

**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="2013"/>		5047.82
(b) Cash on Hand at Beginning of Reporting Period.....	5047.82	
(c) Total Receipts (from Line 19)	33196.06	33196.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	38243.88	38243.88
7. Total Disbursements (from Line 31).....	28016.95	28016.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	10226.93	10226.93
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

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).....	26568.92	26568.92
(ii) Unitemized	6627.14	6627.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	33196.06	33196.06
(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)	33196.06	33196.06
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))..... ▶	33196.06	33196.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	33196.06	33196.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	16.95	16.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16.95	16.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28000.00	28000.00
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)) ..	28016.95	28016.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28016.95	28016.95

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)	33196.06	33196.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33196.06	33196.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16.95	16.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16.95	16.95

**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 44
	<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. Mr William D Adams
Full Name (Last, First, Middle Initial)

Mailing Address 7 Medical Parkway

City Dallas State TX Zip Code 75234

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

Name of Employer Prime Healthcare Services Occupation Regional 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
 01 / 02 / 2013

Transaction ID : A5DF22551194C43CE85A

Amount of Each Receipt this Period
 250.00

B. Mr Tim P Adams
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Ross Ave Ste 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer Tenet Healthcare Corporation Occupation Senior VP Operations

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
 02 / 02 / 2013

Transaction ID : AAE817DE6B29D4892BAD

Amount of Each Receipt this Period
 750.00

C. Ms Palmira A Arellano
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 VP Marketing & Public Relations

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
 02 / 08 / 2013

Transaction ID : A07B16A11C6F64DD89DC

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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 7 OF 44
<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 Erin S Asprec
 Full Name (Last, First, Middle Initial)
 Mailing Address 11800 Astoria Blvd
 City Houston State TX Zip Code 77089-6041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Southeast Hospital 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
 02 / 20 / 2013
Transaction ID : A48D23EA3F1944FC7922
 Amount of Each Receipt this Period
 250.00

B. Mr Charles W Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca 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 ▼ 208.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : A1B9EA9E104734246A8B
 Amount of Each Receipt this Period
 41.68

C. Mr Charles W Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca 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 ▼ 250.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2013
Transaction ID : AB74EA78B243844DFAA8
 Amount of Each Receipt this Period
 41.68

SUBTOTAL of Receipts This Page (optional).....▶	333.36
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 8 OF 44
	<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 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
06 / 04 / 2013
Transaction ID : A09572B7EC0AC4B6EA2E

Amount of Each Receipt this Period
41.00

B. Ms Jennifer C Banda
Full Name (Last, First, Middle Initial)
Mailing Address 1108 Lavaca 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.00	

Date of Receipt
06 / 25 / 2013
Transaction ID : AE2294239F1ED4067A4B

Amount of Each Receipt this Period
41.00

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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
02 / 20 / 2013
Transaction ID : A54500CD708BF4C28BA5

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: (check only one)	PAGE 9 OF 44
	<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 Hwy 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 VP/Administrator
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2013

Transaction ID : A64DF350096274EF8884

Amount of Each Receipt this Period
83.00

B. Mr Jeffrey A Bourgeois
Full Name (Last, First, Middle Initial)
Mailing Address 11212 State Hwy 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 VP/Administrator
--	--------------------------------

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
05	/	07	/	2013

Transaction ID : A45FD17871A3745CDA0C

Amount of Each Receipt this Period
41.50

C. Mr Jeffrey A Bourgeois
Full Name (Last, First, Middle Initial)
Mailing Address 11212 State Hwy 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 VP/Administrator
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : A3134E625786847BB824

Amount of Each Receipt this Period
41.50

SUBTOTAL of Receipts This Page (optional).....▶	166.00
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 10 OF 44
	(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. Timothy M Brierty
 Full Name (Last, First, Middle Initial)
 Mailing Address 4502 Medical Drive
 City San Antonio State TX Zip Code 78229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Hospital 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
 05 / 25 / 2013
Transaction ID : AE563E65A174440EDBE2
 Amount of Each Receipt this Period
 250.00

B. Mr John C Brindley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 W 38th St
 City Austin State TX Zip Code 78705-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Seton Medical Center Occupation President/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
 03 / 04 / 2013
Transaction ID : A73DBDD81DEF3427790E
 Amount of Each Receipt this Period
 250.00

