

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P.O. Box 679010
 Check if different than previously reported. (ACC)
Austin TX 78767-9010

2. **FEC IDENTIFICATION NUMBER** C00301325
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 09 30 2010

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

Type or Print Name of Treasurer Jennifer Banda

Signature of Treasurer Electronically Filed by Jennifer Banda Date 10 14 2010

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

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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="2010"/>		855.21
(b) Cash on Hand at Beginning of Reporting Period	13383.42	
(c) Total Receipts (from Line 19)	29203.62	89063.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	42587.04	89918.43
7. Total Disbursements (from Line 31)	20518.86	67850.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22068.18	22068.18
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

FEC Form 3X (Rev. 06/2004)

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)	26991.46	78358.54
(ii) Unitemized	2212.16	10704.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)	29203.62	89063.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	29203.62	89063.22
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	29203.62	89063.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29203.62	89063.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	67300.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	500.00	500.00
(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))	500.00	500.00
29. Other Disbursements.....	18.86	50.25
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	20518.86	67850.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20518.86	67850.25

DETAILED SUMMARY PAGE
of Disbursements

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)	29203.62	89063.22
34. Total Contribution Refunds (from Line 28(d))	500.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28703.62	88563.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Glenn Steven Sanders	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 9250 Pinecroft	Transaction ID: 18427440
	City State Zip Code Shenandoah TX 77380-3218	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Memorial Hermann The Woodlands Hospital	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 707.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jeff A. Bourgeois, FACHE	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 11212 State Hwy 151	Transaction ID: 18427447
	City State Zip Code San Antonio TX 78251-4498	Amount of Each Receipt this Period 83.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CHRISTUS Santa Rosa Westover Hills	Occupation VP/Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	

C.	Full Name (Last, First, Middle Initial) Mr. Glenn A. Robinson	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 100 Hillcrest Medical Blvd	Transaction ID: 18427448
	City State Zip Code Waco TX 76712-8897	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Hillcrest Regional Medical Center	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Mr. Michael D. Williams, FACHE

Mailing Address 5801 Tennyson Pkwy Ste 550

City State Zip Code
Plano TX 75024-6116

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 ▼
1400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2010

Transaction ID: 18427449

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Brett S. McClung, FACHE

Mailing Address 6100 Harris Parkway

City State Zip Code
Fort Worth TX 76132-4101

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

Name of Employer
Texas Health Harris Methodist Hospital

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2010

Transaction ID: 18427450

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mr. James N. Valenti, FACHE

Mailing Address PO Box 20009

City State Zip Code
El Paso TX 79998-0009

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

Name of Employer
University Medical Center of El Paso

Occupation
President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2010

Transaction ID: 18427451

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **742.00**

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 8 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. James A. Summersett, III, FACHE	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address PO Box 1110	Transaction ID: 18427452
	City State Zip Code Weslaco TX 78599-1110	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Knapp Medical Center	Occupation President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 707.00	

B.	Full Name (Last, First, Middle Initial) Mr. William W. Webster, FACHE	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address PO Drawer 7239	Transaction ID: 18427453
	City State Zip Code Odessa TX 79760-7239	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Medical Center 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	

C.	Full Name (Last, First, Middle Initial) Dr. Jennifer G. Cutrer, Ph.D.	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 5201 Harry Hines Boulevard	Transaction ID: 18427455
	City State Zip Code Dallas TX 75235-7793	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Parkland Health & Hospital System	Occupation Exec Director Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.00	

SUBTOTAL of Receipts This Page (optional)	291.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 53
	<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.	Full Name (Last, First, Middle Initial) Ms. Wilma Powell Stuart		Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address PO Box 1879		Transaction ID: 18427457
	City San Angelo	State TX	Zip Code 76902-1879
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.00
	Name of Employer Shannon Medical Center	Occupation Chief Nursing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 581.00	

B.	Full Name (Last, First, Middle Initial) Mr. Charles Ardoin, Jr., M.D.		Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 929 Gessner Road, Ste 2700		Transaction ID: 18427458
	City Houston	State TX	Zip Code 77024-2515
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.00
	Name of Employer Memorial Hermann Health-care System	Occupation Physician-in-Chief	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 287.00	

C.	Full Name (Last, First, Middle Initial) Mr. William Parks		Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 9250 Pinecroft		Transaction ID: 18427460
	City Shenandoah	State TX	Zip Code 77380-3218
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.00
	Name of Employer Memorial Hermann The Woodlands Hospital	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 581.00	

SUBTOTAL of Receipts This Page (optional)	207.00
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 10 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Patrick Carrier	Date of Receipt MM / DD / YYYY 07 / 02 / 2010
	Mailing Address 333 N Santa Rosa St	Transaction ID: 18427902
	City State Zip Code San Antonio TX 78207-3108	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CHRISTUS Santa Rosa Health Care	Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Ignacio O. Zamarron	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address PO Box 679010	Transaction ID: 18429189
	City State Zip Code Austin TX 78767-9010	Amount of Each Receipt this Period 83.34
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Association	Occupation Sr VP CFO Business Affairs Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.38	

