03/30/2005 16 : 02

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

Americas Health Insurance Plans PAC (AHIP PAC)

ADDRESS (number and street) ▼

601 Pennsylvania Avenue, NW

Suite 500 South Building

Check if different than previously reported. (ACC)

Washington | DC | 20004

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ STATE ▲ ZIPCODE ▲

C00106740

3. IS THIS REPORT — NEW (N) **OR** X AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Quarterly Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the: X General (30G) Runoff (30R) Special (30S)

Election on 11 02 2004 in the State of _____

5. Covering Period 10 14 2004 through 11 22 2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Robert Borchardt

Signature of Treasurer: Electronically Filed by Robert Borchardt — Date 03 30 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Americas Health Insurance Plans PAC (AHIP PAC)

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		32188.70
(b) Cash on Hand at Begining of Reporting Period	72918.39	
(c) Total Receipts (from Line 19)	37749.01	286347.38
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	110667.40	318536.08
7. Total Disbursements (from Line 31)	15554.37	223423.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	95113.03	95113.03
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	

X 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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Americas Health Insurance Plans PAC (AHIP PAC)

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

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)	30681.77	190597.38
(ii) Unitemized	2067.24	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	32749.01	190597.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	95750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	37749.01	286347.38
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 Transfer (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))	37749.01	286347.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	37749.01	286347.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	54.37	2423.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	54.37	2423.05
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	11000.00	216500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	4500.00	4500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))	15554.37	223423.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	15554.37	223423.05

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	37749.01	286347.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37749.01	286347.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	54.37	2423.05
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	54.37	2423.05

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Robert Abbott
Mailing Address: 801 6th Avenue
City: Des Moines | State: IA | Zip Code: 50309-1605
FEC ID number of contributing federal political committee: C
Name of Employer: American Enterprise
Occupation: President, Chairman & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 10 14 2004
Transaction ID: 2217520410204339632
Amount of Each Receipt this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): Larry Akey
Mailing Address: 801 Penn Ave NW
City: Washington | State: DC | Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 458.37
Date of Receipt: 10 15 2004
Transaction ID: 2004-10271
Amount of Each Receipt this Period: 41.67

C.
Full Name (Last, First, Middle Initial): Larry Akey
Mailing Address: 801 Penn Ave NW
City: Washington | State: DC | Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 458.37
Date of Receipt: 10 31 2004
Transaction ID: 2004-10163
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2083.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Larry Akey
Mailing Address 801 Penn Ave NW
City: Washington State: DC Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 458.37
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-153
Amount of Each Receipt this Period: 41.67

B.
Full Name (Last, First, Middle Initial)
Alan Bennett
Mailing Address 48 Fieldbrook Road
City: Madison State: CT Zip Code: 06443
FEC ID number of contributing federal political committee: C
Name of Employer: Aetna Inc.
Occupation: CFO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 17 2004
Transaction ID: 3990860411185405147
Amount of Each Receipt this Period: 1000.00
Contribution

C.
Full Name (Last, First, Middle Initial)
Mark Bertolini
Mailing Address 11 Robkins Road
City: Avon State: CT Zip Code: 06001
FEC ID number of contributing federal political committee: C
Name of Employer: Aetna Inc.
Occupation: Head of Specialty Products
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 17 2004
Transaction ID: 4927940411185345397
Amount of Each Receipt this Period: 1000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2041.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 54
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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Robert Borchardt
Mailing Address 17434 Avenleigh Dr
City: Ashton State: MD Zip Code: 20861-3626
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP of Finance
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 525.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10274
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial)
Robert Borchardt
Mailing Address 17434 Avenleigh Dr
City: Ashton State: MD Zip Code: 20861-3626
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP of Finance
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 525.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10166
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial)
Robert Borchardt
Mailing Address 17434 Avenleigh Dr
City: Ashton State: MD Zip Code: 20861-3626
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP of Finance
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 525.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1515
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 54
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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Frances Burkhart
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director Political Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 916.63
Date of Receipt: 10 15 2004
Transaction ID: 2004-10275
Amount of Each Receipt this Period: 83.33

B.
Full Name (Last, First, Middle Initial)
Frances Burkhart
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director Political Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 916.63
Date of Receipt: 10 31 2004
Transaction ID: 2004-10167
Amount of Each Receipt this Period: 83.33

C.
Full Name (Last, First, Middle Initial)
Frances Burkhart
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director Political Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 916.63
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1546
Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ 249.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Erin Carlson
Mailing Address 1129 20th St NW #600
City: Washington State: DC Zip Code: 20036-3403
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 262.50
Date of Receipt: 10 15 2004
Transaction ID: 2004-10276
Amount of Each Receipt this Period: 12.50