C. Mr Gary D Brock
 Full Name (Last, First, Middle Initial)
 Mailing Address 3500 Gaston Ave
 City Dallas State TX Zip Code 75246-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Baylor Health Care System Occupation Chief Operating Officer
 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
 02 / 13 / 2013
Transaction ID : A60A00A3F77604EAB876
 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 11 OF 44
	<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. Mrs Rosemary P Burns
Full Name (Last, First, Middle Initial)

Mailing Address 3 Chapel Hill

City Malakoff State TX Zip Code 75148

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

Name of Employer East Texas Medical Center - Athens Occupation Advisory Board Member

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
02 / 11 / 2013

Transaction ID : A1605DD1713BE436EA8D

Amount of Each Receipt this Period
250.00

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

Mailing Address 612 E Lamar Blvd Ste 500

City Arlington State TX Zip Code 76011

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

Name of Employer Texas Health Resources Occupation EVP / Operations Leader SW Zone

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
01 / 31 / 2013

Transaction ID : AFFF8DF89442147BA952

Amount of Each Receipt this Period
750.00

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

Mailing Address 1108 Lavaca Ste 700

City Austin State TX Zip Code 78701-2180

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

Name of Employer HealthSHARE Occupation CEO HealthSHARE/SVP Mem Relation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2013

Transaction ID : A924BA3102C8C4293BEB

Amount of Each Receipt this Period
82.00

SUBTOTAL of Receipts This Page (optional).....▶	1082.00
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 12 OF 44
	<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 Checkley
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca Ste 700

City Austin	State TX	Zip Code 78701-2180
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSHARE	Occupation CEO HealthSHARE/SVP Mem Relation
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **328.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	07	/	2013

Transaction ID : ADEFEF697E1DB4EDD85L

Amount of Each Receipt this Period

82.00

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

Mailing Address 1108 Lavaca Ste 700

City Austin	State TX	Zip Code 78701-2180
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FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSHARE	Occupation CEO HealthSHARE/SVP Mem Relation
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	04	/	2013

Transaction ID : ABB1A33AB0DCF45C3A6C

Amount of Each Receipt this Period

82.00

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

Mailing Address 1108 Lavaca Ste 700

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

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

Name of Employer HealthSHARE	Occupation CEO HealthSHARE/SVP Mem Relation
---------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **492.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	25	/	2013

Transaction ID : A359E8AD6579D4A36A17

Amount of Each Receipt this Period

82.00

SUBTOTAL of Receipts This Page (optional).....▶	246.00
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 13 OF 44
	<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

Full Name (Last, First, Middle Initial) A. Ms Joan S Clark		Date of Receipt
Mailing Address 612 E Lamar Blvd Ste 900		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City Arlington	State TX	Zip Code 76011
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : AB67BA0F870B4450BA66	
Name of Employer Texas Health Resources	Occupation Sr VP System Chief Nurse Exec	Amount of Each Receipt this Period <input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Mr Barry N Couch		Date of Receipt
Mailing Address 7800 Southwest Parkway #1513		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City Austin	State TX	Zip Code 78735
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : A5A0CDBFF7A264C91835	
Name of Employer Scott & White Memorial Hospital	Occupation Board Vice President	Amount of Each Receipt this Period <input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms Vicki Dale		Date of Receipt
Mailing Address 2046 Wedgewood		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Grapevine	State TX	Zip Code 76051
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : A6AA183404A2A4A56AB9	
Name of Employer HealthSHARE	Occupation Regional Executive	Amount of Each Receipt this Period <input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="540.00"/>
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 14 OF 44
	(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 Jim Dixon		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A8010569AFB3C4E6EB87
Name of Employer HealthSHARE		Amount of Each Receipt this Period
Occupation President/CEO		<input type="text" value="166.64"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.28"/>	

Full Name (Last, First, Middle Initial) B. Mr Jim Dixon		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AF13DEBCB35AF4AB8920
Name of Employer HealthSHARE		Amount of Each Receipt this Period
Occupation President/CEO		<input type="text" value="83.32"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="416.60"/>	

Full Name (Last, First, Middle Initial) C. Mr Jim Dixon		Date of Receipt
Mailing Address 1108 Lavaca St Ste 700		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AFD4E76E5BBF8487B91C
Name of Employer HealthSHARE		Amount of Each Receipt this Period
Occupation President/CEO		<input type="text" value="-83.34"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.26"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="166.62"/>
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 15 OF 44
	<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