C.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACP	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address PO Box 679010 Suite 700	Transaction ID: 18429197
	City State Zip Code Austin TX 78767-9010	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Association	Occupation President / CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	1133.34
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 11 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Charles W. Bailey, J.D.		Date of Receipt MM / DD / YYYY 07 / 07 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18429202		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 41.68	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 291.76		
Name of Employer Texas Hospital Association		Occupation Sr VP General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Ms. Elizabeth N. Sjoberg, J.D., RN		Date of Receipt MM / DD / YYYY 07 / 07 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18429205		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 280.00		
Name of Employer Texas Hospital Association		Occupation Associate General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, APR		Date of Receipt MM / DD / YYYY 07 / 07 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18429207		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 83.34	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 583.38		
Name of Employer Texas Hospital Association		Occupation Sr Vice President Communications			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	165.02
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 53
	<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.	Full Name (Last, First, Middle Initial) Ms. Elizabeth Jennings		Date of Receipt
	Mailing Address 8310 N Capital of TX Hwy #250		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Austin	TX	78731-1007
	FEC ID number of contributing federal political committee. C		Transaction ID: 18429210
Name of Employer Texas Hospital Insurance Exchange		Occupation VP Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Kent Stevens		Date of Receipt
	Mailing Address 1108 Lavaca Ste 700		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Austin	TX	78701-2180
	FEC ID number of contributing federal political committee. C		Transaction ID: 18429213
Name of Employer Texas Hospital Association		Occupation Mgr Patient Data System Depart	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="323.34"/>	<input type="text" value="40.00"/>

C.	Full Name (Last, First, Middle Initial) Ms. Starr West		Date of Receipt
	Mailing Address PO Box 679010		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Austin	TX	78767-9010
	FEC ID number of contributing federal political committee. C		Transaction ID: 18429240
Name of Employer Texas Hospital Association		Occupation Retired Senior Director, Policy Analys	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="291.76"/>	<input type="text" value="41.68"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="121.68"/>
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 13 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Lisa Kepple

Mailing Address PO Box 679010

City State Zip Code
Austin TX 78767-9010

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Texas Hospital Association Programs Director, HOSPAC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.76

Date of Receipt MM / DD / YYYY
07 / 07 / 2010

Transaction ID: 18429250

Amount of Each Receipt this Period 41.68

B. Full Name (Last, First, Middle Initial)
Mr. Kevin Talbot

Mailing Address 3127 E Cedar Hollow Dr

City State Zip Code
Pearland TX 77584-8127

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HealthSHARE Manager Regional Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt MM / DD / YYYY
07 / 07 / 2010

Transaction ID: 18429253

Amount of Each Receipt this Period 40.00

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

Mailing Address PO Box 679010

City State Zip Code
Austin TX 78767-9010

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Texas Hospital Association Sr VP Advocacy Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
07 / 07 / 2010

Transaction ID: 18429321

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 131.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 53
	<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.	Full Name (Last, First, Middle Initial) Ms. Deborah Samples		Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 8310 N Capital of TX Hwy #250		Transaction ID: 18429328
	City Austin	State TX	Zip Code 78731-1007
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Texas Hospital Insurance Exchange		Occupation President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) Mr. Al Goforth		Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 8202 Gary Ave		Transaction ID: 18429331
	City Lubbock	State TX	Zip Code 79423-2820
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer HealthSHARE		Occupation Regional Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jim M. Dixon		Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 1108 Lavaca Ste 700		Transaction ID: 18429334
	City Austin	State TX	Zip Code 78701-2180
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.32
Name of Employer HealthSHARE		Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 561.92	

SUBTOTAL of Receipts This Page (optional)	163.32
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. John Checkley	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address PO Box 679010	Transaction ID: 18429336
	City State Zip Code Austin TX 78767-9010	Amount of Each Receipt this Period 82.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Association	Occupation Sr VP Member Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 574.00	

B.	Full Name (Last, First, Middle Initial) Ms. Vicki Dale	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 2046 Wedgewood	Transaction ID: 18429338
	City State Zip Code Grapevine TX 76051-6086	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer HealthSHARE	Occupation Regional Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jaime Wesolowski	Date of Receipt MM / DD / YYYY 07 / 16 / 2010
	Mailing Address 8109 Fredericksburg Rd	Transaction ID: 18441078
	City State Zip Code San Antonio TX 78229-3311	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Methodist Healthcare System of San Ant	Occupation President and CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	2122.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Wilson J. Weber		Date of Receipt
	Mailing Address 5801 Tennyson Pkwy Ste 550		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 21 / 2010
	City	State	Zip Code
	Plano	TX	75024-6116
	FEC ID number of contributing federal political committee. C		Transaction ID: 18448115
Name of Employer Community Hospital Corporation		Occupation Exec VP/Chief Operating Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 825.00	<input type="text"/> 650.00

