

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

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="2014"/>		103806.96
(b) Cash on Hand at Beginning of Reporting Period.....	112186.05	
(c) Total Receipts (from Line 19)	7186.06	19065.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	119372.11	122872.11
7. Total Disbursements (from Line 31).....	5000.00	8500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	114372.11	114372.11
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

Health Net, Incorporated Political Action Committee

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	3453.84	6724.60
(ii) Unitemized	3732.22	12340.55
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7186.06	19065.15
(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)	7186.06	19065.15
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.).....	0.00	0.00
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 Transfers (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))..... ▶	7186.06	19065.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7186.06	19065.15

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	5000.00	8500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	5000.00	8500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	8500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	7186.06	19065.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7186.06	19065.15
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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Dennis M. Bell
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation Vice President, Real Estate Management
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : INCA30572

Amount of Each Receipt this Period
50.00

B. Pamela Ann Bohall
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Road

City Rancho Cordova	State CA	Zip Code 95742
------------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services, Inc.	Occupation VP, Claims Admin & Enroll Svcs
---	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : INCA30579

Amount of Each Receipt this Period
76.92

C. Patricia A. Buss
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Wilson Blvd.

City Arlington	State VA	Zip Code 22201
-------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services, Inc.	Occupation Senior Medical Director
---	---------------------------------------

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 14 / 2014

Transaction ID : INCA30583

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	176.92
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30572

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30579

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30583

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Joseph Capezza
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation EVP & CFO

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014

Transaction ID : INCA30588

Amount of Each Receipt this Period
40.00

B. Thomas Carrato
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Wilson Blvd., Suite 900

City Arlington State VA Zip Code 22201

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

Name of Employer Health Net Federal Services Occupation Program Officer - DoD

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014

Transaction ID : INCA30590

Amount of Each Receipt this Period
50.00

C. Daria A. Eppley
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP, Access to Data

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014

Transaction ID : INCA30602

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **140.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30588

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30590

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30602

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Thomas Bertrand Fatouros
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 North Manchester Street
 City Arlington State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net Federal Services, LLC Occupation Lawyer
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30603
 Amount of Each Receipt this Period
 40.00

B. David R. Feniger
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 Aerojet Road
 City Rancho Cordova State CA Zip Code 95742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation Executive Counsel
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30604
 Amount of Each Receipt this Period
 42.00

C. David J. Friedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3400 Data Drive
 City Rancho Cordova State CA Zip Code 95670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP, State Health Programs
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30606
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....▶	122.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30603

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30604

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30606

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Paul A. Gilbertson
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Road

City Rancho Cordova	State CA	Zip Code 95742
------------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services, Inc.	Occupation Operations Officer
---	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30608

Amount of Each Receipt this Period

75.00

B. Jody Giordano
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer HealthNet of California	Occupation Vice President of Underwriting
---	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30609

Amount of Each Receipt this Period

50.00

C. Eric Hause
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation Vice President - Strategy and Business
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30616

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30608

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30609

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30616

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Juanell Hefner
Full Name (Last, First, Middle Initial)
Mailing Address 11031 Sun Center Drive
City Rancho Cordova State CA Zip Code 95670
FEC ID number of contributing federal political committee. **C**
Name of Employer MHN - Mental Health Network Occupation Chief Customer Services Officer
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 14 / 2014
Transaction ID : INCA30617
Amount of Each Receipt this Period
50.00

B. Anthony J. Koelker
Full Name (Last, First, Middle Initial)
Mailing Address 2107 Wilson Blvd.
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services Occupation VP, Provider Network Managment
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 14 / 2014
Transaction ID : INCA30630
Amount of Each Receipt this Period
40.00

C. Lori A. Long
Full Name (Last, First, Middle Initial)
Mailing Address 2107 Wilson Blvd.
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Occupation Director, Public Policy & Government R
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 14 / 2014
Transaction ID : INCA30638
Amount of Each Receipt this Period
58.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 148.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30617

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30630

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30638

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Karin Mayhew
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation SVP Organization Effectiveness
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30642

Amount of Each Receipt this Period

50.00

B. Marie Montgomery
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation SVP & Corporate Controller
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30648

Amount of Each Receipt this Period

40.00

C. Jennifer A. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 21281 Burbank Blvd.

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation VP Provider Network Management
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30649

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30642

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30648

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30649

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 24 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Adrienne Biggert Morrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 Wilson Blvd.
 City Arlington State VA Zip Code 22201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP Government Relations
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30651
 Amount of Each Receipt this Period
 50.00

B. Lawrence Naehr
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 Wilson Blvd.
 City Arlington State VA Zip Code 22201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net Federal Services, Inc. Occupation VP, Optimization
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30652
 Amount of Each Receipt this Period
 50.00

