. **C**

Name of Employer East Texas Medical Center Henderson Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2015
Transaction ID : A8D65DC5B45D44C978CC

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 291.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Christopher T Leu
 Full Name (Last, First, Middle Initial)
 Mailing Address 411 N Belknap St
 City Stephenville State TX Zip Code 76401-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Harris Methodist Hospl St Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2015
Transaction ID : AC272222C122D41AD823
 Amount of Each Receipt this Period
 250.00

B. Mr Lance Lunsford
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Strategic Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : AC4AC70AB2BCA4C6D918
 Amount of Each Receipt this Period
 20.00

C. Mr Lance Lunsford
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Strategic Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2015
Transaction ID : A79E4AC5B8D0440588DE
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial)
A. DR Arun Mathews

Mailing Address PO Box 7239

City Odessa State TX Zip Code 79760-7239

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Center Health System Occupation CMO/CMIO Inpatient

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : A5DC49FC1332E4FCC9EB

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Ms Winjie T Miao

Mailing Address 612 E Lamar Blvd Ste 900

City Arlington State TX Zip Code 76011-4130

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Health Resources Occupation SVP, System Integration Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : A0C146BBAB51E4453B29

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Dr James E Morrison

Mailing Address 3000 Herring Ave

City Waco State TX Zip Code 76708-3239

FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center Occupation Chief Med Officer/Exec VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 437.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2015

Transaction ID : A727BAE9644764EDB84C

Amount of Each Receipt this Period
 62.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 562.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Dr James E Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Herring Ave
 City Waco State TX Zip Code 76708-3239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation Chief Med Officer/Exec VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 07 / 2015
Transaction ID : ABCB8892BE6014DA6AB3
 Amount of Each Receipt this Period 62.50

B. Dr James E Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Herring Ave
 City Waco State TX Zip Code 76708-3239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation Chief Med Officer/Exec VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 562.50

Date of Receipt 09 / 07 / 2015
Transaction ID : A4282B69656584D71BEC
 Amount of Each Receipt this Period 62.50

C. Dr James E Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Herring Ave
 City Waco State TX Zip Code 76708-3239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation Chief Med Officer/Exec VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 07 / 2015
Transaction ID : AC301DF19422A424098D
 Amount of Each Receipt this Period 62.50

SUBTOTAL of Receipts This Page (optional).....▶	187.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 45 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Dr James E Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Herring Ave
 City Waco State TX Zip Code 76708-3239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation Chief Med Officer/Exec VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 687.50

Date of Receipt 11 / 07 / 2015
Transaction ID : A65A434B8749E4DF29BD
 Amount of Each Receipt this Period 62.50

B. Dr James E Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Herring Ave
 City Waco State TX Zip Code 76708-3239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation Chief Med Officer/Exec VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 12 / 07 / 2015
Transaction ID : AFCE05729F5DE444C91E
 Amount of Each Receipt this Period 62.50

C. Mr Stan C Morton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 N Interstate 35
 City Denton State TX Zip Code 76201-5119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Presbyterian Hospital Den Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 07 / 2015
Transaction ID : A86E5A5223F5047FE88C
 Amount of Each Receipt this Period 20.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Stan C Morton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 N Interstate 35
 City Denton State TX Zip Code 76201-5119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Presbyterian Hospital Den Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : A3AA1644FDFCE4642A6C
 Amount of Each Receipt this Period
20.50

B. Mr J P Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 551 Hill Country Dr
 City Kerrville State TX Zip Code 78028-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peterson Regional Medical Center Occupation President / Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **437.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2015
Transaction ID : A400E4AF5DC2F490DAB5
 Amount of Each Receipt this Period
62.50

C. Mr J P Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 551 Hill Country Dr
 City Kerrville State TX Zip Code 78028-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peterson Regional Medical Center Occupation President / Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2015
Transaction ID : A3E25E69968754F099E1
 Amount of Each Receipt this Period
62.50

SUBTOTAL of Receipts This Page (optional)..... **145.50**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr J P Murray
Full Name (Last, First, Middle Initial)
Mailing Address 551 Hill Country Dr

City Kerrville	State TX	Zip Code 78028-6085
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FEC ID number of contributing federal political committee. **C**

Name of Employer Peterson Regional Medical Center	Occupation President / Chief Executive Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **562.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2015

