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In the Matter of:

UPPER CHESAPEAKE HEALTH  
SYSTEM, INC.

Respondent

Before the State Ethics Commission  
STATE ETHICS COMMISSION

Complaint No.: C-138-11

STIPULATION OF SETTLEMENT AGREEMENT

On the 8<sup>th</sup> day of July, 2011, between Upper Chesapeake Health System, Inc., Respondent and William J. Colquhoun, Staff Counsel, agreed as follows:

*STIPULATIONS*

1. The State Ethics Commission ("Commission") is an executive agency of the State of Maryland established for the purpose of enforcing the Maryland Public Ethics Law (Title 15, State Government Article, Annotated Code of Maryland, hereinafter "the Ethics Law").
2. The Respondent timely registered as a lobbyist with the State Ethics Commission for the period of March 9, 2011 through October 31, 2011 as required by § 15-703(d)(1) of the Ethics Law.
3. The Respondent was required to submit a Lobbying Activity Report by June 1, 2011, for the period November 1, 2010 through April 30, 2011, as required by § 15-704(a)(i) of the Ethics Law, and failed to submit the required report in a timely manner.
4. On June 6, 2011, the Respondent submitted the delinquent Lobbying Activity Report for the period November 1, 2010 through April 30, 2011.
5. On June 15, 2011, the Commission issued a complaint against the Respondent alleging the failure to file, by June 1, 2011, a Lobbying Activity Report for the period of November 1, 2010 through April 30, 2011.
6. The Respondent is voluntarily entering into this Stipulation of Settlement Agreement to admit its failure to timely file the Lobbying Activity Report for the period November 1, 2010 through April 30, 2011 and to pay a sum of money in lieu of potential late filing fees and fines that could be assessed pursuant to § 15-405 of the Ethics Law.

**NOW THEREFORE**, in consideration of the agreements herein contained and effective on the Commission's acceptance of the terms of this Agreement, Upper Chesapeake Health System, Inc., Respondent, and William J. Colquhoun, Staff Counsel agree as follows:

- A. Respondent admits that it did not timely file its Lobbying Activity Report or the period November 1, 2010 through April 30, 2011 by June 1, 2011, in violation of § 15-704(a)(ii) of the Ethics Law.
- B. Respondent subsequently filed the required Lobbying Activity Report with the Commission (a copy of which has been attached hereto and made a part hereof).
- C. Respondent understands that failure to comply with the lobbying disclosure provisions of the Ethics Law may subject it to the possibility of late fees, civil fines, reprimand, a suspension of its ability to lobby for compensation and other penalties. Respondent acknowledges that it has been advised that the filing deadlines for activity reports are May 31<sup>st</sup> for the period of November 1<sup>st</sup> to April 30<sup>th</sup> and November 30<sup>th</sup> for the period May 1<sup>st</sup> through October 31<sup>st</sup> if it is registered in those reporting periods. Respondent also acknowledges that future late filed activity reports could be viewed as knowing and willful violations of the Ethics Law.
- D. Based on the facts stated in this Stipulation of Settlement, the Respondent agrees to pay as settlement of the complaint, the amount of One Hundred Dollars (\$100.00) at the time of the execution of this agreement in lieu of potential late fees and in lieu of civil fines for the above admitted late activity report (paragraph 1).
- E. Respondent waives a formal hearing on this matter and agrees that acceptance of the Stipulation of Settlement by the Commission would constitute, based on its admission of violations of the Ethics Law, a final action and finding of violation by the Commission, and, pursuant to § 15-407 of the Ethics Law, this Agreement and materials relating to this matter are not subject to the confidentiality provisions of the Ethics Law and will be public information unless otherwise protected.
- F. Staff Counsel, upon execution of this Agreement by the Respondent, will recommend that the Commission suspend further complaint proceedings against the Respondent and recommend further that the Commission issue a Final Order in accordance with the terms of this Agreement.
- G. Respondent and Staff Counsel have entered into this Agreement for the sole purpose of resolving the late submission of the Lobbying Activity Report, the payment in lieu of late fees and fines, to resolve the complaint now pending, and for no other purpose.

IN WITNESS WHEREFORE, Upper Chesapeake Health System, Inc., Respondent and William J. Colquhoun, Staff Counsel for the State Ethics Commission, have signed below.

(SIGNATURE APPEARS ON ORIGINAL AGREEMENT)

William J. Colquhoun, Staff Counsel  
State Ethics Commission  
45 Calvert Street, 3<sup>rd</sup> Floor  
Annapolis, MD 21401  
(410) 260-7770

(SIGNATURE APPEARS ON ORIGINAL AGREEMENT)

on behalf of  
Upper Chesapeake Health System,  
Inc.

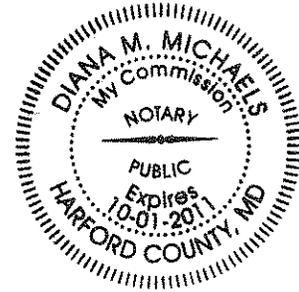
State of Maryland  
County of: Harford, to wit:

Before me, the undersigned, a Notary Public in and for the State and County aforesaid, personally appeared E. Scott CONOVER and acknowledged that he/she was an individual authorized to execute this document on behalf of Upper Chesapeake Health System, Inc., and that he/she executed this document for the purpose set forth herein on behalf of Upper Chesapeake Health System, Inc.

