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2012 MAR 12 PM 3: 54 COMMONWEALTH OF PENNSYLVANIA  
OFFICE OF THE GOVERNOR  
HARRISBURG

SENATE OF PA  
SECRETARY'S OFFICE

THE GOVERNOR

MEMBER OF THE BOARD OF TRUSTEES OF TORRANCE STATE HOSPITAL

March 12, 2012

To the Honorable, the Senate  
of the Commonwealth of Pennsylvania:

In conformity with law, I have the honor hereby to nominate for the advice and consent of the Senate, Susan E. Bortz, 500 West Third Avenue, Derry 15627, Westmoreland County, Thirty-ninth Senatorial District, for appointment as a member of the Board of Trustees of Torrance State Hospital, to serve until the third Tuesday of January 2017, and until her successor is appointed and qualified, vice Josephine Dunmire, Apollo, resigned.

A handwritten signature in black ink that reads "Tom Corbett".

TOM CORBETT  
Governor

# STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
 B O R T Z E S U S A N E

02 ADDRESS City State Zip Code Area Code Phone  
 500 West Third Avenue Derry PA 15027 (724) 516-6415

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked: (See instructions on page 2)

A  Candidate (including write-in) C  Public Official (Current) D  Public Employee (Current) E  Check this block if you are filing as a solicitor

B  Nominee. C  Public Official (Former) D  Public Employee (Former)  Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.)  seeking  hold  held

A MAYOR  seeking  hold  held

B BOARD OF TRUSTEES  seeking  hold  held

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A BORO OF DERRY PA

B TORRANCE STATE HOSPITAL

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07- YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated:

Special Agent, FBI (retired) / TRIBUNE CARRIER 2011

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box

NONE

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box

Name: Address:

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block.

Name: TRIBUNE REVIEW Address: 622 CABIN HILL DR, GIB, PA 15027

11 GIFTS (See instructions on page 2) If NONE, check this box

Source of Gift

Address of Source of Gift

Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box

Source (Name and Address)

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box

Business Entity (Name and Address) See #10

Name: Derry Area Revitalization Corp. (DARCC) Address: 16 E 1st Ave, Derry, PA 15027

Position Held: Indpt. Contractor CEO until Sep '11 - PA

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box

Name and Address of Business

Derry Station Art Center, 136 So. Chestnut St, Derry, PA 15027

Business closed 12/24/11

Interest Held: NO PAY 100%

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box

Business (Name and Address)

Transferee (Name and Address)

Interest Held Relationship Date Transferred

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (perjury/falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature Ann E. Bortz Enter Current Date 3/19/2012

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.