B.	Full Name (Last, First, Middle Initial) Ms. Jan A. Reed, CPA		Date of Receipt
	Mailing Address PO Box 1112		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2010
	City	State	Zip Code
	Electra	TX	76360-1112
	FEC ID number of contributing federal political committee. C		Transaction ID: 18448252
Name of Employer Electra Memorial Hospital		Occupation CEO/Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Ms. Amanda Y. Engler		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
	FEC ID number of contributing federal political committee. C		Transaction ID: 18448253
Name of Employer Texas Hospital Association		Occupation Senior Director Media Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.00	<input type="text"/> 28.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1678.00
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 17 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Ignacio O. Zamarron		Date of Receipt MM / DD / YYYY 07 / 23 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18448254		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 83.34	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Texas Hospital Association		Occupation Sr VP CFO Business Affairs Group			
		Aggregate Year-to-Date ▼ 666.72			

B.	Full Name (Last, First, Middle Initial) Ms. Donna W. Goodwin		Date of Receipt MM / DD / YYYY 07 / 23 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18448255		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 28.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Texas Hospital Association		Occupation VP Human Resources			
		Aggregate Year-to-Date ▼ 224.00			

C.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACP		Date of Receipt MM / DD / YYYY 07 / 23 / 2010		
	Mailing Address PO Box 679010 Suite 700		Transaction ID: 18448257		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer Texas Hospital Association		Occupation President / CEO			
		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional)	161.34
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 18 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Charles W. Bailey, J.D.		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 23 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 18448259
Name of Employer Texas Hospital Association		Occupation Sr VP General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 41.68
		<input type="text"/> 333.44	

B.	Full Name (Last, First, Middle Initial) Ms. Elizabeth N. Sjoberg, J.D., RN		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 23 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 18448261
Name of Employer Texas Hospital Association		Occupation Associate General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 320.00	

C.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, , APR		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 23 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 18448262
Name of Employer Texas Hospital Association		Occupation Sr Vice President Communications	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 83.34
		<input type="text"/> 666.72	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 165.02
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 19 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Jennings

Mailing Address 8310 N Capital of TX Hwy #250

City Austin State TX Zip Code 78731-1007

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

Name of Employer Texas Hospital Insurance Exchange Occupation VP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 23 / 2010
Transaction ID: 18448264
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Mr. Kent Stevens

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 Mgr Patient Data System Depart

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 363.34

Date of Receipt 07 / 23 / 2010
Transaction ID: 18448266
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Haynes, FACHE

Mailing Address 1215 E Court Street

City Sequin State TX Zip Code 78155-5129

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

Name of Employer Guadalupe Regional Medical Center Occupation CEO & Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 23 / 2010
Transaction ID: 18448268
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **580.00**

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 20 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A.

Full Name (Last, First, Middle Initial)
Ms. Lisa Kepple

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation Programs Director, HOSPAC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.44

Date of Receipt 07 / 23 / 2010
Transaction ID: 18448274

Amount of Each Receipt this Period 41.68

B.

Full Name (Last, First, Middle Initial)
Mr. Kevin Talbot

Mailing Address 3127 E Cedar Hollow Dr

City Pearland State TX Zip Code 77584-8127

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

Name of Employer HealthSHARE Occupation Manager Regional Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 23 / 2010
Transaction ID: 18448275

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Mr. Tom Flanagan

Mailing Address 6411 Fannin

City Houston State TX Zip Code 77030-1501

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

Name of Employer Memorial Hermann - Texas Medical Center Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 23 / 2010
Transaction ID: 18448276

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 581.68

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A.

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

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation Sr VP Advocacy Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 23 / 2010

Transaction ID: 18448278

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Ms. Deborah Samples

Mailing Address 8310 N Capital of TX Hwy #250

City Austin State TX Zip Code 78731-1007

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

Name of Employer Texas Hospital Insurance Exchange Occupation President CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 23 / 2010

Transaction ID: 18448280

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Mr. Al Goforth

Mailing Address 8202 Gary Ave

City Lubbock State TX Zip Code 79423-2820

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

Name of Employer HealthSHARE Occupation Regional Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 23 / 2010

Transaction ID: 18448283

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 130.00

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 22 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A.

Full Name (Last, First, Middle Initial)
Mr. Jim M. Dixon

Mailing Address 1108 Lavaca Ste 700

City State Zip Code
Austin TX 78701-2180

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

Name of Employer HealthSHARE Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 645.24

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2010

Transaction ID: 18448285

Amount of Each Receipt this Period
83.32

B.

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

Mailing Address PO Box 679010

City State Zip Code
Austin TX 78767-9010

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

Name of Employer Texas Hospital Association Occupation Sr VP Member Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 656.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2010

Transaction ID: 18448286

Amount of Each Receipt this Period
82.00

C.