Transaction ID : A3F0AA4F36E554C3CA29

Amount of Each Receipt this Period

62.50

B. Mr J P Murray
Full Name (Last, First, Middle Initial)
Mailing Address 551 Hill Country Dr

City Kerrville	State TX	Zip Code 78028-6085
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Peterson Regional Medical Center	Occupation President / Chief Executive Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2015

Transaction ID : A5DF13C4EC5554B8E9FB

Amount of Each Receipt this Period

62.50

C. Mr J P Murray
Full Name (Last, First, Middle Initial)
Mailing Address 551 Hill Country Dr

City Kerrville	State TX	Zip Code 78028-6085
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Peterson Regional Medical Center	Occupation President / Chief Executive Officer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **687.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2015

Transaction ID : AB80328A30F394352918

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional).....▶	187.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr J P Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 551 Hill Country Dr
 City Kerrville State TX Zip Code 78028-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peterson Regional Medical Center Occupation President / Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : A41C9BE5200BB476B80E
 Amount of Each Receipt this Period
 62.50

B. Mr Randy Osteen
 Full Name (Last, First, Middle Initial)
 Mailing Address 919 Hidden Rdg
 City Irving State TX Zip Code 75038-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRISTUS Health Occupation VP ACIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2015
Transaction ID : A62CB1CD157E445C49AF
 Amount of Each Receipt this Period
 250.00

C. Mr Paul O'Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 921 Gessner Rd
 City Houston State TX Zip Code 77024-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Memorial City Medical Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : A1AF81CE4D97E4FDAADB
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	562.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Richard Parks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3615 19th St
 City Lubbock State TX Zip Code 79410-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Covenant Health System Occupation President / CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015
Transaction ID : A2DA11E760DD4477986E
 Amount of Each Receipt this Period
 750.00

B. Mr David N Parmer
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1591
 City Beaumont State TX Zip Code 77704-1591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Baptist Hospitals of Southeast Texas Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2015
Transaction ID : AA5FB4805C7084A28BA2
 Amount of Each Receipt this Period
 500.00

C. Ms Jayne E Pope
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 835
 City Fredericksburg State TX Zip Code 78624-0835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hill Country Memorial Hospital Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : A1E5E13473B82420297C
 Amount of Each Receipt this Period
 750.00

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial)
A. Mr Jon E Riggs

Mailing Address PO Box 7239

City Odessa State TX Zip Code 79760-7239

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Center Health System Occupation Senior Vice President & Chief Financia

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 01 / 2015
Transaction ID : AB67BF52F66524A35A54

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr Peter Roberts

Mailing Address 1935 Medical District Dr

City Dallas State TX Zip Code 75235-7701

FEC ID number of contributing federal political committee. **C**

Name of Employer Children's Medical Center Dallas Occupation Executive VP Population Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 02 / 2015
Transaction ID : AFADBD087946D4E2CA05

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Mr Glenn A Robinson

Mailing Address PO Box 5100

City Waco State TX Zip Code 76708-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
563.50

Date of Receipt
07 / 07 / 2015
Transaction ID : A295592F38BD045F78CC

Amount of Each Receipt this Period
83.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 1333.50

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial)
A. Mr Glenn A Robinson

Mailing Address PO Box 5100

City Waco	State TX	Zip Code 76708-0100
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FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **647.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 07 / 2015

Transaction ID : AA8E735CE098843C7A0F

Amount of Each Receipt this Period
83.50

Full Name (Last, First, Middle Initial)
B. Mr Glenn A Robinson

Mailing Address PO Box 5100

City Waco	State TX	Zip Code 76708-0100
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FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 28 / 2015

Transaction ID : ACC3F97E8E9AB4059940

Amount of Each Receipt this Period
83.50

Full Name (Last, First, Middle Initial)
C. Mr Glenn A Robinson

Mailing Address PO Box 5100

City Waco	State TX	Zip Code 76708-0100
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **814.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : A7C43C12C824847E48BB

Amount of Each Receipt this Period
83.50

SUBTOTAL of Receipts This Page (optional).....▶	250.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Glenn A Robinson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5100

City Waco State TX Zip Code 76708-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **897.50**

Date of Receipt **11 / 07 / 2015**

Transaction ID : A6946696F69D04E88BDA

Amount of Each Receipt this Period **83.50**

B. Mr Glenn A Robinson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5100

City Waco State TX Zip Code 76708-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **981.00**