C. Steven J. Sell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2370 Kerner Blvd.
 City San Rafael State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation President, West Region Health Plan
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30668
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30651

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30652

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30668

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 27 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Jeffrey Lee Shelton
Full Name (Last, First, Middle Initial)

Mailing Address 1201 K Street, Suite 1815

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation VP State Leg & Reg Compliance
--------------------------------------	---

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30670

Amount of Each Receipt this Period

40.00

B. Debra Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Road

City Rancho Cordova	State CA	Zip Code 95742
------------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services, Inc.	Occupation VP, Organization Effectiveness
---	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30673

Amount of Each Receipt this Period

50.00

c. Steven D. Tough
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Drive

City Rancho Cordova	State CA	Zip Code 95742
------------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services	Occupation President - Government Programs
---	---

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	14	/	2014

Transaction ID : INCA30676

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30670

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30673

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30676

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Virginia E. White
 Full Name (Last, First, Middle Initial)
 Mailing Address 10540 White Rock Road, Suite 280
 City Rancho Cordova State CA Zip Code 95670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP, Operations
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30685
 Amount of Each Receipt this Period
 200.00

B. Gay Ann Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 21650 Oxnard Street
 City Woodland Hills State CA Zip Code 91367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP State Leg & Reg Compliance
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30686
 Amount of Each Receipt this Period
 100.00

C. James E. Woys
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 Aerojet Road
 City Rancho Cordova State CA Zip Code 95742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net Federal Services, Inc.. Occupation EVP & COO
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : INCA30688
 Amount of Each Receipt this Period
 205.00

SUBTOTAL of Receipts This Page (optional).....▶	505.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30685

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30686

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30688

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 33 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Dennis M. Bell
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation Vice President, Real Estate Management

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : INCA30694

Amount of Each Receipt this Period
50.00

B. Pamela Ann Bohall
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP, Claims Admin & Enroll Svcs

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : INCA30701

Amount of Each Receipt this Period
76.92

C. Patricia A. Buss
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Wilson Blvd.

City Arlington State VA Zip Code 22201

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

Name of Employer Health Net Federal Services, Inc. Occupation Senior Medical Director

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : INCA30705

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **176.92**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30694

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30701

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30705

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Joseph Capezza
Full Name (Last, First, Middle Initial)
Mailing Address 21650 Oxnard Street
City Woodland Hills State CA Zip Code 91367
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net, Inc. Occupation EVP & CFO
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : INCA30710
Amount of Each Receipt this Period
40.00

B. Thomas Carrato
Full Name (Last, First, Middle Initial)
Mailing Address 2107 Wilson Blvd., Suite 900
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services Occupation Program Officer - DoD
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : INCA30712
Amount of Each Receipt this Period
50.00

C. Daria A. Eppley
Full Name (Last, First, Middle Initial)
Mailing Address 2025 Aerojet Road
City Rancho Cordova State CA Zip Code 95742
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services, Inc. Occupation VP, Access to Data
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : INCA30724
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30710

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30712

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30724

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Thomas Bertrand Fatouros
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 North Manchester Street
 City Arlington State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net Federal Services, LLC Occupation Lawyer
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30725
 Amount of Each Receipt this Period
 40.00

B. David R. Feniger
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 Aerojet Road
 City Rancho Cordova State CA Zip Code 95742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation Executive Counsel
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30726
 Amount of Each Receipt this Period
 42.00

C. David J. Friedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3400 Data Drive
 City Rancho Cordova State CA Zip Code 95670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP, State Health Programs
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30728
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....▶	122.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30725

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30726

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30728

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Paul A. Gilbertson
Full Name (Last, First, Middle Initial)
Mailing Address 2025 Aerojet Road
City Rancho Cordova State CA Zip Code 95742
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services, Inc. Occupation Operations Officer
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : INCA30730
Amount of Each Receipt this Period
75.00

B. Jody Giordano
Full Name (Last, First, Middle Initial)
Mailing Address 21650 Oxnard Street
City Woodland Hills State CA Zip Code 91367
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthNet of California Occupation Vice President of Underwriting
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : INCA30731
Amount of Each Receipt this Period
50.00

C. Eric Hause
Full Name (Last, First, Middle Initial)
Mailing Address 21650 Oxnard Street
City Woodland Hills State CA Zip Code 91367
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net, Inc. Occupation Vice President - Strategy and Business
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **200.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014
Transaction ID : INCA30738
Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30730

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30731

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30738

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 45 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Juanell Hefner
Full Name (Last, First, Middle Initial)
Mailing Address 11031 Sun Center Drive
City Rancho Cordova State CA Zip Code 95670
FEC ID number of contributing federal political committee. **C**
Name of Employer MHN - Mental Health Network Occupation Chief Customer Services Officer
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
02 / 28 / 2014
Transaction ID : INCA30739
Amount of Each Receipt this Period
50.00

