

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 15587

Check if different than previously reported. (ACC) Austin TX 78761 5587

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 07 01 2007 through 12 31 2007

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 Gregg Knaupe

Signature of Treasurer Electronically Filed by Gregg Knaupe Date 01 30 2008

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="2007"/>		5953.01
(b) Cash on Hand at Beginning of Reporting Period	4501.13	
(c) Total Receipts (from Line 19)	42216.58	85764.70
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46717.71	91717.71
7. Total Disbursements (from Line 31)	46110.00	91110.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	607.71	607.71
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	39128.36	77596.62
(i) Itemized (use Schedule A)	3079.35	8143.39
(ii) Unitemized	42207.71	85740.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	42207.71	85740.01
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.)	8.87	24.69
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))	42216.58	85764.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42216.58	85764.70

DETAILED SUMMARY PAGE

of Disbursements

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.....	46110.00	91110.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) 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))..	46110.00	91110.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46110.00	91110.00

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	42207.71	85740.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42207.71	85740.01
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 / 55
	<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. James G. Springfield, FACHE		Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address PO Box 2588		Transaction ID: 14355206
	City Harlingen	State TX	Zip Code 78551-2588
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Valley Baptist Health System		Occupation President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	

B.	Full Name (Last, First, Middle Initial) Dr. Theodore Dyer, M.D., CHE		Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address 1900 Pine		Transaction ID: 14355208
	City Abilene	State TX	Zip Code 79601-2316
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Hendrick Health System		Occupation VP Medical Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.00	

C.	Full Name (Last, First, Middle Initial) Mr. James E. Buckner, Jr., CHE		Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address 1025 Garner Field Rd		Transaction ID: 14355214
	City Uvalde	State TX	Zip Code 78801-4809
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.00
Name of Employer Uvalde County Hospital Authority		Occupation 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)	250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 55
	<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. Jorie Klein, RN, DON	Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address 5201 Harry Hines Boulevard	Transaction ID: 14355215
	City State Zip Code Dallas TX 75235	Amount of Each Receipt this Period 41.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Parkland Health & Hospital System	Occupation Director Trauma Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.62	

B.	Full Name (Last, First, Middle Initial) Mr. Glenn Steven Sanders	Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address 9250 Pinecroft	Transaction ID: 14355218
	City State Zip Code Shenandoah TX 77380-3218	Amount of Each Receipt this Period 83.00
	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 ▼ 415.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael D. Williams	Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address 7160 Dallas Pky Ste 600 Suite 600	Transaction ID: 14355219
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Community Hospital Corporation	Occupation CEO & President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	249.66
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 / 55
	<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. Steven L. Hunter, FACHE	Date of Receipt MM / DD / YYYY 07 / 10 / 2007
	Mailing Address 19065 Hickory Creek Drive, 300	Transaction ID: 14355249
	City State Zip Code Mokena IL 60448-8599	Amount of Each Receipt this Period 83.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Provena Health	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 ▼ 498.00	

B.	Full Name (Last, First, Middle Initial) Mr. Cary A. Fox	Date of Receipt MM / DD / YYYY 07 / 18 / 2007
	Mailing Address 333 N Santa Rosa St	Transaction ID: 14391273
	City State Zip Code San Antonio TX 78207	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer CHRISTUS Santa Rosa Health Care	Occupation Regional Vice President	
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) Mr. Michael J. McBride, FACHE	Date of Receipt MM / DD / YYYY 07 / 18 / 2007
	Mailing Address 2827 Babcock Rd	Transaction ID: 14391289
	City State Zip Code San Antonio TX 78229	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer CHRISTUS Santa Rosa Medical Center	Occupation Regional VP Administrator	
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)	1333.00
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 / 55
	<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. Robert N. Shaw, FACHE		Date of Receipt
	Mailing Address 7979 Wurzbach Ste 600 Urschel Tower, Suite 600		<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 / 18 / 2007
	City	State	Zip Code
	San Antonio	TX	78229
	FEC ID number of contributing federal political committee. C		Transaction ID: 14391332
Name of Employer Cancer Therapy and Research Center		Occupation Executive Vice President COO	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 ▼ 1500.00	1500.00

B.	Full Name (Last, First, Middle Initial) Mr. James G. Springfield, FACHE		Date of Receipt
	Mailing Address PO Box 2588		<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 08 / 06 / 2007
	City	State	Zip Code
	Harlingen	TX	78551-2588
	FEC ID number of contributing federal political committee. C		Transaction ID: 14468084
Name of Employer Valley Baptist Health System		Occupation President CEO	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 ▼ 1375.00	125.00

C.	Full Name (Last, First, Middle Initial) Dr. Theodore Dyer, M.D., CHE		Date of Receipt
	Mailing Address 1900 Pine		<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 08 / 06 / 2007
	City	State	Zip Code
	Abilene	TX	79601-2316
	FEC ID number of contributing federal political committee. C		Transaction ID: 14468087
Name of Employer Hendrick Health System		Occupation VP Medical Affairs	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 ▼ 336.00	42.00

SUBTOTAL of Receipts This Page (optional)	1667.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 55

(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. James E. Buckner, Jr., CHE

Mailing Address 1025 Garner Field Rd

City State Zip Code
Uvalde TX 78801-4809

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

Name of Employer Occupation
Uvalde County Hospital Authority Administrator

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 498.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: 14468092

Amount of Each Receipt this Period

83.00

B.