Date of Receipt **12 / 07 / 2015**

Transaction ID : A89E4623DE5C245398BC

Amount of Each Receipt this Period **83.50**

C. Mr Jason Rounds
Full Name (Last, First, Middle Initial)

Mailing Address 2600 Saint Michael Dr

City Texarkana State TX Zip Code 75503-5220

FEC ID number of contributing federal political committee. **C**

Name of Employer CHRISTUS St Michael Health System Occupation COO/Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **09 / 01 / 2015**

Transaction ID : AFC4A397400D142CF958

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **417.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial)
A. Mr Heath Rushing

Mailing Address 18951 N Memorial Dr

City Humble State TX Zip Code 77338-4217

FEC ID number of contributing federal political committee. **C**

Name of Employer Memorial Hermann Northeast Hospital Occupation SVP, CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : A6D47B4DADD64470E985

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr Ernie W Sadau

Mailing Address 919 Hidden Rdg

City Irving State TX Zip Code 75038-3813

FEC ID number of contributing federal political committee. **C**

Name of Employer CHRISTUS Health Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2015
Transaction ID : ACB09B218ABA6434AA35

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Ms Gabriela Saenz

Mailing Address 919 Hidden Rdg

City Irving State TX Zip Code 75038-3813

FEC ID number of contributing federal political committee. **C**

Name of Employer CHRISTUS Health Occupation VP Advocacy & Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2015
Transaction ID : A9B5C501ED7074FBB878

Amount of Each Receipt this Period
41.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 791.50

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Gabriela Saenz
Full Name (Last, First, Middle Initial)
Mailing Address 919 Hidden Rdg
City Irving State TX Zip Code 75038-3813
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRISTUS Health Occupation VP Advocacy & Public Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 332.00

Date of Receipt 08 / 07 / 2015
Transaction ID : **AB24C37B017F041E38EC**
Amount of Each Receipt this Period 41.50

B. Ms Gabriela Saenz
Full Name (Last, First, Middle Initial)
Mailing Address 919 Hidden Rdg
City Irving State TX Zip Code 75038-3813
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRISTUS Health Occupation VP Advocacy & Public Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 373.50

Date of Receipt 09 / 07 / 2015
Transaction ID : **A2EE0F13EB8BB4B41980**
Amount of Each Receipt this Period 41.50

C. Ms Gabriela Saenz
Full Name (Last, First, Middle Initial)
Mailing Address 919 Hidden Rdg
City Irving State TX Zip Code 75038-3813
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRISTUS Health Occupation VP Advocacy & Public Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt 10 / 07 / 2015
Transaction ID : **A088BBFC0BC7442C8B26**
Amount of Each Receipt this Period 41.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Gabriela Saenz
Full Name (Last, First, Middle Initial)
Mailing Address 919 Hidden Rdg
City Irving State TX Zip Code 75038-3813
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRISTUS Health Occupation VP Advocacy & Public Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 456.50

Date of Receipt 11 / 07 / 2015
Transaction ID : A66486A72FE8B46918D5
Amount of Each Receipt this Period 41.50

B. Ms Gabriela Saenz
Full Name (Last, First, Middle Initial)
Mailing Address 919 Hidden Rdg
City Irving State TX Zip Code 75038-3813
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRISTUS Health Occupation VP Advocacy & Public Policy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 498.00

Date of Receipt 12 / 07 / 2015
Transaction ID : AB3B1017849B84E76BBB
Amount of Each Receipt this Period 41.50

C. Mr Randy Safady
Full Name (Last, First, Middle Initial)
Mailing Address 919 Hidden Rdg
City Irving State TX Zip Code 75038-3813
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRISTUS Health Occupation EVP/Chief Financial Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2015
Transaction ID : ABE488F4F8BC54581999
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 333.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Freddie Sanchez
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6400

City Tyler	State TX	Zip Code 75711-6400
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer East Texas Medical Center Foundation	Occupation Corporate VP
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2015

Transaction ID : A4AED9785AEB5499C835

Amount of Each Receipt this Period
250.00

B. Mr Richard S Schirmer
Full Name (Last, First, Middle Initial)
Mailing Address 1108 Lavaca St Ste 700

City Austin	State TX	Zip Code 78701-2180
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association	Occupation VP Health Care Policy Analysis
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2015