B.
Full Name (Last, First, Middle Initial)
Erin Carlson
Mailing Address 1129 20th St NW #600
City: Washington State: DC Zip Code: 20036-3403
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 262.50
Date of Receipt: 10 31 2004
Transaction ID: 2004-10168
Amount of Each Receipt this Period: 12.50

C.
Full Name (Last, First, Middle Initial)
Erin Carlson
Mailing Address 1129 20th St NW #600
City: Washington State: DC Zip Code: 20036-3403
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 262.50
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1512
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 37.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Winthrop Cashdollar
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director; Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 687.50
Date of Receipt: 10 15 2004
Transaction ID: 2004-10278
Amount of Each Receipt this Period: 62.50

B.
Full Name (Last, First, Middle Initial)
Winthrop Cashdollar
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director; Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 687.50
Date of Receipt: 10 31 2004
Transaction ID: 2004-10170
Amount of Each Receipt this Period: 62.50

C.
Full Name (Last, First, Middle Initial)
Winthrop Cashdollar
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director; Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 687.50
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1534
Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 187.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Yvonne Chenetry
Mailing Address 1276 N Wayne St
City: Arlington | State: VA | Zip Code: 22201-5848
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 887.50

Date of Receipt: 10 15 2004
Transaction ID: 2004-10279
Amount of Each Receipt this Period: 62.50

B.
Full Name (Last, First, Middle Initial)
Yvonne Chenetry
Mailing Address 1276 N Wayne St
City: Arlington | State: VA | Zip Code: 22201-5848
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 887.50

Date of Receipt: 10 31 2004
Transaction ID: 2004-10171
Amount of Each Receipt this Period: 62.50

C.
Full Name (Last, First, Middle Initial)
Yvonne Chenetry
Mailing Address 1276 N Wayne St
City: Arlington | State: VA | Zip Code: 22201-5848
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 887.50

Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1511
Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ **187.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 54
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Carol Corcoran
Mailing Address 180 Beacon Street Apt. 12A
City: Boston State: MA Zip Code: 02116-1408
FEC ID number of contributing federal political committee: C
Name of Employer: Tufts Health Plan
Occupation: Information Requested
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 19 2004
Transaction ID: 6956140502143717587
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Gregory Dean
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director; Insurance Educatio
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 687.50
Date of Receipt: 10 15 2004
Transaction ID: 2004-10280
Amount of Each Receipt this Period: 62.50

C.
Full Name (Last, First, Middle Initial)
Gregory Dean
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director; Insurance Educatio
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 687.50
Date of Receipt: 10 31 2004
Transaction ID: 2004-10172
Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 625.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Gregory Dean
Mailing Address: 801 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director, Insurance Educatio
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 687.50
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1552
Amount of Each Receipt this Period: 62.50

B.
Full Name (Last, First, Middle Initial): Jill Dowell
Mailing Address: 1313 E Abingdon Dr
City: Alexandria State: VA Zip Code: 22314-1156
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 875.07
Date of Receipt: 10 15 2004
Transaction ID: 2004-10282
Amount of Each Receipt this Period: 41.67

C.
Full Name (Last, First, Middle Initial): Jill Dowell
Mailing Address: 1313 E Abingdon Dr
City: Alexandria State: VA Zip Code: 22314-1156
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 875.07
Date of Receipt: 10 31 2004
Transaction ID: 2004-10174
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ..... ▶ **145.84**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Jill Dowell
Mailing Address: 1313 E Abingdon Dr
City: Alexandria | State: VA | Zip Code: 22314-1156
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP | Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 875.07
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1543
Amount of Each Receipt this Period: 41.67

B.
Full Name (Last, First, Middle Initial): Joanne Duncan
Mailing Address: 521D Gunpowder Rd
City: Fairfax | State: VA | Zip Code: 22030-6503
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP | Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 530.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10283
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): Joanne Duncan
Mailing Address: 521D Gunpowder Rd
City: Fairfax | State: VA | Zip Code: 22030-6503
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP | Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 530.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10175
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **101.67**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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(check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Joanne Duncan
Mailing Address 521D Gunpowder Rd
City: Fairfax State: VA Zip Code: 22030-6503
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 530.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1553
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial)
Stephen Erkenbrack
Mailing Address 103D Lakeside Court
City: Grand Junction State: CO Zip Code: 81506
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: VP; Legal Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-92934817075730
Amount of Each Receipt this Period: 500.00
contribution