Full Name (Last, First, Middle Initial)
Ms. Vicki Dale

Mailing Address 2046 Wedgewood

City State Zip Code
Grapevine TX 76051-6086

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

Name of Employer HealthSHARE Occupation Regional Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 23 / 2010

Transaction ID: 18448287

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **205.32**

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 23 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Mr. David Butler

Mailing Address 10999 IH10 Ste 800

City San Antonio State TX Zip Code 78230

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

Name of Employer: Community Hospital Corporation
Occupation: SVP and General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 29 / 2010
Transaction ID: 18475775
Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Mr. J C Montgomery, Jr., FACHE

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 02 / 2010
Transaction ID: 18486042
Amount of Each Receipt this Period: 1000.00

C.

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

Mailing Address 9250 Pinecroft

City Shenandoah State TX Zip Code 77380-3218

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

Name of Employer: Memorial Hermann The Woodlands Hospital
Occupation: Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt: 08 / 05 / 2010
Transaction ID: 18498840
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **1625.00**

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 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Jeff A. Bourgeois, FACHE	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 11212 State Hwy 151	Transaction ID: 18498842
	City State Zip Code San Antonio TX 78251-4498	Amount of Each Receipt this Period 83.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CHRISTUS Santa Rosa Westover Hills	Occupation VP/Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00	

B.	Full Name (Last, First, Middle Initial) Mr. Glenn A. Robinson	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 100 Hillcrest Medical Blvd	Transaction ID: 18498843
	City State Zip Code Waco TX 76712-8897	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Hillcrest Regional Medical Center	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael D. Williams, FACHE	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 5801 Tennyson Pkwy Ste 550	Transaction ID: 18498844
	City State Zip Code Plano TX 75024-6116	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Community Hospital Corporation	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional)	408.00
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 25 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Mr. Brett S. McClung, FACHE

Mailing Address 6100 Harris Parkway

City State Zip Code
Fort Worth TX 76132-4101

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

Name of Employer Texas Health Harris Methodist Hospital
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 18498845

Amount of Each Receipt this Period
42.00

B.

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

Mailing Address PO Box 1110

City State Zip Code
Weslaco TX 78599-1110

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

Name of Employer Knapp Medical Center
Occupation President CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
832.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 18498846

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Mr. William W. Webster, FACHE

Mailing Address PO Drawer 7239

City State Zip Code
Odessa TX 79760-7239

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

Name of Employer Medical Center Hospital
Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 18498847

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **292.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Dr. Jennifer G. Cutrer, Ph.D.

Mailing Address 5201 Harry Hines Boulevard

City State Zip Code
Dallas TX 75235-7793

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

Name of Employer Parkland Health & Hospital System
Occupation Exec Director Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 18498848

Amount of Each Receipt this Period
41.00

B.

Full Name (Last, First, Middle Initial)
Ms. Wilma Powell Stuart

Mailing Address PO Box 1879

City State Zip Code
San Angelo TX 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 ▼ 664.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 18498849

Amount of Each Receipt this Period
83.00

C.

Full Name (Last, First, Middle Initial)
Mr. Charles Ardoin, Jr., M.D.

Mailing Address 929 Gessner Road, Ste 2700

City State Zip Code
Houston TX 77024-2515

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

Name of Employer Memorial Hermann Health-care System
Occupation Physician-in-Chief

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 18498850

Amount of Each Receipt this Period
41.00

SUBTOTAL of Receipts This Page (optional) ► 165.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

Mr. William Parks

Mailing Address 9250 Pinecroft

City State Zip Code
Shenandoah TX 77380-3218

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

Name of Employer Occupation
Memorial Hermann The Woodlands Hospital Chief Medical Officer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 664.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: 18498851

Amount of Each Receipt this Period

83.00

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher J. Durovich, FACHE

Mailing Address 1935 Medical District Drive

City State Zip Code
Dallas TX 75235-7701

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

Name of Employer Occupation
Children's Medical Center of Dallas President & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: 18499848

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ms. Lois Wischkaemper

Mailing Address P.O. Box 5980

City State Zip Code
Lubbock TX 79408-5980

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

Name of Employer Occupation
University Medical Center Senior VP General Counsel

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: 18500486

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1083.00

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 28 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Mr. Ronald Long

Mailing Address 612 E Lamar Blvd Ste 900

City State Zip Code
Arlington TX 76011-4130

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

Name of Employer Texas Health Resources Occupation Exec VP Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: 18500487

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Carolyn J. Belk

Mailing Address 1707 Sunset Blvd

City State Zip Code
Houston TX 77005-1713

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

Name of Employer Methodist Hospital, The Occupation VP Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 11 / 2010

Transaction ID: 18508652

Amount of Each Receipt this Period
500.00

C.

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

Mailing Address 612 E Lamar Blvd Ste 900

City State Zip Code
Arlington TX 76011-4130

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

Name of Employer Texas Health Resources Occupation General Counsel VP Legal Serv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2010

Transaction ID: 18523410

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: PAGE 29 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HOSPAC - Federal The Political Action Committee of The Texas Hospital Association

A.