Transaction ID : A81D6C6BFE36A4F0BBAB

Amount of Each Receipt this Period
21.00

C. Mr Richard S Schirmer
Full Name (Last, First, Middle Initial)
Mailing Address 1108 Lavaca St Ste 700

City Austin	State TX	Zip Code 78701-2180
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association	Occupation VP Health Care Policy Analysis
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2015

Transaction ID : A16E42142627442FAA33

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional).....▶	292.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Richard S Schirmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Health Care Policy Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 12 / 22 / 2015
Transaction ID : A4AA26EDBE33648308B2
 Amount of Each Receipt this Period 21.00

B. Ms Rebekah Schroeder
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 Seaboard Ave
 City Midland State TX Zip Code 79705-7536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Children's Hospital Occupation Government Relations Liaison
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 07 / 2015
Transaction ID : AEAAB3AEA4F0041DD96D
 Amount of Each Receipt this Period 20.50

C. Ms Rebekah Schroeder
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 Seaboard Ave
 City Midland State TX Zip Code 79705-7536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Children's Hospital Occupation Government Relations Liaison
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.50

Date of Receipt 12 / 07 / 2015
Transaction ID : A719BFA6965EE47CD995
 Amount of Each Receipt this Period 20.50

SUBTOTAL of Receipts This Page (optional).....▶	62.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial)
A. Mr Ronald J Schwartz

Mailing Address PO Box 6400

City State Zip Code
Tyler TX 75711-6400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
East Texas Medical Center Regional Hea VP/COO Emerg Med Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 26 / 2015
Transaction ID : AE3A6058E055F487A939

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Dr Stephen Sibbitt

Mailing Address 2401 S 31st St

City State Zip Code
Temple TX 76508-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Scott & White Memorial Hospital CMO Temple Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 14 / 2015
Transaction ID : A9466A0AC782E4B8F9FE

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Ms Elizabeth N Sjoberg

Mailing Address 1108 Lavaca St
Ste 700

City State Zip Code
Austin TX 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Texas Hospital Association VP Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
07 / 21 / 2015
Transaction ID : A63A7DE5DE6304A8B9CD

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 791.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Elizabeth N Sjoberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt 08 / 31 / 2015
Transaction ID : AA1684CFCF401457BAEE
 Amount of Each Receipt this Period 41.00

B. Ms Elizabeth N Sjoberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 369.00

Date of Receipt 09 / 29 / 2015
Transaction ID : AA692B35622224CA6BEF
 Amount of Each Receipt this Period 41.00

c. Ms Elizabeth N Sjoberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 27 / 2015
Transaction ID : A42E8260E6B254AC2BBC
 Amount of Each Receipt this Period 41.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Elizabeth N Sjoberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : A9F4CDC311E374DA4937
 Amount of Each Receipt this Period
 41.00

B. Ms Elizabeth N Sjoberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation VP Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 492.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2015
Transaction ID : A6A952AAEAC044A5AA11
 Amount of Each Receipt this Period
 41.00

C. Mr Charles Stokes
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 Gessner Rd
 Ste 2600
 City Houston State TX Zip Code 77024-2593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Health System Occupation Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2015
Transaction ID : A58F03826C1A945EA88F
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	332.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr James A Summersett III
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Medical Pkwy
 City Dallas State TX Zip Code 75234-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prime Healthcare Services Occupation Division II CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 07 / 07 / 2015
Transaction ID : A1C0FB1FFEFF94A5D9D2
 Amount of Each Receipt this Period 62.50

B. Mr James A Summersett III
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Medical Pkwy
 City Dallas State TX Zip Code 75234-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prime Healthcare Services Occupation Division II CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 07 / 2015
Transaction ID : AD887F950BBB24A15910
 Amount of Each Receipt this Period 62.50

C. Mr James A Summersett III
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Medical Pkwy
 City Dallas State TX Zip Code 75234-7840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prime Healthcare Services Occupation Division II CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.50

Date of Receipt 09 / 07 / 2015
Transaction ID : AB5DF285A54644F5BBEC
 Amount of Each Receipt this Period 62.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr James A Summersett III
Full Name (Last, First, Middle Initial)

Mailing Address 10 Medical Pkwy

City Dallas	State TX	Zip Code 75234-7840
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Prime Healthcare Services	Occupation Division II CEO
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2015

Transaction ID : AF069CFEE8FAC47D8B09

Amount of Each Receipt this Period
62.50

B. Mr James A Summersett III
Full Name (Last, First, Middle Initial)

Mailing Address 10 Medical Pkwy

City Dallas	State TX	Zip Code 75234-7840
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Prime Healthcare Services	Occupation Division II CEO
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2015