(SIGNATURE APPEARS ON ORIGINAL AGREEMENT)

Notary Public

My Commission Expires: 10-01-2011



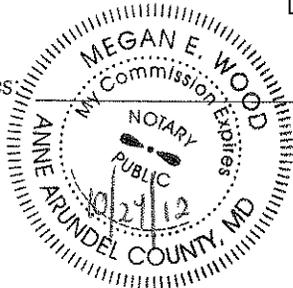
State of Maryland  
County of: Anne Arundel, to wit:

Before me, the undersigned, a Notary Public in and for the State and County aforesaid, personally appeared William J. Colquhoun, Staff Counsel to the State Ethics Commission, who made oath on this 8 day of July, 2011, in due form of law that he executed this agreement for the purposes set forth herein.

(SIGNATURE APPEARS ON ORIGINAL AGREEMENT)

Notary Public

My Commission Expires: \_\_\_\_\_



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Accepted by the Commission

(SIGNATURE APPEARS ON ORIGINAL  
AGREEMENT)

Robert F. Scholz, Chairman  
for the Commission

Date: July 14, 2011

**MARYLAND STATE ETHICS COMMISSION**

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

**GENERAL LOBBYING ACTIVITY FORM (Form #4)**

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: March 09, 2011 through April 30, 2011

\*This Activity Report was completed by Sue Dent on behalf of Upper Chesapeake Health System, Inc.

Termination Report: Yes \_\_\_\_\_ No  x

Termination Date:

**PART A Identification of Regulated Lobbyist (Registration and Employer)**

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

**a)** Name: Upper Chesapeake Health System, Inc.

**b)** Permanent Address (Include firm name if applicable):

Firm Name: Upper Chesapeake Health System, Inc.

Address:

520 Upper Chesapeake Drive, Suite 405

Bel Air, MD 21014

**c)** Business telephone: 443-643-3321

Cell phone:

**d)** What is your occupation or type of business? Other

If other: Acute Care Hospital System

**A. 2)** Identification of others required to register:

**a)** Was any other person required to register as a lobbyist on behalf of the filer?

Yes \_\_\_\_\_ No  x

**b)** If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

**a)** Did you engage in lobbying activity on behalf of a person or entity other than yourself?

Yes  x  No \_\_\_\_\_

Name: Upper Chesapeake Health System, Inc.

Permanent Address:

520 Upper Chesapeake Drive

Bel Air, MD 21014

Business Telephone: 443-643-1000

Nature of business: Healthcare

Website of employer:

**b)** Did you represent any other person or entity with regard to the matters covered by this registration?

Yes \_\_\_\_\_ No  x

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?

Yes \_\_\_\_\_ No  x

**A. 5)** Registration Information:

- a) For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?  
March 09, 2011 to October 31, 2011
- b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?  
HEALTH CARE
- c) If known include the bill number(s) of the matter(s) on which you lobby

**A. 6)** Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

**PART B Compensation and Expenses**

**B. 1)** Did you provide any meals and beverages for officials or employees or their immediate families?  
Yes \_\_\_\_\_ No   
If yes, what was the exact amount? B-1 \$0.00

**B. 2)** Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.  
Yes \_\_\_\_\_ No   
If yes, list date, location, group of invitees who benefited and total expenses for each event.  
Total B-2 Expenses \$0.00

**B. 3)** Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?  
Yes \_\_\_\_\_ No   
If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.  
Total B-3 Expenses \$0.00

**B. 4)** Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?  
Yes \_\_\_\_\_ No   
If yes, list location, name of legislative organization, date and total expense for each meeting.  
Total B-4 Expenses \$0.00

**B. 5)** Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?  
Yes \_\_\_\_\_ No   
If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.  
Total B-5 Expenses \$0.00

**B. 6)** Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)  
Yes \_\_\_\_\_ No   
If yes, list the amount: B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

**B. 7)** What was the total compensation paid to you, not including any sums reported in any other section Section B of this report? B-7 \$0.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes \_\_\_\_\_ No  X

**B. 8)** What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer? B-8  \$0.00

**B. 9)** Did you incur any additional office expenses not reported in B-7 or B-8?

Yes \_\_\_\_\_ No  X

If yes, list the amount: B-9  \$0.00

**B. 10)** Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8?

Yes \_\_\_\_\_ No  X

If yes, list the amount: B-10  \$0.00

**B. 11)** Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees?

Yes \_\_\_\_\_ No  X

If yes, list the amount: B-11  \$0.00

**B. 12)** Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer?

Yes \_\_\_\_\_ No  X

If yes, list the name and amount for each.

Total B-12 Expenses  \$0.00

**B. 13)** Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation.

Yes \_\_\_\_\_ No  X

If yes, list the amount: B-13  \$0.00

Please provide an explanation:

N/A

**TOTAL**  \$0.00

**C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))

Yes \_\_\_\_\_ No  X

**D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)

Yes \_\_\_\_\_ No  X

**E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)

Yes \_\_\_\_\_ No  X

**F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?

Yes \_\_\_\_\_ No  X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

## PART G Signature and Oath

The Public Ethics Law, Md. Code Ann., State Gov't §§ 15-602(d) and (e) provide the following:

(d) *Development of electronic filing procedures.* - The Ethics commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

X  I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 06/06/2011