Full Name (Last, First, Middle Initial) A. Ms Marcella L Doderer		Date of Receipt
Mailing Address 333 N Santa Rosa St		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Antonio	TX	78207-3108
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : A6BAE6A0544BC44DC95E
Childrens Hospital of San Antonio	VP/Administrator	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) B. Mr Elmer G Ellis		Date of Receipt
Mailing Address PO Box 6400		<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
Tyler	TX	75711-6400
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : ACBC67E412B514738813
East Texas Medical Center Regional Hea	President / CEO	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) C. Mr Elmer G Ellis		Date of Receipt
Mailing Address PO Box 6400		<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
Tyler	TX	75711-6400
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : AD177BD52796F4A85A8D
East Texas Medical Center Regional Hea	President / CEO	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1250.00"/>
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 16 OF 44
	<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 Michael J Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 Highway 118 North
 City Alpine State TX Zip Code 79830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Big Bend Regional Medical Center 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
 04 / 11 / 2013
Transaction ID : A2BE7BDDD9C46473CBEI
 Amount of Each Receipt this Period
 250.00

B. Mr Lance Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 Gessner Ste 2700
 City Houston State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Health System Occupation Executive Liaison-Office of Pres
 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
 01 / 11 / 2013
Transaction ID : A10D6A57B56964AA6981
 Amount of Each Receipt this Period
 250.00

C. Mr. Ken A Finch
 Full Name (Last, First, Middle Initial)
 Mailing Address 11801 S. Freeway
 City Fort Worth State TX Zip Code 76115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Huguley Memorial Medical Center 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
 03 / 12 / 2013
Transaction ID : A72D716713BDB46B5981
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 17 OF 44
	<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 Chuck Girard
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 San Jacinto Blvd Ste 1800
 City Austin State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA - Hospital Corporation of America Occupation Director, Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 03 / 26 / 2013
Transaction ID : A2C93C83DF307484A8AF
 Amount of Each Receipt this Period 250.00

B. Ms Paula Hagan
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 E Lamar Blvd Ste 900
 City Arlington State TX Zip Code 76011
 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 01 / 31 / 2013
Transaction ID : A60D984D0D2A546808DD
 Amount of Each Receipt this Period 250.00

C. Mr David G Handley
 Full Name (Last, First, Middle Initial)
 Mailing Address 8026 Floyd Curl Drive
 City San Antonio State TX Zip Code 78229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Methodist Specialty and Transplant Hos Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 500.00

Date of Receipt 01 / 31 / 2013
Transaction ID : AA395028892A54119906
 Amount of Each Receipt this Period 500.00

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 18 OF 44
	<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. Mr Gregory L Haralson
 Full Name (Last, First, Middle Initial)
 Mailing Address 12500 W Grand Pkwy S
 City Sugar Land State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Sugar Land Occupation 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
 05 / 08 / 2013
Transaction ID : ACF65F2CF19A545C083C
 Amount of Each Receipt this Period
 750.00

B. Mr John M Hawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2013
Transaction ID : ADEEBD8783BBA4409AA8
 Amount of Each Receipt this Period
 90.00

C. Mr John M Hawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Lavaca 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2013
Transaction ID : A48B24535E2D04C538AA
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional).....▶	930.00
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 19 OF 44
<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 John M Hawkins
Full Name (Last, First, Middle Initial)
Mailing Address 1108 Lavaca 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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2013

Transaction ID : AA67DF6D91791448DAEE

Amount of Each Receipt this Period
90.00

B. Mr John M Hawkins
Full Name (Last, First, Middle Initial)
Mailing Address 1108 Lavaca 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 ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

Transaction ID : A2A1525C1E7764AC995F

Amount of Each Receipt this Period
90.00

C. Ms Judy Hayes
Full Name (Last, First, Middle Initial)
Mailing Address 500 West 4th Street

City Odessa	State TX	Zip Code 79761-5001
----------------	-------------	------------------------

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

Name of Employer Medical Center Health System	Occupation Board Member
--	----------------------------

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
02	/	11	/	2013

Transaction ID : AFB8EC9AA6BA04D5790E

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	430.00
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 20 OF 44
	<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 Robert S Hendler
Full Name (Last, First, Middle Initial)

Mailing Address 5201 Harry Hines Blvd

City Dallas State TX Zip Code 75235-7708

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

Name of Employer Parkland Health and Hospital System Occupation Associate Chief Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 25 / 2013
Transaction ID : AE3407661A6E74028864

Amount of Each Receipt this Period 250.00

B. Mr Brad Holland
Full Name (Last, First, Middle Initial)

Mailing Address 1401 Medical Parkway

City Cedar Park State TX Zip Code 78613

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

Name of Employer Cedar Park Regional Medical Center Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 19 / 2013
Transaction ID : A05281F4FBD8340D6872