B. Anthony J. Koelker
Full Name (Last, First, Middle Initial)
Mailing Address 2107 Wilson Blvd.
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services Occupation VP, Provider Network Management
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **200.00**

Date of Receipt
02 / 28 / 2014
Transaction ID : INCA30752
Amount of Each Receipt this Period
40.00

C. Lori A. Long
Full Name (Last, First, Middle Initial)
Mailing Address 2107 Wilson Blvd.
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Occupation Director, Public Policy & Government R
Receipt For: 2014
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **290.00**

Date of Receipt
02 / 28 / 2014
Transaction ID : INCA30760
Amount of Each Receipt this Period
58.00

SUBTOTAL of Receipts This Page (optional)..... **148.00**
TOTAL This Period (last page this line number only).....

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30739

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30752

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30760

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 48 OF 60
<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)
Health Net, Incorporated Political Action Committee

A. Karin Mayhew
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation SVP Organization Effectiveness
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : INCA30764

Amount of Each Receipt this Period
50.00

B. Marie Montgomery
Full Name (Last, First, Middle Initial)

Mailing Address 21650 Oxnard Street

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation SVP & Corporate Controller
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : INCA30770

Amount of Each Receipt this Period
40.00

C. Jennifer A. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 21281 Burbank Blvd.

City Woodland Hills	State CA	Zip Code 91367
------------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation VP Provider Network Management
--------------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : INCA30771

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30764

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30770

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30771

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Adrienne Biggert Morrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 Wilson Blvd.
 City State Zip Code
 Arlington VA 22201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Health Net, Inc. VP Government Relations
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30773
 Amount of Each Receipt this Period
 50.00

B. Lawrence Naehr
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 Wilson Blvd.
 City State Zip Code
 Arlington VA 22201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Health Net Federal Services, Inc. VP, Optimization
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30774
 Amount of Each Receipt this Period
 50.00

C. Steven J. Sell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2370 Kerner Blvd.
 City State Zip Code
 San Rafael CA 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Health Net, Inc. President, West Region Health Plan
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30790
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30773

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30774

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30790

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 54 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Jeffrey Lee Shelton
Full Name (Last, First, Middle Initial)

Mailing Address 1201 K Street, Suite 1815

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

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

Name of Employer Health Net, Inc.	Occupation VP State Leg & Reg Compliance
--------------------------------------	---

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	28	/	2014

Transaction ID : INCA30792

Amount of Each Receipt this Period

40.00

B. Debra Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Road

City Rancho Cordova	State CA	Zip Code 95742
------------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services, Inc.	Occupation VP, Organization Effectiveness
---	--

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	28	/	2014

Transaction ID : INCA30795

Amount of Each Receipt this Period

50.00

C. Steven D. Tough
Full Name (Last, First, Middle Initial)

Mailing Address 2025 Aerojet Drive

City Rancho Cordova	State CA	Zip Code 95742
------------------------	-------------	-------------------

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

Name of Employer Health Net Federal Services	Occupation President - Government Programs
---	---

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	28	/	2014

Transaction ID : INCA30798

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30792

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30795

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30798

Payroll Deduction

Form/Schedule:

Transaction ID:

**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 57 OF 60
	<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)
Health Net, Incorporated Political Action Committee

A. Virginia E. White
 Full Name (Last, First, Middle Initial)
 Mailing Address 10540 White Rock Road, Suite 280
 City Rancho Cordova State CA Zip Code 95670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP, Operations
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30807
 Amount of Each Receipt this Period
 200.00

B. Gay Ann Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 21650 Oxnard Street
 City Woodland Hills State CA Zip Code 91367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net, Inc. Occupation VP State Leg & Reg Compliance
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30808
 Amount of Each Receipt this Period
 100.00

C. James E. Woys
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 Aerojet Road
 City Rancho Cordova State CA Zip Code 95742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Net Federal Services, Inc.. Occupation EVP & COO
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : INCA30810
 Amount of Each Receipt this Period
 205.00

SUBTOTAL of Receipts This Page (optional).....▶	505.00
TOTAL This Period (last page this line number only).....▶	3453.84

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30807

Payroll Deduction

Form/Schedule: SA11AI

Transaction ID: INCA30808

Payroll Deduction

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA30810

Payroll Deduction

Form/Schedule:

Transaction ID:

**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)

Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kevin McCarthy for Congress

Mailing Address P.O. Box 12667

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement
Monetary Contribution

011

Candidate Name

Kevin McCarthy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Transaction ID : EXPB30691

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Wyden for Senate

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement
Monetary Contribution

011

Candidate Name

Ronald L. Wyden

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Transaction ID : EXPB30690

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

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

5000.00