Transaction ID : A198BEE3BD2BA4A65AC0

Amount of Each Receipt this Period
62.50

C. Mr James A Summersett III
Full Name (Last, First, Middle Initial)

Mailing Address 10 Medical Pkwy

City Dallas	State TX	Zip Code 75234-7840
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Prime Healthcare Services	Occupation Division II CEO
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : A0BCB56E63800433A871

Amount of Each Receipt this Period
62.50

SUBTOTAL of Receipts This Page (optional).....▶	187.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Ms Lydia R Valadez McStay

Full Name (Last, First, Middle Initial)
Mailing Address 6621 Fannin St
MC-NB8

City Houston State TX Zip Code 77030-2358

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Children's Hospital Occupation Government Relations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : A0AF7F502E56F43AFBC5

Amount of Each Receipt this Period
20.50

B. Ms Lydia R Valadez McStay

Full Name (Last, First, Middle Initial)
Mailing Address 6621 Fannin St
MC-NB8

City Houston State TX Zip Code 77030-2358

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Children's Hospital Occupation Government Relations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015

Transaction ID : AD591DCD3E2CF4583A49

Amount of Each Receipt this Period
20.50

c. Ms Lydia R Valadez McStay

Full Name (Last, First, Middle Initial)
Mailing Address 6621 Fannin St
MC-NB8

City Houston State TX Zip Code 77030-2358

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Children's Hospital Occupation Government Relations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : A69E6D41D64F2458C82E

Amount of Each Receipt this Period
20.50

SUBTOTAL of Receipts This Page (optional).....▶	61.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Manuel M Vela
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2588
 City Harlingen State TX Zip Code 78551-2588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Valley Baptist Health System Occupation President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015
Transaction ID : A915B4C54DD3048B7BD0
 Amount of Each Receipt this Period
 250.00

B. Mr Jeremy Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation CFO AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2015
Transaction ID : A9A14C6A4E5D0445CB9D
 Amount of Each Receipt this Period
 41.50

C. Mr Jeremy Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation CFO AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2015
Transaction ID : A1F3A97F2E1CD4E86AB0
 Amount of Each Receipt this Period
 41.50

SUBTOTAL of Receipts This Page (optional).....▶	333.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Jeremy Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation CFO AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 373.50

Date of Receipt 09 / 07 / 2015
Transaction ID : A6DA38F59847D4DD3A76
 Amount of Each Receipt this Period 41.50

B. Mr Jeremy Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation CFO AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 10 / 07 / 2015
Transaction ID : A5DCBC01BD5244A5785E
 Amount of Each Receipt this Period 41.50

C. Mr Jeremy Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine St
 City Abilene State TX Zip Code 79601-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hendrick Medical Center Occupation CFO AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.50

Date of Receipt 11 / 07 / 2015
Transaction ID : AC1F7F1B0CBC34C46A00
 Amount of Each Receipt this Period 41.50

SUBTOTAL of Receipts This Page (optional).....▶	124.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Jeremy Walker
Full Name (Last, First, Middle Initial)

Mailing Address 1900 Pine St

City Abilene State TX Zip Code 79601-2432

FEC ID number of contributing federal political committee. **C**

Name of Employer Hendrick Medical Center Occupation CFO AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **498.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : A5D14EB4679274F599C3

Amount of Each Receipt this Period
41.50

B. Mr Patrick L Wallace
Full Name (Last, First, Middle Initial)

Mailing Address 2000 S Palestine St

City Athens State TX Zip Code 75751-5610

FEC ID number of contributing federal political committee. **C**

Name of Employer East Texas Medical Center - Athens Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2015

Transaction ID : A000EF5D7173C4085B36

Amount of Each Receipt this Period
500.00

C. Mr Carlyle Walton
Full Name (Last, First, Middle Initial)

Mailing Address 2201 S Clear Creek Rd

City Killeen State TX Zip Code 76549-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Metroplex Adventist Hospital Inc Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2015

Transaction ID : AFC546109DDDF14265ADE

Amount of Each Receipt this Period
41.50

SUBTOTAL of Receipts This Page (optional)..... **583.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Carlyle Walton
Full Name (Last, First, Middle Initial)

