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SENATE OF PA
SECRETARY'S OFFICE



COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE GOVERNOR
HARRISBURG

THE GOVERNOR

MEMBER OF THE STATE BOARD OF OSTEOPATHIC MEDICINE

April 10, 2013

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, Joanne M. Coolen, (Public Member), 175 Crescent Drive, Hershey 17033, Dauphin County, Fifteenth Senatorial District, for reappointment as a member of the State Board of Osteopathic Medicine, to serve for a term of four years or until her successor is appointed and qualified, but not longer than six months beyond that period.

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

C O O L E N J O A N N E M

02 ADDRESS (work or home) City State Zip Code Area Code Phone

175 Crescent Drive Hershey PA 17033 (717) 298-1110

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 amending an original filing

B Nominee C Public Official (Former) D Public Employee (Former) E Check this block if you are filing as a solicitor

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

A M E M B E R 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 S T A T E B O A R D O F O S T E O P A T I C M E D I

06 OCCUPATION OR PROFESSION (This may be the same as block 4)

Financial Consultant

07 YEAR The information in blocks 8 through 15 below represents financial interests for the PRIOR calendar year indicated: 2 0 1 2

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

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

Name: Linda J Redshb Address: 209 Meadow Trail, Dillsburg, PA Interest Rate: N/A

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: LPL Financial Address: 9785 Towne Ctr Dr, San Diego, CA

Wm Penn Life Ins Co of NY 100 Quentin Roosevelt Blvd, Garden City, NJ

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)

Name: Self-Employed - Joanne M. Coolen Address: 175 Crescent Drive, Hershey, PA 17033 Position Held: OWNER

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

Self-Employed - Joanne M. Coolen 175 Crescent Drive, Hershey PA Interest Held: 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 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. § 1109(b).

Signature Joanne M Coolen Enter Current Date 4/16/13

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

STATE ETHICS COMMISSION
 2013/PP 19 P
 APR 15 2013
 SECRETARY OF PA
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