

**Company Contact Form**

**DATE OF DEPOSIT**

**Company Name:** HealthTrust Purchasing Group, L.P.

**Company d/b/a Name:**

**Docket Number:** A-2009-2145163

**Date Submitted:**

**Utility Type:** Electric

MAR 26 2024

PA PUBLIC UTILITY COMMISSION  
SECRETARY'S BUREAU

<u>Contact Type</u>	<u>First and Last Name</u>	<u>Title</u>	<u>Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Phone</u>	<u>FAX</u>	<u>E-Mail</u>
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<b>Annual Report:</b>	Stephen Oberhousen	Manager	1100 Dr. Martin L. King Jr. Blvd., Suite 1100	Nashville	TN	37203	(615) 344-3256	(866) 917-3626	<a href="mailto:stephen.oberhousen@healthtrustpg.com">stephen.oberhousen@healthtrustpg.com</a>
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<b>PEMA/911:</b>									

Do you prefer to have PUC invoices mailed or emailed (or both emailed and mailed) to your Assessments/Billing contact?

Fill out all applicable contacts; if there are none please indicate "N/A". Once complete submit to the Secretary by one of the following methods: eFiling, email, or mail.

If emailing send to Secretary Chiavetta with copies to:

- [rchiavetta@pa.gov](mailto:rchiavetta@pa.gov)      [christhodg@pa.gov](mailto:christhodg@pa.gov)      [dbacker@pa.gov](mailto:dbacker@pa.gov)
- [sspunaugle@pa.gov](mailto:sspunaugle@pa.gov)      [sithomas@pa.gov](mailto:sithomas@pa.gov)      [ra-ocmo@pa.gov](mailto:ra-ocmo@pa.gov)
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