C.
Full Name (Last, First, Middle Initial)
Brian Fraley
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10285
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 655.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 54
(check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Brian Fraley
Mailing Address: 601 Penn Ave NW
City: Washington | State: DC | Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10177
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial): Brian Fraley
Mailing Address: 601 Penn Ave NW
City: Washington | State: DC | Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1528
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial): Jeffrey Gebardi
Mailing Address: 601 Penn Ave NW
City: Washington | State: DC | Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: SVP; Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10286
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 375.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 54
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Jeffrey Gebardi
Mailing Address 801 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: SVP; Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10178
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Jeffrey Gebardi
Mailing Address 801 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: SVP; Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1375.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1535
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial)
Robert Gedola
Mailing Address 9597 Bennett Place
City: Eden Prairie State: MN Zip Code: 55347
FEC ID number of contributing federal political committee: C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 05 2004
Transaction ID: B4881B0502143670140
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
E. Giambra
Mailing Address 23530 Wisteria Pointe Drive #402
City: Bonita Springs State: FL Zip Code: 34135
FEC ID number of contributing federal political committee: C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 20 2004
Transaction ID: 99389-86167544126511
Amount of Each Receipt this Period: 1000.00
contribution

B.
Full Name (Last, First, Middle Initial)
Richard Hallworth
Mailing Address 4 Dana Rd
City: Boxford State: MA Zip Code: 01921-2661
FEC ID number of contributing federal political committee: C
Name of Employer: Tufts Health Plan
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-97814577617917
Amount of Each Receipt this Period: 500.00
contribution

C.
Full Name (Last, First, Middle Initial)
C. Taney Hamill
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP; Corporate Development
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 333.33
Date of Receipt: 10 15 2004
Transaction ID: 43481D0502175204633
Amount of Each Receipt this Period: 166.67

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1666.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Timothy Holt
Mailing Address: 111 Fallview Road
City: Glastonbury State: CT Zip Code: 06033
FEC ID number of contributing federal political committee: C
Name of Employer: Aetna; Inc.
Occupation: SVP; CIO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 17 2004
Transaction ID: 06183804111853793 47
Amount of Each Receipt this Period: 1000.00
Contribution

B.
Full Name (Last, First, Middle Initial): Joni Hong
Mailing Address: 2943 S Dinwiddie St
City: Arlington State: VA Zip Code: 22206-1455
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 302.10
Date of Receipt: 10 15 2004
Transaction ID: 2004-10289
Amount of Each Receipt this Period: 20.83

C.
Full Name (Last, First, Middle Initial): Joni Hong
Mailing Address: 2943 S Dinwiddie St
City: Arlington State: VA Zip Code: 22206-1455
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 302.10
Date of Receipt: 10 31 2004
Transaction ID: 2004-10181
Amount of Each Receipt this Period: 20.83

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 54
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Joni Hong
Mailing Address: 2943 S Dinwiddie St
City: Arlington | State: VA | Zip Code: 22206-1455
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 302.10
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1523
Amount of Each Receipt this Period: 20.83

B.
Full Name (Last, First, Middle Initial): John Hopkins
Mailing Address: 1360 Chipeta Avenue
City: Grand Junction | State: CO | Zip Code: 81501-4438
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: President and CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-331493556499948
Amount of Each Receipt this Period: 2000.00
contribution

C.
Full Name (Last, First, Middle Initial): Donna Horoschak
Mailing Address: 10301 Grosvenor Pl #901
City: Rockville | State: MD | Zip Code: 20852-4885
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 854.13
Date of Receipt: 10 15 2004
Transaction ID: 2004-10290
Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2083.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Donna Horoschak
Mailing Address 10301 Grosvenor Pl #901
City: Rockville State: MD Zip Code: 20852-4685
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 854.13
Date of Receipt: 10 31 2004
Transaction ID: 2004-10182
Amount of Each Receipt this Period: 62.50

B.
Full Name (Last, First, Middle Initial)
Donna Horoschak
Mailing Address 10301 Grosvenor Pl #901
City: Rockville State: MD Zip Code: 20852-4685
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 854.13
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1532
Amount of Each Receipt this Period: 62.50

C.
Full Name (Last, First, Middle Initial)
Thomas Kilian
Mailing Address 10550 Hussey Lane
City: Carmel State: IN Zip Code: 46032
FEC ID number of contributing federal political committee: C
Name of Employer: Ceres Group
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 10 20 2004
Transaction ID: 89389-34940737485885
Amount of Each Receipt this Period: 2000.00
contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2125.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Jon Kingsdale
Mailing Address: 131 Dunster Rd
City: Jamaica Plain | State: MA | Zip Code: 02130-2733
FEC ID number of contributing federal political committee: C
Name of Employer: Tufts Health Plan
Occupation: Senior VP
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-21041506528854
Amount of Each Receipt this Period: 500.00
contribution

B.
Full Name (Last, First, Middle Initial): Scott Kipper
Mailing Address: 1215 W Slaughter Ln Apt 713
City: Austin | State: TX | Zip Code: 78748
FEC ID number of contributing federal political committee: C
Name of Employer: America's Health Insurance Plans
Occupation: Senior Regional Director State Affairs
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 244.64
Date of Receipt: 10 15 2004
Transaction ID: 2004-10292
Amount of Each Receipt this Period: 22.24