Full Name (Last, First, Middle Initial)
Ms. Amanda Y. Engler

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation Senior Director Media Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 25 / 2010

Transaction ID: 18523850

Amount of Each Receipt this Period 28.00

B.

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

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation Sr VP CFO Business Affairs Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.06

Date of Receipt 08 / 25 / 2010

Transaction ID: 18523851

Amount of Each Receipt this Period 83.34

C.

Full Name (Last, First, Middle Initial)
Ms. Donna W. Goodwin

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation VP Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 25 / 2010

Transaction ID: 18523852

Amount of Each Receipt this Period 28.00

SUBTOTAL of Receipts This Page (optional) ► 139.34

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 30 / 53
	<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.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACP		Date of Receipt
	Mailing Address PO Box 679010 Suite 700		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 5 / 2 0 1 0
	City	State	Zip Code
	Austin	TX	78767-9010
	FEC ID number of contributing federal political committee.		Transaction ID: 18523854
		Amount of Each Receipt this Period	<input type="text"/> 50.00
Name of Employer Texas Hospital Association		Occupation President / CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 450.00

B.	Full Name (Last, First, Middle Initial) Mr. Charles W. Bailey, J.D.		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 5 / 2 0 1 0
	City	State	Zip Code
	Austin	TX	78767-9010
	FEC ID number of contributing federal political committee.		Transaction ID: 18523856
		Amount of Each Receipt this Period	<input type="text"/> 41.68
Name of Employer Texas Hospital Association		Occupation Sr VP General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 375.12

C.	Full Name (Last, First, Middle Initial) Ms. Elizabeth N. Sjoberg, J.D., RN		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 5 / 2 0 1 0
	City	State	Zip Code
	Austin	TX	78767-9010
	FEC ID number of contributing federal political committee.		Transaction ID: 18523859
		Amount of Each Receipt this Period	<input type="text"/> 40.00
Name of Employer Texas Hospital Association		Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 360.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 131.68
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 31 / 53
	<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.

Full Name (Last, First, Middle Initial)
Ms. Ann Ward, , APR

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation Sr Vice President Communications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.06

Date of Receipt 08 / 25 / 2010

Transaction ID: 18523860

Amount of Each Receipt this Period 83.34

B.

Full Name (Last, First, Middle Initial)
Ms. Elizabeth Jennings

Mailing Address 8310 N Capital of TX Hwy #250

City Austin State TX Zip Code 78731-1007

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

Name of Employer Texas Hospital Insurance Exchange Occupation VP Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 25 / 2010

Transaction ID: 18523862

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kent Stevens

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 Mgr Patient Data System Depart

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 403.34

Date of Receipt 08 / 25 / 2010

Transaction ID: 18523863

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► **163.34**

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: PAGE 32 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Ms. Mitzi Ressmann, RN, FACHE

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation VP Member Svcs Bus Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 08 / 25 / 2010
Transaction ID: 18523869

Amount of Each Receipt this Period 24.00

B.

Full Name (Last, First, Middle Initial)
Ms. Lisa Kepple

Mailing Address PO Box 679010

City Austin State TX Zip Code 78767-9010

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

Name of Employer Texas Hospital Association Occupation Programs Director, HOSPAC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.12

Date of Receipt 08 / 25 / 2010
Transaction ID: 18523870

Amount of Each Receipt this Period 41.68

C.

Full Name (Last, First, Middle Initial)
Mr. Kevin Talbot

Mailing Address 3127 E Cedar Hollow Dr

City Pearland State TX Zip Code 77584-8127

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

Name of Employer HealthSHARE Occupation Manager Regional Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 25 / 2010
Transaction ID: 18523871

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 105.68

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address PO Box 679010

City State Zip Code
Austin TX 78767-9010

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

Name of Employer Occupation
Texas Hospital Association Sr VP Advocacy Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2010

Transaction ID: 18523874

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Ms. Deborah Samples

Mailing Address 8310 N Capital of TX Hwy #250

City State Zip Code
Austin TX 78731-1007

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

Name of Employer Occupation
Texas Hospital Insurance Exchange President CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2010

Transaction ID: 18523876

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Mr. Al Goforth

Mailing Address 8202 Gary Ave

City State Zip Code
Lubbock TX 79423-2820

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

Name of Employer Occupation
HealthSHARE Regional Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2010

Transaction ID: 18523879

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

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 34 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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.

Full Name (Last, First, Middle Initial)
Mr. Jim M. Dixon

Mailing Address 1108 Lavaca Ste 700

City State Zip Code
Austin TX 78701-2180

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

Name of Employer HealthSHARE Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 728.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: 18523881

Amount of Each Receipt this Period
83.32

B.

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

Mailing Address PO Box 679010

City State Zip Code
Austin TX 78767-9010

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

Name of Employer Texas Hospital Association Occupation Sr VP Member Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 738.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: 18523882

Amount of Each Receipt this Period
82.00

C.