Full Name (Last, First, Middle Initial)

Mr. Glenn Steven Sanders

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 Executive Officer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 498.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: 14468095

Amount of Each Receipt this Period

83.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Williams

Mailing Address 7160 Dallas Pky Ste 600
Suite 600

City State Zip Code
Plano TX 75024

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

Name of Employer Occupation
Community Hospital Corporation CEO & President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 875.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: 14468096

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

291.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 55

(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. Steven L. Hunter, FACHE

Mailing Address 19065 Hickory Creek Drive, 300

City State Zip Code
Mokena IL 60448-8599

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

Name of Employer Occupation
Provena Health President and Chief Executive Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 581.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 7

Transaction ID: 14468122

Amount of Each Receipt this Period

83.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Ignacio O. Zamarron

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 437.50

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 7

Transaction ID: 14468628

Amount of Each Receipt this Period

62.50

C.

Full Name (Last, First, Middle Initial)

Mr. Joe A. DaSilva, FACHE, CAE

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

Name of Employer Occupation
Texas Hospital Association Sr VP Admn Policy Group

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 523.50

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 7

Transaction ID: 14468663

Amount of Each Receipt this Period

84.00

SUBTOTAL of Receipts This Page (optional)

229.50

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 12 / 55
	<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 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 08 / 2007
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14468673
Name of Employer Texas Hospital Association		Occupation Sr VP Gen Cnsl Lgl Rgltry Group	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"/> 291.76	<input type="text"/> 41.68

B.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACH		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 08 / 2007
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14468683
Name of Employer Texas Hospital Association		Occupation President CEO	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"/> 350.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, , APR		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 08 / 2007
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14468698
Name of Employer Texas Hospital Association		Occupation 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"/> 291.62	<input type="text"/> 41.66

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 133.34
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 / 55

(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)

Ms. Lisa Kepple

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

Name of Employer Occupation
Texas Hospital Association Dir Political Action Programs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.76

Date of Receipt

M M / D D / Y Y Y Y
08 / 08 / 2007

Transaction ID: 14468724

Amount of Each Receipt this Period

41.68

B.

Full Name (Last, First, Middle Initial)

Ms. Starr West

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

Name of Employer Occupation
Texas Hospital Association Sr Director Policy Analysis

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 291.76

Date of Receipt

M M / D D / Y Y Y Y
08 / 08 / 2007

Transaction ID: 14468729

Amount of Each Receipt this Period

41.68

C.

Full Name (Last, First, Middle Initial)

Mr. Gregg W. Knaupe, J.D.

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761-5587

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

Name of Employer Occupation
Texas Hospital Association Vice President Public Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 539.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 08 / 2007

Transaction ID: 14468734

Amount of Each Receipt this Period

77.00

SUBTOTAL of Receipts This Page (optional) ▶

160.36

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 55
(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 15587

City Austin State TX Zip Code 78761

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 ▼ 350.00

Date of Receipt 08 / 08 / 2007

Transaction ID: 14468751

Amount of Each Receipt this Period 50.00

B.

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

Mailing Address 6225 Hwy 290 E

City Austin State TX Zip Code 78723

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 ▼ 583.38

Date of Receipt 08 / 08 / 2007

Transaction ID: 14468758

Amount of Each Receipt this Period 83.34

C.

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

Mailing Address 1900 Pine

City Abilene State TX Zip Code 79601-2432

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

Name of Employer Hendrick Health System Occupation Senior Vice President & Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2007

Transaction ID: 14493873

Amount of Each Receipt this Period 1000.00

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 15 / 55
	<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. David P. Brown

Mailing Address 2701 Hospital Dr

City State Zip Code
Victoria TX 77901-5748

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

Name of Employer: Citizens Medical Center
Occupation: Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 08 / 16 / 2007
Transaction ID: 14493935
Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Jan A. Reed, CPA

Mailing Address PO Box 1112

City State Zip Code
Electra TX 76360-1112

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

Name of Employer: Electra Memorial Hospital
Occupation: CEO & Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 08 / 16 / 2007
Transaction ID: 14493941
Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
Dr. Thomas C. Royer, M.D.

Mailing Address 6363 N Highway 161 Ste 450

City State Zip Code
Irving TX 75038-2238

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

Name of Employer: CHRISTUS Health
Occupation: President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 08 / 16 / 2007
Transaction ID: 14493981
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: PAGE 16 / 55

(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. Rosemary Burns

Mailing Address 3 Chapel Hill

City State Zip Code
Malakoff TX 75148-4753

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

Name of Employer Occupation
East Texas Medical Center Member, Board of Managers
Athens

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: 14506242

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Joel D. Ballew

Mailing Address 611 Ryan Plaza Dr #1500

City State Zip Code
Arlington TX 76011

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

Name of Employer Occupation
Texas Health Resources Director Government Affairs

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: 14506249

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy Brierty, FACHE

Mailing Address 600 N Union Ave

City State Zip Code
New Braunfels TX 78130-4191

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

Name of Employer Occupation
McKenna Memorial Hospital President and Chief Executive Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: 14506250

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 55
	<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. Robert Pascasio, FACHE		Date of Receipt
	Mailing Address PO Box 398		<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 08 / 24 / 2007
	City	State	Zip Code
	Anahuac	TX	77514-0398
	FEC ID number of contributing federal political committee. C		Transaction ID: 14507588
Name of Employer Bayside Community Hospital		Occupation Administrator & CEO	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"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Mr. Ignacio O. Zamarron		Date of Receipt
	Mailing Address PO Box 15587		<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 08 / 24 / 2007
	City	State	Zip Code
	Austin	TX	78761
	FEC ID number of contributing federal political committee. C		Transaction ID: 14507604
Name of Employer Texas Hospital Association		Occupation Sr VP CFO Business Affairs Group	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"/> 62.50