Amount of Each Receipt this Period 250.00

C. Mr Bryan O Horner
Full Name (Last, First, Middle Initial)

Mailing Address 120 E Harris

City San Angelo State TX Zip Code 76904

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

Name of Employer Shannon Medical Center Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 03 / 2013
Transaction ID : A1506358218844CE8A96

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 21 OF 44
	<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 C D Huffstutler
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 San Jacinto Blvd Ste 1800
 City Austin State TX Zip Code 78701
 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 / D D / Y Y Y Y Y Y
 05 / 16 / 2013
Transaction ID : A2FA8161DF35B45BAA40
 Amount of Each Receipt this Period
 1000.00

B. Mr Jason D Jennings
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 University Drive E
 City College Station State TX Zip Code 77840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scott & White Hospital - College Stati 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
 01 / 21 / 2013
Transaction ID : A758579BAA4974A7083D
 Amount of Each Receipt this Period
 250.00

C. Mr Tim Lancaster
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Pine
 City Abilene State TX Zip Code 79601-2316
 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
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2013
Transaction ID : A6D21DFDB689A404CA68
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 22 OF 44
<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

Full Name (Last, First, Middle Initial) A. Mr Jorge E Leal		Date of Receipt
Mailing Address 712 N. Wood Street		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City Gilmer	State TX	Zip Code 75644
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AE297B965EBB94CB38BB
Name of Employer East Texas Medical Center Gilmer		Amount of Each Receipt this Period
Occupation Administrator / COO		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Mr William S Love		Date of Receipt
Mailing Address 250 Decker Dr		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City Irving	State TX	Zip Code 75062-2706
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : ABF4B0249AE7E43358C0
Name of Employer Dallas-Fort Worth Hospital Council		Amount of Each Receipt this Period
Occupation President/CEO		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Mr Lance Lunsford		Date of Receipt
Mailing Address 1108 Lavaca Ste 700		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Austin	State TX	Zip Code 78701-2180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A0A57DE1BC151495FADD
Name of Employer Texas Hospital Association		Amount of Each Receipt this Period
Occupation VP Advocacy & Communications		<input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1290.00"/>
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 23 OF 44
	<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 Douglas A Matney
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 W Trenton Rd
 City Edinburg State TX Zip Code 78539-3413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer South Texas Health System Occupation Group Vice President
 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
 04 / 05 / 2013
Transaction ID : A08BF136EC2C0456E8E7
 Amount of Each Receipt this Period
 250.00

B. Mr Brett S McClung
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 East Lamar Blvd Ste 500
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Resources Occupation Executive VP Ops Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2013
Transaction ID : AC3B374A1F6F54198ABA
 Amount of Each Receipt this Period
 42.00

C. Mr Brett S McClung
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 East Lamar Blvd Ste 500
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Resources Occupation Executive VP Ops Leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2013
Transaction ID : ADB13FDAA1EED406FAE2
 Amount of Each Receipt this Period
 42.00

SUBTOTAL of Receipts This Page (optional).....▶	334.00
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 44
	<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 Rick W Merrill
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 7th Avenue
 City Fort Worth State TX Zip Code 76104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cook Children's Health Care System Occupation System President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 21 / 2013
Transaction ID : A227BA6B8B9AF4123B60
 Amount of Each Receipt this Period 1000.00

B. Mr Michael D Murphy
 Full Name (Last, First, Middle Initial)
 Mailing Address 6250 US Highway 83/84
 City Abilene State TX Zip Code 79606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Abilene Regional Medical Center Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 20 / 2013
Transaction ID : A6B868F3B1ABF4C3DB1D
 Amount of Each Receipt this Period 500.00

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 Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt 04 / 07 / 2013
Transaction ID : AEC3D0A8F512F44C09CF
 Amount of Each Receipt this Period 41.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 1541.50
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 25 OF 44
	(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

Full Name (Last, First, Middle Initial) A. Mr J P Murray		Date of Receipt
Mailing Address 551 Hill Country Dr		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Kerrville	State TX	Zip Code 78028-6085
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A7766CC344F114E0D867
Name of Employer Peterson Regional Medical Center		Amount of Each Receipt this Period <input type="text" value="41.50"/>
Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="249.00"/>	