Mailing Address 2201 S Clear Creek Rd

City Killeen State TX Zip Code 76549-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Metroplex Adventist Hospital Inc Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 332.00

Date of Receipt 08 / 07 / 2015
Transaction ID : AA62F25FFEB144B65BE8

Amount of Each Receipt this Period 41.50

B. Mr Carlyle Walton
Full Name (Last, First, Middle Initial)

Mailing Address 2201 S Clear Creek Rd

City Killeen State TX Zip Code 76549-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Metroplex Adventist Hospital Inc Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 373.50

Date of Receipt 09 / 07 / 2015
Transaction ID : A98CA8681955A446CB73

Amount of Each Receipt this Period 41.50

C. Mr Carlyle Walton
Full Name (Last, First, Middle Initial)

Mailing Address 2201 S Clear Creek Rd

City Killeen State TX Zip Code 76549-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Metroplex Adventist Hospital Inc Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt 10 / 07 / 2015
Transaction ID : A02B3C5D491CC46BDBC6

Amount of Each Receipt this Period 41.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.50

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Carlyle Walton
Full Name (Last, First, Middle Initial)

Mailing Address 2201 S Clear Creek Rd

City Killeen State TX Zip Code 76549-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Metroplex Adventist Hospital Inc Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **456.50**

Date of Receipt **11 / 07 / 2015**

Transaction ID : A553F7E38441D460DA22

Amount of Each Receipt this Period **41.50**

B. Mr Carlyle Walton
Full Name (Last, First, Middle Initial)

Mailing Address 2201 S Clear Creek Rd

City Killeen State TX Zip Code 76549-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Metroplex Adventist Hospital Inc Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **498.00**

Date of Receipt **12 / 07 / 2015**

Transaction ID : A4368FF6186C642FBBE4

Amount of Each Receipt this Period **41.50**

C. Mr Freddy C Warner Jr
Full Name (Last, First, Middle Initial)

Mailing Address 929 Gessner Rd Ste 2600

City Houston State TX Zip Code 77024-2593

FEC ID number of contributing federal political committee. **C**

Name of Employer Memorial Hermann Health System Occupation Sys Exec Public Policy/Gov Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **541.50**

Date of Receipt **07 / 07 / 2015**

Transaction ID : ABEEF77F7F435493BACD

Amount of Each Receipt this Period **83.50**

SUBTOTAL of Receipts This Page (optional)..... **166.50**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Freddy C Warner Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 Gessner Rd
 Ste 2600
 City Houston State TX Zip Code 77024-2593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Health System Occupation Sys Exec Public Policy/Gov Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 08 / 07 / 2015
Transaction ID : A9791667F45DD45A2B8D
 Amount of Each Receipt this Period 83.50

B. Mr Freddy C Warner Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 Gessner Rd
 Ste 2600
 City Houston State TX Zip Code 77024-2593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Health System Occupation Sys Exec Public Policy/Gov Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 708.50

Date of Receipt 09 / 07 / 2015
Transaction ID : A6DF2E1F39EFB4B76A6D
 Amount of Each Receipt this Period 83.50

C. Mr Michael C Waters FACHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6009 Fallsview Ln
 City Dallas State TX Zip Code 75252-5323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TX State Library & Archives Commission Occupation Retired President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 07 / 2015
Transaction ID : AFA342455705A409AAE8
 Amount of Each Receipt this Period 20.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Michael C Waters FACHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6009 Fallsview Ln
 City Dallas State TX Zip Code 75252-5323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TX State Library & Archives Commission Occupation Retired President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.50

Date of Receipt 11 / 07 / 2015
Transaction ID : A450DE60ED7EB420A921
 Amount of Each Receipt this Period 20.50

B. Mr Michael C Waters FACHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6009 Fallsview Ln
 City Dallas State TX Zip Code 75252-5323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TX State Library & Archives Commission Occupation Retired President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 12 / 07 / 2015
Transaction ID : A93B36687000247D9817
 Amount of Each Receipt this Period 20.50

C. Mr William W Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7239
 City Odessa State TX Zip Code 79760-7239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical Center Health System Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.50

Date of Receipt 07 / 07 / 2015
Transaction ID : A3CF7F4E02E63498599F
 Amount of Each Receipt this Period 62.50

SUBTOTAL of Receipts This Page (optional).....▶ 103.50
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 71 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr William W Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7239
 City Odessa State TX Zip Code 79760-7239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical Center Health System Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 07 / 2015
Transaction ID : AA970F6B7D27A423B9C2
 Amount of Each Receipt this Period 62.50