C.	Full Name (Last, First, Middle Initial) Mr. Joe A. DaSilva, FACHE, CAE		Date of Receipt
	Mailing Address PO Box 15587		<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 08 / 24 / 2007
	City	State	Zip Code
	Austin	TX	78761
	FEC ID number of contributing federal political committee. C		Transaction ID: 14507609
Name of Employer Texas Hospital Association		Occupation Sr VP Admn Policy Group	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"/> 84.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1146.50
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 18 / 55
	<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) Dr. Dan Stultz, M.D., FACH	Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address PO Box 15587	Transaction ID: 14507610
	City State Zip Code Austin TX 78761	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 ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, , APR	Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address PO Box 15587	Transaction ID: 14507614
	City State Zip Code Austin TX 78761	Amount of Each Receipt this Period 41.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Association	Occupation Vice President Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	

C.	Full Name (Last, First, Middle Initial) Mr. Charles W. Bailey, J.D.	Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address PO Box 15587	Transaction ID: 14507617
	City State Zip Code Austin TX 78761	Amount of Each Receipt this Period 41.68
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Hospital Association	Occupation Sr VP Gen Cnsl Lgl Rgltry Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.44	

SUBTOTAL of Receipts This Page (optional)	133.34
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 19 / 55
	<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. Lisa Kepple		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14507620
	City Austin	State TX	Zip Code 78761
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.68
	Name of Employer Texas Hospital Association	Occupation Dir Political Action Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.44	

B.	Full Name (Last, First, Middle Initial) Ms. Starr West		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14507621
	City Austin	State TX	Zip Code 78761
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.68
	Name of Employer Texas Hospital Association	Occupation Sr Director Policy Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.44	

C.	Full Name (Last, First, Middle Initial) Mr. Gregg W. Knaupe, J.D.		Date of Receipt MM / DD / YYYY 08 / 24 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14507623
	City Austin	State TX	Zip Code 78761-5587
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00
	Name of Employer Texas Hospital Association	Occupation Vice President Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 616.00	

SUBTOTAL of Receipts This Page (optional)	160.36
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 55
(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 15587

City State Zip Code
Austin TX 78761

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
MM / DD / YYYY
08 / 24 / 2007

Transaction ID: 14507626

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 6225 Hwy 290 E

City State Zip Code
Austin TX 78723

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 ▼ 666.72

Date of Receipt
MM / DD / YYYY
08 / 24 / 2007

Transaction ID: 14507627

Amount of Each Receipt this Period
83.34

C.

Full Name (Last, First, Middle Initial)
Mr. Tim Lancaster, FACHE

Mailing Address 1900 Pine

City State Zip Code
Abilene TX 79601-2432

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

Name of Employer Hendrick Health System Occupation President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
09 / 06 / 2007

Transaction ID: 14569989

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **1633.34**

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 21 / 55		
	<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

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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. Clarence Fields, Jr., CHE		Date of Receipt
	Mailing Address PO Box 549		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 06 / 2007
	City	State	Zip Code
	Clifton	TX	76634-0549
	FEC ID number of contributing federal political committee. C		Transaction ID: 14569991
Name of Employer Goodall-Witcher Healthcare		Occupation President and Chief Executive 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 ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Mr. Karl D. Hittle, FACHE		Date of Receipt
	Mailing Address 600 N Union Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 06 / 2007
	City	State	Zip Code
	New Braunfels	TX	78130-4191
	FEC ID number of contributing federal political committee. C		Transaction ID: 14569996
Name of Employer McKenna Memorial Hospital		Occupation Chief Operations 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 ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Mr. James G. Springfield, FACHE		Date of Receipt
	Mailing Address PO Box 2588		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 07 / 2007
	City	State	Zip Code
	Harlingen	TX	78551-2588
	FEC ID number of contributing federal political committee. C		Transaction ID: 14570157
Name of Employer Valley Baptist Health System		Occupation President CEO	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"/> 1500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1125.00
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 22 / 55
	<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. Theodore Dyer, M.D., CHE		Date of Receipt MM / DD / YYYY 09 / 07 / 2007		
	Mailing Address 1900 Pine		Transaction ID: 14570158		
	City Abilene	State TX	Zip Code 79601-2316	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Hendrick Health System	Occupation VP Medical Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
378.00

B.	Full Name (Last, First, Middle Initial) Mr. James E. Buckner, Jr., CHE		Date of Receipt MM / DD / YYYY 09 / 07 / 2007		
	Mailing Address 1025 Garner Field Rd		Transaction ID: 14570161		
	City Uvalde	State TX	Zip Code 78801-4809	Amount of Each Receipt this Period 83.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Uvalde County Hospital Authority	Occupation Administrator	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
581.00

C.	Full Name (Last, First, Middle Initial) Mr. Glenn Steven Sanders		Date of Receipt MM / DD / YYYY 09 / 07 / 2007		
	Mailing Address 9250 Pinecroft		Transaction ID: 14570162		
	City Shenandoah	State TX	Zip Code 77380-3218	Amount of Each Receipt this Period 83.00	
	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 ▼
581.00

SUBTOTAL of Receipts This Page (optional)	208.00
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 23 / 55
(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. Michael D. Williams

Mailing Address 7160 Dallas Pky Ste 600
Suite 600

City State Zip Code
Plano TX 75024

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

Name of Employer Community Hospital Corporation
Occupation CEO & President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: 14570163

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard C. Hoeth, FACHE, CAE

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761-5587

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

Name of Employer Texas Hospital Association
Occupation VP, Rural Health Member Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2007