Full Name (Last, First, Middle Initial) B. Mr J P Murray		Date of Receipt
Mailing Address 551 Hill Country Dr		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Kerrville	State TX	Zip Code 78028-6085
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A7070D4C5706F448880B
Name of Employer Peterson Regional Medical Center		Amount of Each Receipt this Period <input type="text" value="41.50"/>
Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="290.50"/>	

Full Name (Last, First, Middle Initial) C. Mr John E Phillips		Date of Receipt
Mailing Address 2700 E Broad St		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Mansfield	State TX	Zip Code 76063-5899
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A0A807199A57F40CE9E0
Name of Employer Methodist Mansfield Medical Center		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="333.00"/>
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 44
	<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

Full Name (Last, First, Middle Initial) A. Mrs Wilma Powell Stuart		Date of Receipt
Mailing Address PO Box 1879		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Angelo	TX	76902-1879
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AAF05C911BB8244959C4
Name of Employer	Occupation	Amount of Each Receipt this Period
Shannon Medical Center	Chief Nursing Officer	<input type="text" value="83.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="249.00"/>	

Full Name (Last, First, Middle Initial) B. Mrs Wilma Powell Stuart		Date of Receipt
Mailing Address PO Box 1879		<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Angelo	TX	76902-1879
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A71BE2E3E627045CEA87
Name of Employer	Occupation	Amount of Each Receipt this Period
Shannon Medical Center	Chief Nursing Officer	<input type="text" value="83.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="332.00"/>	

Full Name (Last, First, Middle Initial) C. Mrs Wilma Powell Stuart		Date of Receipt
Mailing Address PO Box 1879		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Angelo	TX	76902-1879
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AE84F5C2D96154DB8B9A
Name of Employer	Occupation	Amount of Each Receipt this Period
Shannon Medical Center	Chief Nursing Officer	<input type="text" value="83.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="415.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="249.00"/>
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 27 OF 44
	<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. Mrs Wilma Powell Stuart
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1879
 City San Angelo State TX Zip Code 76902-1879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shannon Medical Center Occupation Chief Nursing Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2013
Transaction ID : A87860D9D73784E3EBEB
 Amount of Each Receipt this Period
 83.00

B. Mr James W Robicheaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Winnsboro St
 City Quitman State TX Zip Code 75783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer East Texas Medical Center Quitman Occupation Administrator
 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
 02 / 01 / 2013
Transaction ID : A6C70C24AB29A4637B06
 Amount of Each Receipt this Period
 250.00

C. Mr Glenn A Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Hillcrest Medical Blvd
 City Waco State TX Zip Code 76712-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center 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
 02 / 07 / 2013
Transaction ID : AA5D63A6D81124B5D80C
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	458.00
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 44
	<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 Glenn A Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Hillcrest Medical Blvd
 City Waco State TX Zip Code 76712-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2013
Transaction ID : A384C11527759464787D
 Amount of Each Receipt this Period
 125.00

B. Mr Glenn A Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Hillcrest Medical Blvd
 City Waco State TX Zip Code 76712-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center 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
 04 / 07 / 2013
Transaction ID : A92C2E69F77F5485DB7C
 Amount of Each Receipt this Period
 125.00

C. Mr Glenn A Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Hillcrest Medical Blvd
 City Waco State TX Zip Code 76712-8897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hillcrest Baptist Medical Center Occupation 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
 05 / 07 / 2013
Transaction ID : A539D8400537B470DA34
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 44
	<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

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

Mailing Address 100 Hillcrest Medical Blvd

City Waco	State TX	Zip Code 76712-8897
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FEC ID number of contributing federal political committee. **C**

Name of Employer Hillcrest Baptist Medical Center	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
06	/	07	/	2013

Transaction ID : A3454F9B2A5224F9495A

Amount of Each Receipt this Period
125.00

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

Mailing Address 919 Hidden Ridge

City Irving	State TX	Zip Code 75038
----------------	-------------	-------------------

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

Name of Employer CHRISTUS Health	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
02	/	01	/	2013

Transaction ID : ACB534E639823445B9A8

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Mr Glenn Steven Sanders

Mailing Address 9250 Pinecroft

City The Woodlands	State TX	Zip Code 77380
-----------------------	-------------	-------------------

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

Name of Employer Memorial Hermann The Woodlands Hospita	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
02	/	07	/	2013

Transaction ID : AE339E7DEA82B41FC93B

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 30 OF 44
	<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