B. Mr William W Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7239
 City Odessa State TX Zip Code 79760-7239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical Center Health System Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 562.50

Date of Receipt 09 / 07 / 2015
Transaction ID : A859D99A4A70C438B811
 Amount of Each Receipt this Period 62.50

C. Mr William W Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7239
 City Odessa State TX Zip Code 79760-7239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical Center Health System Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 07 / 2015
Transaction ID : A5A121D2DE8D843B78D3
 Amount of Each Receipt this Period 62.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.50
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr William W Webster
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7239

City Odessa State TX Zip Code 79760-7239

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Center Health System Occupation President & Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **687.50**

Date of Receipt **11 / 07 / 2015**

Transaction ID : A13911E1F6B584BCEA7B

Amount of Each Receipt this Period **62.50**

B. Mr William W Webster
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7239

City Odessa State TX Zip Code 79760-7239

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Center Health System Occupation President & Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **12 / 07 / 2015**

Transaction ID : A3997C25E3FFB4BD0B97

Amount of Each Receipt this Period **62.50**

C. Mr Michael D Williams
Full Name (Last, First, Middle Initial)

Mailing Address 7800 Dallas Pkwy Ste 200

City Plano State TX Zip Code 75024-4082

FEC ID number of contributing federal political committee. **C**

Name of Employer Community Hospital Corporation Occupation President / CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt **10 / 16 / 2015**

Transaction ID : AC49FD956512A445EB9D

Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **1125.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Jay Woodall
Full Name (Last, First, Middle Initial)

Mailing Address 3315 S Alameda St

City Corpus Christi State TX Zip Code 78411-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer Corpus Christi Medical Center - Doctor Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 14 / 2015
Transaction ID : AA734C5AEDDD0437C9B3

Amount of Each Receipt this Period
250.00

B. Mr Ignacio O Zamarron
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation Senior Vice President/CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 583.38

Date of Receipt
07 / 21 / 2015
Transaction ID : AA6595CF0086F4417893

Amount of Each Receipt this Period
83.34

C. Mr Ignacio O Zamarron
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca St Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation Senior Vice President/CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 666.72

Date of Receipt
08 / 31 / 2015
Transaction ID : A72E66A9261A64EE5825

Amount of Each Receipt this Period
83.34

SUBTOTAL of Receipts This Page (optional)..... ▶ 416.68

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Mr Ignacio O Zamarron
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Senior Vice President/CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.06

Date of Receipt 09 / 29 / 2015
Transaction ID : A51D811A48B3545C4827
 Amount of Each Receipt this Period 83.34

B. Mr Ignacio O Zamarron
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Senior Vice President/CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.40

Date of Receipt 10 / 27 / 2015
Transaction ID : AD7D6EB4D3DA14D879EF
 Amount of Each Receipt this Period 83.34

C. Mr Ignacio O Zamarron
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca St
 Ste 700
 City Austin State TX Zip Code 78701-2180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Senior Vice President/CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt 11 / 24 / 2015
Transaction ID : A31464BEF8D0F4951994
 Amount of Each Receipt this Period 83.34

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.02
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 75 OF 76
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A. Full Name (Last, First, Middle Initial)
Mr Ignacio O Zamarron

Mailing Address 1108 Lavaca St
Ste 700

City Austin State TX Zip Code 78701-2180

FEC ID number of contributing federal political committee. **C**

Name of Employer Texas Hospital Association Occupation Senior Vice President/CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
12 / 22 / 2015
Transaction ID : A43882B9B2F424048BEF

Amount of Each Receipt this Period
83.34

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	83.34
TOTAL This Period (last page this line number only).....▶	26356.61

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)

HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

Full Name (Last, First, Middle Initial)

A. AHAPAC-American Hospital Association Federal PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Mailing Address 325 Seventh Street, N.W.
Suite 700

City Washington State DC Zip Code 20004

Transaction ID : BB788925D40A04414B7B

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

25000.00

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. AHAPAC-American Hospital Association Federal PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2015

Mailing Address 325 Seventh Street, N.W.
Suite 700

City Washington State DC Zip Code 20004

Transaction ID : B7CD41FCF17314F9BB53

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

22000.00

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Other2015

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

47000.00

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

47000.00