Transaction ID: 14570164

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Ms. Lydia Valadez-McStay, CHE

Mailing Address PO Box 301011 NB 8365

City State Zip Code
Houston TX 77230-1011

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2007

Transaction ID: 14573152

Amount of Each Receipt this Period
333.00

SUBTOTAL of Receipts This Page (optional) ► **958.00**

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 24 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Mr. Bernard A. Duco, Jr.		Date of Receipt MM / DD / YYYY 09 / 19 / 2007
	Mailing Address 7737 Southwest Freeway Ste 200		Transaction ID: 14573155
	City	State	Zip Code
	Houston	TX	77074-1800
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Memorial Hermann Healthcare System		Occupation Chief Legal 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. George Gaston		Date of Receipt MM / DD / YYYY 09 / 19 / 2007
	Mailing Address 11800 Astoria Blvd		Transaction ID: 14573231
	City	State	Zip Code
	Houston	TX	77089
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Memorial Hermann Southeast Hospital		Occupation AVP Hospital Operations	
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) Mr. Brian Scott Barbe, CHE		Date of Receipt MM / DD / YYYY 09 / 19 / 2007
	Mailing Address 23900 Katy Freeway		Transaction ID: 14573232
	City	State	Zip Code
	Katy	TX	77494-1323
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Memorial Hermann Katy Hospital		Occupation VP & 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)	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 25 / 55
	<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. Patricia M. Currie, FACHE		Date of Receipt MM / DD / YYYY 09 / 25 / 2007
	Mailing Address 2401 S 31 St		Transaction ID: 14577839
	City State Zip Code Temple TX 76508-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
	Name of Employer Scott and White Memorial Hospital	Occupation Executive Director	
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. Ignacio O. Zamarron		Date of Receipt MM / DD / YYYY 09 / 25 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14577944
	City State Zip Code Austin TX 78761	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 62.50
	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 ▼ 562.50	

C.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, APR		Date of Receipt MM / DD / YYYY 09 / 25 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14577969
	City State Zip Code Austin TX 78761	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.66
	Name of Employer Texas Hospital Association	Occupation Vice President Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 374.94	

SUBTOTAL of Receipts This Page (optional)	604.16
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 26 / 55
<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 MM / DD / YYYY 09 / 25 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14577985
	City State Zip Code Austin TX 78761	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.68
	Name of Employer Texas Hospital Association	Occupation Sr VP Gen Cnsl Lgl Rgltry Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.12	

B.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACH		Date of Receipt MM / DD / YYYY 09 / 25 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14577999
	City State Zip Code Austin TX 78761	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 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 ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Ms. Lisa Kepple		Date of Receipt MM / DD / YYYY 09 / 25 / 2007
	Mailing Address PO Box 15587		Transaction ID: 14578019
	City State Zip Code Austin TX 78761	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.68
	Name of Employer Texas Hospital Association	Occupation Dir Political Action Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.12	

SUBTOTAL of Receipts This Page (optional)	133.36
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 27 / 55
(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. Starr West
 Mailing Address PO Box 15587
 City Austin State TX Zip Code 78761
 Date of Receipt 09 / 25 / 2007
Transaction ID: 14578027
 Amount of Each Receipt this Period 41.68
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Sr Director Policy Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 375.12

B. Full Name (Last, First, Middle Initial)
 Mr. Gregg W. Knaupe, J.D.
 Mailing Address PO Box 15587
 City Austin State TX Zip Code 78761-5587
 Date of Receipt 09 / 25 / 2007
Transaction ID: 14578029
 Amount of Each Receipt this Period 77.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Texas Hospital Association Occupation Vice President Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 693.00

C. Full Name (Last, First, Middle Initial)
 Mr. John M. Hawkins
 Mailing Address PO Box 15587
 City Austin State TX Zip Code 78761
 Date of Receipt 09 / 25 / 2007
Transaction ID: 14578039
 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: Primary General Other (specify) ▼
 Aggregate Year-to-Date 450.00

SUBTOTAL of Receipts This Page (optional) ► **168.68**
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 28 / 55
	<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. Kent Stevens		Date of Receipt
	Mailing Address 6225 Hwy 290 E		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 25 / 2007
	City	State	Zip Code
	Austin	TX	78723
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14578049
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"/> 750.06	<input type="text"/> 83.34

B.	Full Name (Last, First, Middle Initial) Mr. Manuel Vela		Date of Receipt
	Mailing Address PO Drawer 2588		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 03 / 2007
	City	State	Zip Code
	Harlingen	TX	78550
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14643263
Name of Employer Valley Baptist Medical Center-Harlinge		Occupation Chief Legal 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 ▼ <input type="text"/> 500.00	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Mr. Douglas A. Matney, CHE		Date of Receipt
	Mailing Address 129 E. Xanthisma Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 10 / 2007
	City	State	Zip Code
	McAllen	TX	78504-2326
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14643518
Name of Employer South Texas Health System		Occupation Group Director	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"/> 500.00	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1083.34
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 29 / 55
(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. Dan J. Wolterman

Mailing Address 7737 Southwest Freeway Ste 200

City State Zip Code
Houston TX 77074-1800

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

Name of Employer: Memorial Hermann Healthcare System
Occupation: President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 10 / 10 / 2007
Transaction ID: 14643522
Amount of Each Receipt this Period: 1500.00

B.