Full Name (Last, First, Middle Initial)
Ms. Vicki Dale

Mailing Address 2046 Wedgewood

City State Zip Code
Grapevine TX 76051-6086

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

Name of Employer HealthSHARE Occupation Regional Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: 18523883

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **205.32**

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

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

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

FOR LINE NUMBER: PAGE 35 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

Ms. Deborah Paganelli, CHE

Mailing Address 1600 Hospital Parkway

City State Zip Code
Bedford TX 76022-6913

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

Name of Employer Occupation
Texas Health Harris Methodist Hospital President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: 18545617

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Oscar L. Amparan, FACHE

Mailing Address 1301 Pennsylvania Ave

City State Zip Code
Fort Worth TX 76104-2122

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

Name of Employer Occupation
Texas Health Harris Methodist Hospital President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: 18545642

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ms. Bonnie Bell

Mailing Address 612 E Lamar Blvd Ste 900

City State Zip Code
Arlington TX 76011-4130

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

Name of Employer Occupation
Texas Health Resources SVP People and Culture

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 1 0

Transaction ID: 18563466

Amount of Each Receipt this Period

500.00

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 36 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Glenn Steven Sanders	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 9250 Pinecroft	Transaction ID: 18563678
	City State Zip Code Shenandoah TX 77380-3218	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Memorial Hermann The Woodlands Hospital	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 957.00	

B.	Full Name (Last, First, Middle Initial) Mr. James Patrick Murray, FACHE	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 551 Hill Country Dr	Transaction ID: 18563680
	City State Zip Code Kerrville TX 78028-6085	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Peterson Regional Medical Center	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jeff A. Bourgeois, FACHE	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 11212 State Hwy 151	Transaction ID: 18563681
	City State Zip Code San Antonio TX 78251-4498	Amount of Each Receipt this Period 83.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CHRISTUS Santa Rosa Westover Hills	Occupation VP/Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	

SUBTOTAL of Receipts This Page (optional)	358.00
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 37 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address 612 E Lamar Blvd Ste 900

City State Zip Code
Arlington TX 76011-4130

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

Name of Employer Occupation
Texas Health Resources General Counsel VP Legal Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 18563682

Amount of Each Receipt this Period
250.00

B.

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

Mailing Address 100 Hillcrest Medical Blvd

City State Zip Code
Waco TX 76712-8897

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

Name of Employer Occupation
Hillcrest Regional Medical Center CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 18563683

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael D. Williams, FACHE

Mailing Address 5801 Tennyson Pkwy Ste 550

City State Zip Code
Plano TX 75024-6116

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

Name of Employer Occupation
Community Hospital Corporation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 18563684

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **575.00**

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 38 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Mr. Brett S. McClung, FACHE

Mailing Address 6100 Harris Parkway

City State Zip Code
Fort Worth TX 76132-4101

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

Name of Employer: Texas Health Harris Methodist Hospital
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 18563685
Amount of Each Receipt this Period: 42.00

B.

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

Mailing Address PO Box 1110

City State Zip Code
Weslaco TX 78599-1110

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

Name of Employer: Knapp Medical Center
Occupation: President CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
957.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 18563686
Amount of Each Receipt this Period: 125.00

C.

Full Name (Last, First, Middle Initial)
Mr. William W. Webster, FACHE

Mailing Address PO Drawer 7239

City State Zip Code
Odessa TX 79760-7239

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

Name of Employer: Medical Center Hospital
Occupation: Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 18563687
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **292.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 53
	<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.	Full Name (Last, First, Middle Initial) Dr. Jennifer G. Cutrer, Ph.D.	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 5201 Harry Hines Boulevard	Transaction ID: 18563689
	City State Zip Code Dallas TX 75235-7793	Amount of Each Receipt this Period 41.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Parkland Health & Hospital System	Occupation Exec Director Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.00	

B.	Full Name (Last, First, Middle Initial) Mr. Dan E. Brown	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 7930 Floyd Curl Dr	Transaction ID: 18563690
	City State Zip Code San Antonio TX 78229-3925	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer St. Luke's Baptist Hospital	Occupation CEO/President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Dr. Michael J. Deegan, M.D.	Date of Receipt MM / DD / YYYY 09 / 03 / 2010
	Mailing Address 612 E Lamar Blvd Ste 690	Transaction ID: 18563691
	City State Zip Code Arlington TX 76011-4143	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Health Resources - Finance Office	Occupation EVP & Chief Clin Quality Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1541.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 53
	<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.

Full Name (Last, First, Middle Initial)
Ms. Wilma Powell Stuart

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 ▼ 747.00

Date of Receipt 09 / 03 / 2010

Transaction ID: 18563692

Amount of Each Receipt this Period 83.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles Ardoin, Jr., M.D.

Mailing Address 929 Gessner Road, Ste 2700

City Houston State TX Zip Code 77024-2515

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

Name of Employer Memorial Hermann Healthcare System Occupation Physician-in-Chief

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.00

Date of Receipt 09 / 03 / 2010

Transaction ID: 18563693

Amount of Each Receipt this Period 41.00

C.