Full Name (Last, First, Middle Initial) A. Mr Glenn Steven Sanders		Date of Receipt
Mailing Address 9250 Pinecroft		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
The Woodlands	TX	77380
FEC ID number of contributing federal political committee.		Transaction ID : AD13D2ED7C41A4B6AB7C
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>
Name of Employer	Occupation	
Memorial Hermann The Woodlands Hospita	Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Glenn Steven Sanders		Date of Receipt
Mailing Address 9250 Pinecroft		<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
The Woodlands	TX	77380
FEC ID number of contributing federal political committee.		Transaction ID : AC6EFCA4B4C6740C5956
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>
Name of Employer	Occupation	
Memorial Hermann The Woodlands Hospita	Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Glenn Steven Sanders		Date of Receipt
Mailing Address 9250 Pinecroft		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
The Woodlands	TX	77380
FEC ID number of contributing federal political committee.		Transaction ID : A5D1492770A10411D80B
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>
Name of Employer	Occupation	
Memorial Hermann The Woodlands Hospita	Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="625.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="375.00"/>
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 44
<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 Glenn Steven Sanders
Full Name (Last, First, Middle Initial)

Mailing Address 9250 Pinecroft

City The Woodlands State TX Zip Code 77380

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

Name of Employer Memorial Hermann The Woodlands Hospita Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 07 / 2013
Transaction ID : A795B183313844210B9C

Amount of Each Receipt this Period 125.00

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

Mailing Address 1108 Lavaca 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 associate general counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 04 / 2013
Transaction ID : ACF506E9C1AA64CE2B27

Amount of Each Receipt this Period 41.00

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

Mailing Address 1108 Lavaca 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 associate general counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 25 / 2013
Transaction ID : A2EE9B63CE84347B6BDB

Amount of Each Receipt this Period 4.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 44
	<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 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 associate 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
 06 / 25 / 2013
Transaction ID : A47FC7C49F3944C108B9
 Amount of Each Receipt this Period
 41.00

B. Mr Andrew M Stern
 Full Name (Last, First, Middle Initial)
 Mailing Address 5430 LBJ Freeway Ste 350
 City Dallas State TX Zip Code 75240-2601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical City Dallas Hospital Occupation Trustee
 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
 02 / 20 / 2013
Transaction ID : A30B8DF4FCF7E4002AA5
 Amount of Each Receipt this Period
 250.00

C. Mr Brian C Stevens
 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 VP Marketing and Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 41.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2013
Transaction ID : AA90D0C95AC174363906
 Amount of Each Receipt this Period
 -10.42

SUBTOTAL of Receipts This Page (optional).....▶	280.58
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 33 OF 44
<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. Dr Dan Stultz
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca 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 President / 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
 06 / 04 / 2013

Transaction ID : ADCC0F331993E41D090E

Amount of Each Receipt this Period
 50.00

B. Dr Dan Stultz
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca 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 President / CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : A62953C75CCAA4037AAB

Amount of Each Receipt this Period
 50.00

C. Ms Debra F Sukin
Full Name (Last, First, Middle Initial)

Mailing Address 17200 St Lukes Way

City The Woodlands State TX Zip Code 77384-8007

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

Name of Employer St Lukes The Woodlands Hospital Occupation SVP/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
 01 / 31 / 2013

Transaction ID : A84162AE6DACA4A9EA2F

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 34 OF 44
	<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 James A Summersett III
Full Name (Last, First, Middle Initial)

Mailing Address 7 Medical Parkway

City Dallas State TX Zip Code 75234

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

Name of Employer Prime Healthcare Services Occupation Regional Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 07 / 2013
Transaction ID : A9B273DE7A8AE4023A7E

Amount of Each Receipt this Period 125.00

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

Mailing Address 7 Medical Parkway

City Dallas State TX Zip Code 75234

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

Name of Employer Prime Healthcare Services Occupation Regional Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 07 / 2013
Transaction ID : AA127FC9F5A164042A9E

Amount of Each Receipt this Period 125.00

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

Mailing Address 7 Medical Parkway

City Dallas State TX Zip Code 75234

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

Name of Employer Prime Healthcare Services Occupation Regional Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 07 / 2013
Transaction ID : A4EEE77FDB25D43799DD

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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 35 OF 44
	<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. Mr James A Summersett III
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Medical Parkway
 City Dallas State TX Zip Code 75234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prime Healthcare Services Occupation Regional 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
 05 / 07 / 2013
Transaction ID : AE315218C346D4F25A68
 Amount of Each Receipt this Period
 125.00

B. Mr James A Summersett III
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Medical Parkway
 City Dallas State TX Zip Code 75234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prime Healthcare Services Occupation Regional 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
 06 / 07 / 2013
Transaction ID : A61833B0A7C224612865
 Amount of Each Receipt this Period
 125.00