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

Mailing Address 700 Medical Parkway

City State Zip Code
Brenham TX 77833-5413

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

Name of Employer: Trinity Community Medical Center of Br
Occupation: President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 10 / 2007
Transaction ID: 14643563
Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
Ms. Elizabeth N. Sjoberg, J.D., RN

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

Name of Employer: Texas Hospital Association
Occupation: Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 448.00

Date of Receipt: 10 / 10 / 2007
Transaction ID: 14643599
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 55
	<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. Lydia Valadez-McStay, CHE	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address PO Box 301011 NB 8365	Transaction ID: 14672124
	City State Zip Code Houston TX 77230-1011	Amount of Each Receipt this Period 333.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Children's Hospital	Occupation Government Relations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.00	

B.	Full Name (Last, First, Middle Initial) Ms. Cris Curnut Daskevich, FACHE	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address PO Box 300630 CC 0610-31	Transaction ID: 14672125
	City State Zip Code Houston TX 77230-0630	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Texas Children's Hospital	Occupation Vice 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) Mr. James G. Springfield, FACHE	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address PO Box 2588	Transaction ID: 14672129
	City State Zip Code Harlingen TX 78551-2588	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Valley Baptist Health System	Occupation President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1625.00	

SUBTOTAL of Receipts This Page (optional)	958.00
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 31 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Dr. Theodore Dyer, M.D., CHE		Date of Receipt
	Mailing Address 1900 Pine		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Abilene	TX	79601-2316
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Hendrick Health System		Occupation VP Medical Affairs	Transaction ID: 14672131
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="420.00"/>	<input type="text" value="42.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Keith A. Parrott, FACHE		Date of Receipt
	Mailing Address 1635 North Loop W		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Houston	TX	77008
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Memorial Hermann Northwest Hospital		Occupation Chief Executive Officer	Transaction ID: 14672134
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Brett S. McClung, FACHE		Date of Receipt
	Mailing Address 6100 Harris Parkway		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Fort Worth	TX	76132-4101
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Harris Methodist Southwest		Occupation President	Transaction ID: 14672138
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="21.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="563.00"/>
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 32 / 55
	<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 E. Buckner, Jr., CHE	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 1025 Garner Field Rd	Transaction ID: 14672139
	City Uvalde State TX Zip Code 78801-4809	Amount of Each Receipt this Period 83.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Uvalde County Hospital Authority	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 664.00	

B.	Full Name (Last, First, Middle Initial) Mr. Glenn Steven Sanders	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 9250 Pinecroft	Transaction ID: 14672141
	City Shenandoah State TX Zip Code 77380-3218	Amount of Each Receipt this Period 83.00
	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 ▼ 664.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael D. Williams	Date of Receipt MM / DD / YYYY 10 / 02 / 2007
	Mailing Address 7160 Dallas Pky Ste 600 Suite 600	Transaction ID: 14672142
	City Plano State TX Zip Code 75024	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Community Hospital Corporation	Occupation CEO & President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 55

(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. Bob L. Dion

Mailing Address PO Box 14626

City State Zip Code
Austin TX 78761-4626

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

Name of Employer Occupation
THA Insurance Group 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
1 0 / 2 3 / 2 0 0 7

Transaction ID: 14672193

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ignacio O. Zamarron

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: 14674110

Amount of Each Receipt this Period

62.50

C.

Full Name (Last, First, Middle Initial)

Mr. Charles W. Bailey, J.D.

Mailing Address PO Box 15587

City State Zip Code
Austin TX 78761

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

Name of Employer Occupation
Texas Hospital Association Sr VP Gen Cnsl Lgl Rgltry Group

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 416.80

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 7

Transaction ID: 14674119

Amount of Each Receipt this Period

41.68

SUBTOTAL of Receipts This Page (optional) ▶

604.18

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 55
	<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) Ms. Elizabeth N. Sjoberg, J.D., RN		Date of Receipt
	Mailing Address PO Box 15587		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 14674123
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" value="470.00"/>	<input type="text" value="22.00"/>

B.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, , APR		Date of Receipt
	Mailing Address PO Box 15587		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 14674125
Name of Employer Texas Hospital Association		Occupation 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" value="416.60"/>	<input type="text" value="41.66"/>

C.	Full Name (Last, First, Middle Initial) Dr. Dan Stultz, M.D., FACH		Date of Receipt
	Mailing Address PO Box 15587		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 14674134
Name of Employer Texas Hospital Association		Occupation President CEO	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="500.00"/>	<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="113.66"/>
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 35 / 55
	<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. Lisa Kepple		Date of Receipt
	Mailing Address PO Box 15587		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 14674140
Name of Employer Texas Hospital Association		Occupation Dir Political Action Programs	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="41.68"/>
		<input type="text" value="416.80"/>	

B.	Full Name (Last, First, Middle Initial) Ms. Starr West		Date of Receipt
	Mailing Address PO Box 15587		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 14674142
Name of Employer Texas Hospital Association		Occupation Sr Director Policy Analysis	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="41.68"/>
		<input type="text" value="416.80"/>	

C.	Full Name (Last, First, Middle Initial) Mr. Gregg W. Knaupe, J.D.		Date of Receipt
	Mailing Address PO Box 15587		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Austin	TX	78761-5587
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 14674144
Name of Employer Texas Hospital Association		Occupation Vice President Public Affairs	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="77.00"/>
		<input type="text" value="770.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="160.36"/>
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 36 / 55
	<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 10 / 25 / 2007
	Mailing Address PO Box 15587	Transaction ID: 14674149
	City State Zip Code Austin TX 78761	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Texas Hospital Association 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) Mr. Kent Stevens	Date of Receipt MM / DD / YYYY 10 / 25 / 2007
	Mailing Address 6225 Hwy 290 E	Transaction ID: 14674153
	City State Zip Code Austin TX 78723	Amount of Each Receipt this Period 83.34
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Texas Hospital Association Mgr Patient Data System Depart	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 833.40	