Full Name (Last, First, Middle Initial)
Mr. William Parks

Mailing Address 9250 Pinecroft

City Shenandoah State TX Zip Code 77380-3218

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

Name of Employer Memorial Hermann The Woodlands Hospital Occupation Chief Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 747.00

Date of Receipt 09 / 03 / 2010

Transaction ID: 18563694

Amount of Each Receipt this Period 83.00

SUBTOTAL of Receipts This Page (optional) ► 207.00

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 41 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 9401 Southwest Fwy Ste 339

City State Zip Code
Houston TX 77074-1407

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

Name of Employer Occupation
Memorial Hermann Healthcare System System Executive Public Policy

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 18563696

Amount of Each Receipt this Period
62.50

B. Full Name (Last, First, Middle Initial)
Ms. Jerri Garison, RN, BSN, M

Mailing Address 4700 Alliance Blvd

City State Zip Code
Plano TX 75093-5323

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

Name of Employer Occupation
Baylor Regional Medical Center at Plano President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 18575997

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Amanda Y. Engler

Mailing Address PO Box 679010

City State Zip Code
Austin TX 78767-9010

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

Name of Employer Occupation
Texas Hospital Association Senior Director Media Relations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 18575998

Amount of Each Receipt this Period
28.00

SUBTOTAL of Receipts This Page (optional) ► **590.50**

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 42 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Ignacio O. Zamarron		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18575999		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 83.34	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 833.40		
Name of Employer Texas Hospital Association		Occupation Sr VP CFO Business Affairs Group			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Ms. Donna W. Goodwin		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18576000		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 28.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 280.00		
Name of Employer Texas Hospital Association		Occupation VP Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACP		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address PO Box 679010 Suite 700		Transaction ID: 18576002		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00		
Name of Employer Texas Hospital Association		Occupation President / CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	161.34
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 / 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mr. Charles W. Bailey, J.D.		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
FEC ID number of contributing federal political committee.		C <input type="text"/>	Transaction ID: 18576004
Name of Employer Texas Hospital Association		Occupation Sr VP General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 41.68
		<input type="text"/> 416.80	

B.	Full Name (Last, First, Middle Initial) Ms. Elizabeth N. Sjoberg, J.D., RN		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
FEC ID number of contributing federal political committee.		C <input type="text"/>	Transaction ID: 18576006
Name of Employer Texas Hospital Association		Occupation Associate General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 400.00	

C.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, , APR		Date of Receipt
	Mailing Address PO Box 679010		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	Austin	TX	78767-9010
FEC ID number of contributing federal political committee.		C <input type="text"/>	Transaction ID: 18576007
Name of Employer Texas Hospital Association		Occupation Sr Vice President Communications	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 83.34
		<input type="text"/> 833.40	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 165.02
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 44 / 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Jennings

Mailing Address 8310 N Capital of TX Hwy #250

City Austin State TX Zip Code 78731-1007

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

Name of Employer Texas Hospital Insurance Exchange Occupation VP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 18576009
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Mr. Kent Stevens

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 Mgr Patient Data System Depart

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 443.34

Date of Receipt 09 / 17 / 2010
Transaction ID: 18576010
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Ms. Cris Curnut Daskevich, FACHE

Mailing Address 6621 Fannin CCC.0610.31
CC 0610-31

City Houston State TX Zip Code 77030-2303

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

Name of Employer Texas Children's Hospital Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 18576012
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1080.00

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 45 / 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Ms. Mitzi Ressmann, RN, FACHE
 Mailing Address PO Box 679010
 City State Zip Code
 Austin TX 78767-9010
 Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2010
Transaction ID: 18576018
 Amount of Each Receipt this Period
 24.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Hospital Association VP Member Svcs Bus Development
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

B. Full Name (Last, First, Middle Initial)
 Ms. Lisa Kepple
 Mailing Address PO Box 679010
 City State Zip Code
 Austin TX 78767-9010
 Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2010
Transaction ID: 18576019
 Amount of Each Receipt this Period
 41.68
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Hospital Association Programs Director, HOSPAC
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 416.80

C. Full Name (Last, First, Middle Initial)
 Mr. Kevin Talbot
 Mailing Address 3127 E Cedar Hollow Dr
 City State Zip Code
 Pearland TX 77584-8127
 Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2010
Transaction ID: 18576020
 Amount of Each Receipt this Period
 40.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HealthSHARE Manager Regional Marketing
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

SUBTOTAL of Receipts This Page (optional) ► **105.68**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. John M. Hawkins	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address PO Box 679010	Transaction ID: 18576022
	City State Zip Code Austin TX 78767-9010	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Association	Occupation Sr VP Advocacy Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Ms. Sharon L. Riley	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 5323 Harry Hines Boulevard	Transaction ID: 18576023
	City State Zip Code Dallas TX 75390-7201	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
Name of Employer University of Texas Southwestern Medic	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Mr. Brian Stevens	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address PO Box 679010	Transaction ID: 18576024
	City State Zip Code Austin TX 78767-9010	Amount of Each Receipt this Period 20.84
	FEC ID number of contributing federal political committee. C	
Name of Employer HealthSHARE	Occupation Vice President Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.40	