C. Mr David J Tesmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 E Lamar Blvd, Ste 1500
 City Arlington State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Health Resources Occupation SVP - Community Engagment & Adv
 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
 02 / 11 / 2013
Transaction ID : A4AE352FF29F94074B7F
 Amount of Each Receipt this Period
 750.00

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 36 OF 44
	<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 Jeff R Turner
Full Name (Last, First, Middle Initial)

Mailing Address 224 E 2nd Street

City Dumas State TX Zip Code 79029

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

Name of Employer Moore County Hospital District Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 18 / 2013
Transaction ID : A34CDB5101FD943CC966

Amount of Each Receipt this Period 275.00

B. Dr Margaret Van Bree
Full Name (Last, First, Middle Initial)

Mailing Address 6270 Bertner Ave MC 4-262

City Houston State TX Zip Code 77030

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

Name of Employer St Lukes Episcopal Hospital Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2013
Transaction ID : ABB9721E4B5544926807

Amount of Each Receipt this Period 250.00

C. Mr Xavier Villarreal
Full Name (Last, First, Middle Initial)

Mailing Address 3201 W. Highway 22

City Corsicana State TX Zip Code 75110

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

Name of Employer Navarro Regional Hospital Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2013
Transaction ID : A2B345C5D061E47EFBC9

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

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 44
	<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 Robert L Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 2222 Welborn St
 City Dallas State TX Zip Code 75219-3924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Scottish Rite Hospital for Child 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
 02 / 18 / 2013
Transaction ID : A4308570E440F403D9F6
 Amount of Each Receipt this Period
 750.00

B. Mr Patrick L Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 S. Palestine
 City Athens State TX Zip Code 75751
 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 / D D / Y Y Y Y Y Y
 03 / 11 / 2013
Transaction ID : ACB87CAE079E7466091C
 Amount of Each Receipt this Period
 500.00

C. Mr Freddy C Warner Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 920 Frostwood Dr
 City Houston State TX Zip Code 77024-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Hermann Health System Occupation System Executive Public Policy
 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
 04 / 07 / 2013
Transaction ID : AE75E971331074E70BF4
 Amount of Each Receipt this Period
 62.50

SUBTOTAL of Receipts This Page (optional).....▶	1312.50
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 38 OF 44
<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

Full Name (Last, First, Middle Initial) A. Mr Freddy C Warner Jr		Date of Receipt
Mailing Address 920 Frostwood Dr		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Houston	TX	77024-2312
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A2D1BFD6600A74FBA8CE
Name of Employer Memorial Hermann Health System		Amount of Each Receipt this Period
Occupation System Executive Public Policy		<input type="text" value="62.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="312.50"/>	

Full Name (Last, First, Middle Initial) B. Mr Freddy C Warner Jr		Date of Receipt
Mailing Address 920 Frostwood Dr		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Houston	TX	77024-2312
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AB7CB005E54D24D42B32
Name of Employer Memorial Hermann Health System		Amount of Each Receipt this Period
Occupation System Executive Public Policy		<input type="text" value="62.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) C. Mr Wilson J Weber III		Date of Receipt
Mailing Address 5801 Tennyson Pkwy Ste 550		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Plano	TX	75024
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A2DE719DFD7E74CF5893
Name of Employer Community Hospital Corporation		Amount of Each Receipt this Period
Occupation Exec VP / COO		<input type="text" value="41.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="205.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="166.00"/>
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 39 OF 44
<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

Full Name (Last, First, Middle Initial) A. Mr William W Webster		Date of Receipt
Mailing Address PO Drawer 7239		<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Odessa	State TX	Zip Code 79760-7239
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A26B350600D914B38ACD
Name of Employer Medical Center Health System		Amount of Each Receipt this Period <input type="text" value="125.00"/>
Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Mr William W Webster		Date of Receipt
Mailing Address PO Drawer 7239		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Odessa	State TX	Zip Code 79760-7239
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AB322CB46F52D43E9A77
Name of Employer Medical Center Health System		Amount of Each Receipt this Period <input type="text" value="125.00"/>
Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) C. Mr William W Webster		Date of Receipt
Mailing Address PO Drawer 7239		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Odessa	State TX	Zip Code 79760-7239
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A7A51D19EB861419EBC3
Name of Employer Medical Center Health System		Amount of Each Receipt this Period <input type="text" value="125.00"/>
Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
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:	PAGE 40 OF 44
	(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 Jaime A Wesolowski
 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 President / CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 01 / 24 / 2013
Transaction ID : A3DA15748C3764B03BD6
 Amount of Each Receipt this Period
 1000.00