C.	Full Name (Last, First, Middle Initial) Mr. Timothy Schauer	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 7737 Southwest Freeway Ste 200	Transaction ID: 14718272
	City State Zip Code Houston TX 77074	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Memorial Hermann Health-care System System Executive Gov Rels	
	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)	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 37 / 55
	<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. Lydia Valadez-McStay, CHE	Date of Receipt MM / DD / YYYY 11 / 06 / 2007
	Mailing Address PO Box 301011 NB 8365	Transaction ID: 14736748
	City State Zip Code Houston TX 77230-1011	Amount of Each Receipt this Period 333.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Texas Children's Hospital Government Relations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.00	

B.	Full Name (Last, First, Middle Initial) Mr. James G. Springfield, FACHE	Date of Receipt MM / DD / YYYY 11 / 06 / 2007
	Mailing Address PO Box 2588	Transaction ID: 14736752
	City State Zip Code Harlingen TX 78551-2588	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Valley Baptist Health System President CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

C.	Full Name (Last, First, Middle Initial) Dr. Theodore Dyer, M.D., CHE	Date of Receipt MM / DD / YYYY 11 / 06 / 2007
	Mailing Address 1900 Pine	Transaction ID: 14736754
	City State Zip Code Abilene TX 79601-2316	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Hendrick Health System VP Medical Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 55
	<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. David L. Jones

Mailing Address 921 Gessner

City State Zip Code
Houston TX 77024

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

Name of Employer: Memorial Hermann Memorial City Hospita
Occupation: Interim Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 06 / 2007
Transaction ID: 14736756
Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
Mr. James E. Buckner, Jr., CHE

Mailing Address 1025 Garner Field Rd

City State Zip Code
Uvalde TX 78801-4809

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

Name of Employer: Uvalde County Hospital Authority
Occupation: Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 747.00

Date of Receipt: 11 / 06 / 2007
Transaction ID: 14736762
Amount of Each Receipt this Period: 83.00

C.

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

Mailing Address 9250 Pinecroft

City State Zip Code
Shenandoah TX 77380-3218

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 747.00

Date of Receipt: 11 / 06 / 2007
Transaction ID: 14736764
Amount of Each Receipt this Period: 83.00

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 39 / 55
<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		Date of Receipt
	Mailing Address 7160 Dallas Pky Ste 600 Suite 600		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: 14736765
Name of Employer Community Hospital Corporation		Occupation CEO & President	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"/> 125.00

B.	Full Name (Last, First, Middle Initial) Mr. Michael S. Potter, FACHE		Date of Receipt
	Mailing Address PO Box 1878		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Texarkana	TX	75504-1878
	FEC ID number of contributing federal political committee. C		Transaction ID: 14755624
Name of Employer Wadley Regional Medical Center		Occupation President CEO	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"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Mr. Kelley Oliphint		Date of Receipt
	Mailing Address One St Mark's Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	La Grange	TX	78945-2040
	FEC ID number of contributing federal political committee. C		Transaction ID: 14755651
Name of Employer St. Mark's Medical Center		Occupation President CEO	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"/> 420.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1545.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 40 / 55
(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. Sharon Joseph
 Mailing Address PO Box 835
 City State Zip Code
 Fredericksburg TX 78624-0835
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 6 / 2 0 0 7
Transaction ID: 14755652
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hill Country Memorial Hospital
 Occupation Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Ms. Margaret Allison
 Mailing Address 8109 Fredericksburg Rd
 City State Zip Code
 San Antonio TX 78229-3311
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 6 / 2 0 0 7
Transaction ID: 14755654
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Methodist Healthcare System of San Ant
 Occupation Member MHS Board of Governors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
 Mr. Ignacio O. Zamarron
 Mailing Address PO Box 15587
 City State Zip Code
 Austin TX 78761
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 2 1 / 2 0 0 7
Transaction ID: 14755837
 Amount of Each Receipt this Period
 62.50
 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 ▼ 687.50

SUBTOTAL of Receipts This Page (optional) ► **812.50**
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 41 / 55
	<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"/>	<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 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14755849
Name of Employer Texas Hospital Association		Occupation Sr VP Gen Cnsl Lgl Rgltry Group	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"/> 458.48	<input type="text"/> 41.68

B.	Full Name (Last, First, Middle Initial) Ms. Elizabeth N. Sjoberg, J.D., RN		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14755850
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"/> 492.00	<input type="text"/> 22.00

C.	Full Name (Last, First, Middle Initial) Ms. Ann Ward, , APR		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14755851
Name of Employer Texas Hospital Association		Occupation 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"/> 458.26	<input type="text"/> 41.66

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 105.34
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 42 / 55
	<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., FACH		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14755861
Name of Employer Texas Hospital Association		Occupation President CEO	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"/> 550.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Ms. Dinah S. Welsh		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14755862
Name of Employer Texas Hospital Association		Occupation Director Advocacy Public Policy	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"/> 220.00	<input type="text"/> 20.00

C.	Full Name (Last, First, Middle Initial) Ms. Lisa Kepple		Date of Receipt
	Mailing Address PO Box 15587		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Austin	TX	78761
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14755868
Name of Employer Texas Hospital Association		Occupation Dir Political Action Programs	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"/> 458.48	<input type="text"/> 41.68

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 111.68
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 43 / 55
(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. Starr West

Mailing Address PO Box 15587

City Austin State TX Zip Code 78761

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

Name of Employer Texas Hospital Association Occupation Sr Director Policy Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.48

Date of Receipt 11 / 21 / 2007

Transaction ID: 14755871

Amount of Each Receipt this Period 41.68

B.