SUBTOTAL of Receipts This Page (optional)	420.84
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Graham Reeve	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 215 E Quincy Street, Suite 200	Transaction ID: 18576025
	City State Zip Code San Antonio TX 78215-2032	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Baptist Health System	Occupation President & Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Ms. Deborah Samples	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 8310 N Capital of TX Hwy #250	Transaction ID: 18576026
	City State Zip Code Austin TX 78731-1007	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Insurance Exchange	Occupation President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Al Goforth	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 8202 Gary Ave	Transaction ID: 18576029
	City State Zip Code Lubbock TX 79423-2820	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer HealthSHARE	Occupation Regional Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	1080.00
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 48 / 53
	<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.	Full Name (Last, First, Middle Initial) Mr. Jim M. Dixon		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address 1108 Lavaca Ste 700		Transaction ID: 18576031		
	City Austin	State TX	Zip Code 78701-2180	Amount of Each Receipt this Period 83.32	
	FEC ID number of contributing federal political committee. C				
	Name of Employer HealthSHARE	Occupation President/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 811.88			

B.	Full Name (Last, First, Middle Initial) Mr. John Checkley		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address PO Box 679010		Transaction ID: 18576032		
	City Austin	State TX	Zip Code 78767-9010	Amount of Each Receipt this Period 82.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Texas Hospital Association	Occupation Sr VP Member Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 820.00			

C.	Full Name (Last, First, Middle Initial) Ms. Vicki Dale		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address 2046 Wedgewood		Transaction ID: 18576033		
	City Grapevine	State TX	Zip Code 76051-6086	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer HealthSHARE	Occupation Regional Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

SUBTOTAL of Receipts This Page (optional)	205.32
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 49 / 53
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Mr. John J. Buckley, Jr., FACHE

Mailing Address 11525 Deer Creek Dr

City State Zip Code
College Station TX 77845-7627

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

Name of Employer: Jack Buckley and Associates
Occupation: Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: 18576288
Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Marcella Lynn Doderer

Mailing Address 333 N. Santa Rosa St.

City State Zip Code
San Antonio TX 78207-3198

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

Name of Employer: CHRISTUS Santa Rosa Children's Hospital
Occupation: VP/Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: 18579243
Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Cary A. Fox, FACHE

Mailing Address 333 N Santa Rosa St

City State Zip Code
San Antonio TX 78207-3108

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

Name of Employer: CHRISTUS Santa Rosa Health Care
Occupation: VP Chief Administrative Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: 18580761
Amount of Each Receipt this Period: 350.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mr. Ernie Sadau	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 6363 N Highway 161 Ste 450	Transaction ID: 18584523
	City Irving State TX Zip Code 75038-2238	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CHRISTUS Health Occupation Chief Operating Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Jeanne Nirider	Date of Receipt MM / DD / YYYY 09 / 26 / 2010
	Mailing Address 9301 Southwest Freeway STE 370	Transaction ID: 18617236
	City Houston State TX Zip Code 77074-1509	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Memorial Hermann Medical Group Occupation Chief Financial Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jeffrey S. Holland, FACHE	Date of Receipt MM / DD / YYYY 09 / 27 / 2010
	Mailing Address 4000 Spencer Highway	Transaction ID: 18617238
	City Pasadena State TX Zip Code 77504-1202	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Bayshore Medical Center Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 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 51 / 53
	<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.

Full Name (Last, First, Middle Initial) Mr. Gary M. Kerr		Date of Receipt MM / DD / YYYY 09 / 29 / 2010
Mailing Address 1635 North Loop W		Transaction ID: 18617696
City Houston	State TX	Zip Code 77008-1532
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Memorial Hermann Northwest Hospital	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Mr. Patrick Carrier		Date of Receipt MM / DD / YYYY 08 / 06 / 2010
Mailing Address 333 N Santa Rosa St		Transaction ID: 18665731
City San Antonio	State TX	Zip Code 78207-3108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
Name of Employer CHRISTUS Santa Rosa Health Care	Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$500.00 This changes the YTD Total to \$50-0.00

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	26991.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 52 / 53

<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

011
Category/
Type

Candidate Name
AHAPAC-American Hospital Association FEDERAL

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 18524971

Date of Disbursement

08 / 25 / 2010

Amount of Each Disbursement this Period

17000.00

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

011
Category/
Type

Candidate Name
AHAPAC-American Hospital Association FEDERAL

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 18584617

Date of Disbursement

09 / 17 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

20000.00

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

20000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)

Mr. Patrick Carrier

Transaction ID: 18664576

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	0

Mailing Address 333 N Santa Rosa St

City San Antonio State TX Zip Code 78207-3108

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Refund

010
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Refund

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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

500.00