B. Mr Michael D Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5801 Tennyson Pkwy Ste 550
 City Plano State TX Zip Code 75024
 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 ▼ 400.00

Date of Receipt
 02 / 07 / 2013
Transaction ID : A0EB2A72B2A81407CB1D
 Amount of Each Receipt this Period
 200.00

C. Mr Michael D Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5801 Tennyson Pkwy Ste 550
 City Plano State TX Zip Code 75024
 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 ▼ 600.00

Date of Receipt
 03 / 07 / 2013
Transaction ID : A1877C78799AC4CB8A33
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
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 44
<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 Michael D Williams
Full Name (Last, First, Middle Initial)
Mailing Address 5801 Tennyson Pkwy Ste 550

City Plano	State TX	Zip Code 75024
---------------	-------------	-------------------

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 ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2013

Transaction ID : A80590A9C1C56413C840

Amount of Each Receipt this Period

200.00

B. Mr Michael D Williams
Full Name (Last, First, Middle Initial)
Mailing Address 5801 Tennyson Pkwy Ste 550

City Plano	State TX	Zip Code 75024
---------------	-------------	-------------------

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 ▼ **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2013

Transaction ID : A60A9C0A56C4D4482BBB

Amount of Each Receipt this Period

200.00

C. Mr Michael D Williams
Full Name (Last, First, Middle Initial)
Mailing Address 5801 Tennyson Pkwy Ste 550

City Plano	State TX	Zip Code 75024
---------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : A116F77CE29F547908B4

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 42 OF 44
	<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 Steve Woerner
Full Name (Last, First, Middle Initial)

Mailing Address 3533 S. Alameda Street

City Corpus Christi State TX Zip Code 78411

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

Name of Employer Driscoll Children's Hospital Occupation President/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
 01 / 23 / 2013

Transaction ID : AD7302FDC116D4F37B35

Amount of Each Receipt this Period
 250.00

B. Mr Dan Wolterman
Full Name (Last, First, Middle Initial)

Mailing Address 929 Gessner Ste 2700

City Houston State TX Zip Code 77024

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

Name of Employer Memorial Hermann Health System Occupation President / CEO

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
 04 / 10 / 2013

Transaction ID : A111E3E91390B4239A75

Amount of Each Receipt this Period
 750.00

c. Mr Ignacio O Zamarron
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Lavaca 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 VP CFO Bus Affairs & Oper

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2013

Transaction ID : A3152D114B8414C268DD

Amount of Each Receipt this Period
 83.34

SUBTOTAL of Receipts This Page (optional)..... ▶ 1083.34

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 44
	<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

Full Name (Last, First, Middle Initial) A. Mr Ignacio O Zamarron		Date of Receipt
Mailing Address 1108 Lavaca Ste 700		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Austin	TX	78701-2180
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A32AD6B425C1B45868A3
Name of Employer	Occupation	Amount of Each Receipt this Period
Texas Hospital Association	Sr VP CFO Bus Affairs & Oper	<input type="text" value="83.34"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) B. Mr Ignacio O Zamarron		Date of Receipt
Mailing Address 1108 Lavaca Ste 700		<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
Austin	TX	78701-2180
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AE6468944391D4D19AD1
Name of Employer	Occupation	Amount of Each Receipt this Period
Texas Hospital Association	Sr VP CFO Bus Affairs & Oper	<input type="text" value="83.34"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="416.70"/>	

Full Name (Last, First, Middle Initial) C. Mr Ignacio O Zamarron		Date of Receipt
Mailing Address 1108 Lavaca Ste 700		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
Austin	TX	78701-2180
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AD08972A242154569B5D
Name of Employer	Occupation	Amount of Each Receipt this Period
Texas Hospital Association	Sr VP CFO Bus Affairs & Oper	<input type="text" value="83.34"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.04"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.02"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="26568.92"/>

**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

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
PAC to PAC Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Other2013

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	14	/	2013

Transaction ID : B8C52AE77BFD54EEB8D1

Amount of Each Disbursement this Period

11000.00

Full Name (Last, First, Middle Initial)

B. AHAPAC-American Hospital Association FEDERAL

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
Pac to Pac Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Other2013

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	02	/	2013

Transaction ID : BBE49B4F5933647E896B

Amount of Each Disbursement this Period

17000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

28000.00

28000.00