Full Name (Last, First, Middle Initial)
Mr. Gregg W. Knaupe, J.D.

Mailing Address PO Box 15587

City Austin State TX Zip Code 78761-5587

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

Name of Employer Texas Hospital Association Occupation Vice President Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 847.00

Date of Receipt 11 / 21 / 2007

Transaction ID: 14755872

Amount of Each Receipt this Period 77.00

C.

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

Mailing Address PO Box 15587

City Austin State TX Zip Code 78761

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 ▼ 550.00

Date of Receipt 11 / 21 / 2007

Transaction ID: 14755878

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 168.68

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 44 / 55
	<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. Kent Stevens		Date of Receipt																					
	Mailing Address 6225 Hwy 290 E		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	1	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	1	/	2	0	0	7														
	City State Zip Code Austin TX 78723		Transaction ID: 14755881																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Texas Hospital Association Occupation: Mgr Patient Data System Depart Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 916.74		83.34																						

B.	Full Name (Last, First, Middle Initial) Mr. Gregg W. Knaupe, J.D.		Date of Receipt																					
	Mailing Address PO Box 15587		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	5	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	5	/	2	0	0	7														
	City State Zip Code Austin TX 78761-5587		Transaction ID: 14810789																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Texas Hospital Association Occupation: Vice President Public Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00		53.00																						

C.	Full Name (Last, First, Middle Initial) Mr. James G. Springfield, FACHE		Date of Receipt																					
	Mailing Address PO Box 2588		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	7	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	7	/	2	0	0	7														
	City State Zip Code Harlingen TX 78551-2588		Transaction ID: 14823817																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Valley Baptist Health System Occupation: President CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1875.00		125.00																						

SUBTOTAL of Receipts This Page (optional)	261.34
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 45 / 55

(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. Matt T. Maxfield, CHE

Mailing Address PO Box 760

City State Zip Code
Brownwood TX 76804-0760

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

Name of Employer Occupation
Brownwood Regional Medical Center Chief Executive Officer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 14823819

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Myron Shabot

Mailing Address 7737 Southwest Freeway Ste 200

City State Zip Code
Houston TX 77074-1800

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

Name of Employer Occupation
Memorial Hermann Health-care System Chief Medical Officer

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 14823820

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Dr. Theodore Dyer, M.D., CHE

Mailing Address 1900 Pine

City State Zip Code
Abilene TX 79601-2316

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

Name of Employer Occupation
Hendrick Health System VP Medical Affairs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 14823821

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

1542.00

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 46 / 55
	<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. David L. Jones	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 921 Gessner	Transaction ID: 14823822
	City State Zip Code Houston TX 77024	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Memorial Hermann Memorial City Hospita	Occupation Interim Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.	Full Name (Last, First, Middle Initial) Mr. Brett S. McClung, FACHE	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 6100 Harris Parkway	Transaction ID: 14823825
	City State Zip Code Fort Worth TX 76132-4101	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Harris Methodist Southwest	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.	Full Name (Last, First, Middle Initial) Mr. James E. Buckner, Jr., CHE	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 1025 Garner Field Rd	Transaction ID: 14823826
	City State Zip Code Uvalde TX 78801-4809	Amount of Each Receipt this Period 83.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Uvalde County Hospital Authority	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

SUBTOTAL of Receipts This Page (optional)	458.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 55
	<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. Glenn Steven Sanders		Date of Receipt
	Mailing Address 9250 Pinecroft		<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
	City	State	Zip Code
	Shenandoah	TX	77380-3218
	FEC ID number of contributing federal political committee. C		Transaction ID: 14823828
Name of Employer Memorial Hermann The Woodlands Hospital		Occupation Chief Executive 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 ▼	<input type="text"/> 83.00
		<input type="text"/> 830.00	

B.	Full Name (Last, First, Middle Initial) Mr. Michael D. Williams		Date of Receipt
	Mailing Address 7160 Dallas Pky Ste 600 Suite 600		<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
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: 14823829
Name of Employer Community Hospital Corporation		Occupation CEO & President	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"/> 125.00
		<input type="text"/> 1375.00	

C.	Full Name (Last, First, Middle Initial) Ms. Phyllis Cowling		Date of Receipt
	Mailing Address 1600 Eighth Street		<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
	City	State	Zip Code
	Wichita Falls	TX	76301-3164
	FEC ID number of contributing federal political committee. C		Transaction ID: 14823866
Name of Employer United Regional Health Care System		Occupation President CEO	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"/> 250.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 458.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Mr. Tom E. Roy		Date of Receipt
	Mailing Address 1500 S Main Street		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Fort Worth	TX	76104-4941
	FEC ID number of contributing federal political committee. C		Transaction ID: 14829419
Name of Employer JPS Health Network		Occupation Vice President Govt 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 ▼	<input type="text" value="250.00"/>
		<input type="text" value="1000.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. J Bradley, Jr., FACHE		Date of Receipt
	Mailing Address 910 E Houston Ste 500		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Tyler	TX	75702
	FEC ID number of contributing federal political committee. C		Transaction ID: 14851423
Name of Employer Trinity Mother Frances Health System		Occupation President/Chief Admin. 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 ▼	<input type="text" value="1500.00"/>
		<input type="text" value="1500.00"/>	

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth W Poteete		Date of Receipt
	Mailing Address 2120 Scenic Dr		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Georgetown	TX	78626
	FEC ID number of contributing federal political committee. C		Transaction ID: 14851424
Name of Employer Georgetown Healthcare System Foundatio		Occupation Chief Executive 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 ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 55

(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. Elmer G. Ellis, FACHE

Mailing Address PO Box 6400

City State Zip Code
Tyler TX 75711-6400

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

Name of Employer Occupation
East Texas Medical Center President CEO
Regional Head

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 14851427

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. William D. Rasco, FACHE

Mailing Address 7500 Highway 90 W Ste 200

City State Zip Code
San Antonio TX 78227

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

Name of Employer Occupation
Greater San Antonio Hospital Council 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
1 2 / 1 7 / 2 0 0 7

Transaction ID: 14851567

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Patricia Harper

Mailing Address 6363 N. Hwy 161, Suite #450

City State Zip Code
Irving TX 75038-2238

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

Name of Employer Occupation
CHRISTUS Health System Dir Advocacy Public Policy

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 14851570

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 55
	<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) Randall Day		Date of Receipt
	Mailing Address 333 N Santa Rosa St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	San Antonio	TX	78207-3108
	FEC ID number of contributing federal political committee. C		Transaction ID: 14851925
Name of Employer CHRISTUS Santa Rosa Children's Hospital		Occupation Pediatric Anesthesiologist	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"/> 250.00

B.	Full Name (Last, First, Middle Initial) Mr. Doug White		Date of Receipt
	Mailing Address 6100 Western Place Ste 1001		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Fort Worth	TX	76107
	FEC ID number of contributing federal political committee. C		Transaction ID: 14851954
Name of Employer Harris Methodist Health Foundation		Occupation Interim President	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"/> 250.00

C.	Full Name (Last, First, Middle Initial) Mr. Jim Faucett		Date of Receipt
	Mailing Address 7737 Southwest Freeway Ste 200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Houston	TX	77074
	FEC ID number of contributing federal political committee. C		Transaction ID: 14851957
Name of Employer Memorial Hermann Healthcare System		Occupation VP System Laboratory Services	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"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
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 51 / 55
	<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. Theodore Dyer, M.D., CHE		Date of Receipt
	Mailing Address 1900 Pine		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 9 / 2 0 0 7
	City	State	Zip Code
	Abilene	TX	79601-2316
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14851958
Name of Employer Hendrick Health System		Occupation VP Medical Affairs	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"/> 500.00
		<input type="text"/> 1004.00	

B.	Full Name (Last, First, Middle Initial) Mr. Steve Love		Date of Receipt
	Mailing Address 250 Decker Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 9 / 2 0 0 7
	City	State	Zip Code
	Irving	TX	75062
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14851967
Name of Employer Dallas-Fort Worth Hospital Council		Occupation President/CEO	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"/> 500.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert E. Gray, Jr.		Date of Receipt
	Mailing Address PO Box 4001		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 4 / 2 0 0 7
	City	State	Zip Code
	Huntsville	TX	77342-4001
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 14852009
Name of Employer Huntsville Memorial Hospital		Occupation Chief Financial 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 ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1500.00
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 52 / 55
	<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. George B. Hernandez, Jr., J.D.		Date of Receipt
	Mailing Address 4502 Medical Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	San Antonio	TX	78229-4493
	FEC ID number of contributing federal political committee. C		Transaction ID: 14852099
Name of Employer University Health System		Occupation President	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"/> 1000.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Mr. Blake Kretz		Date of Receipt
	Mailing Address 201 Walls Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	Cleburne	TX	76033-4007
	FEC ID number of contributing federal political committee. C		Transaction ID: 14852100
Name of Employer Walls Regional Hospital		Occupation President & 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 ▼	<input type="text"/> 250.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Mr. Michael Thomas		Date of Receipt
	Mailing Address PO Box 6400		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	Tyler	TX	75711-6400
	FEC ID number of contributing federal political committee. C		Transaction ID: 14852101
Name of Employer East Texas Medical Center Regional Hea		Occupation Vice President of Marketing	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"/> 500.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 53 / 55	
	(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 C. Waters, FACHE		Date of Receipt
	Mailing Address #2 Village Drive Ste 510		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Abilene	TX	79606
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Hendrick Health System	Occupation Senior Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Contribution
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
			Transaction ID: 14852102
			Amount of Each Receipt this Period
			<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="39128.36"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. AHAPAC-American Hospital Association Federal PAC

Mailing Address 325 Seventh Street, N.W.
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
PAC Transfer

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 14575695

Date of Disbursement

09 / 14 / 2007

Amount of Each Disbursement this Period

13000.00

PAC Transfer

Full Name (Last, First, Middle Initial)

B. AHAPAC-American Hospital Association Federal PAC

Mailing Address 325 Seventh Street, N.W.
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
PAC Transfer

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 14736391

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

15000.00

PAC Transfer

Full Name (Last, First, Middle Initial)

C. Ciro D. Rodriguez for Congress

Mailing Address P.O. Box 14528

City San Antonio State TX Zip Code 78214

Purpose of Disbursement
Contribution

Candidate Name
Rep. Ciro D. Rodriguez

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 28

Transaction ID: 14810928

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

29000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC</p> <p>Mailing Address 325 Seventh Street, N.W. Suite 700</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement PAC Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 14852359</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>PAC Transfer</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC</p> <p>Mailing Address 325 Seventh Street, N.W. Suite 700</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement PAC Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 14858494</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13000.00"/></p> <p>PAC Transfer</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC</p> <p>Mailing Address 325 Seventh Street, N.W. Suite 700</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement PAC Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 14858515</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1610.00"/></p> <p>PAC Transfer</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="17110.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value="46110.00"/></p>