C.
Full Name (Last, First, Middle Initial): Scott Kipper
Mailing Address: 1215 W Slaughter Ln Apt 713
City: Austin | State: TX | Zip Code: 78748
FEC ID number of contributing federal political committee: C
Name of Employer: America's Health Insurance Plans
Occupation: Senior Regional Director State Affairs
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 244.64
Date of Receipt: 10 31 2004
Transaction ID: 2004-10184
Amount of Each Receipt this Period: 22.24

SUBTOTAL of Receipts This Page (optional) ..... ▶ **544.48**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Scott Kipper
Mailing Address: 1215 W Slaughter Ln, Apt 713
City: Austin | State: TX | Zip Code: 78748
FEC ID number of contributing federal political committee: C
Name of Employer: America's Health Insurance Plans
Occupation: Senior Regional Director State Affairs
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 244.64
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1529
Amount of Each Receipt this Period: 22.24

B.
Full Name (Last, First, Middle Initial): Tony Lamb
Mailing Address: 713 N Cleveland St
City: Arlington | State: VA | Zip Code: 22201-1911
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 218.82
Date of Receipt: 10 31 2004
Transaction ID: 2004-10185
Amount of Each Receipt this Period: 10.42

C.
Full Name (Last, First, Middle Initial): Tony Lamb
Mailing Address: 713 N Cleveland St
City: Arlington | State: VA | Zip Code: 22201-1911
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 218.82
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-154
Amount of Each Receipt this Period: 10.42

SUBTOTAL of Receipts This Page (optional) ..... ▶ 43.08

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Barbara Lardy
Mailing Address: 1129 20th St NW #600
City: Washington State: DC Zip Code: 20036-3403
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 588.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10295
Amount of Each Receipt this Period: 28.00

B.
Full Name (Last, First, Middle Initial): Barbara Lardy
Mailing Address: 1129 20th St NW #600
City: Washington State: DC Zip Code: 20036-3403
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 588.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10187
Amount of Each Receipt this Period: 28.00

C.
Full Name (Last, First, Middle Initial): Barbara Lardy
Mailing Address: 1129 20th St NW #600
City: Washington State: DC Zip Code: 20036-3403
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 588.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1537
Amount of Each Receipt this Period: 28.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **84.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Daniel Leonard
Mailing Address 1633 Ardsley Pl
City: Crofton State: MD Zip Code: 21114-2016
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2708.33
Date of Receipt: 10 15 2004
Transaction ID: 2004-10297
Amount of Each Receipt this Period: 208.33

B.
Full Name (Last, First, Middle Initial)
Daniel Leonard
Mailing Address 1633 Ardsley Pl
City: Crofton State: MD Zip Code: 21114-2016
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2708.33
Date of Receipt: 10 31 2004
Transaction ID: 2004-10189
Amount of Each Receipt this Period: 208.33

C.
Full Name (Last, First, Middle Initial)
Daniel Leonard
Mailing Address 1633 Ardsley Pl
City: Crofton State: MD Zip Code: 21114-2016
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Senior VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2708.33
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1514
Amount of Each Receipt this Period: 208.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ 624.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Frank Lessen
Mailing Address: 11208 Minstrel Tune Dr
City: Germantown | State: MD | Zip Code: 20876-6304
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP | Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1104.20
Date of Receipt: 10 15 2004
Transaction ID: 2004-10298
Amount of Each Receipt this Period: 62.50

B.
Full Name (Last, First, Middle Initial): Frank Lessen
Mailing Address: 11208 Minstrel Tune Dr
City: Germantown | State: MD | Zip Code: 20876-6304
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP | Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1104.20
Date of Receipt: 10 31 2004
Transaction ID: 2004-10190
Amount of Each Receipt this Period: 62.50

C.
Full Name (Last, First, Middle Initial): Frank Lessen
Mailing Address: 11208 Minstrel Tune Dr
City: Germantown | State: MD | Zip Code: 20876-6304
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP | Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1104.20
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1548
Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ **187.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Laurel Mace-Walters
Mailing Address 15170 E. Walsh Pl.
City: Aurora State: CO Zip Code: 80012
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-82656496763230
Amount of Each Receipt this Period: 500.00
contribution

B.
Full Name (Last, First, Middle Initial)
Robert Menkes
Mailing Address 4815 North Park Ave.
City: Chevy Chase State: MD Zip Code: 20815
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1104.20
Date of Receipt: 10 15 2004
Transaction ID: 2004-10303
Amount of Each Receipt this Period: 62.50

C.
Full Name (Last, First, Middle Initial)
Robert Menkes
Mailing Address 4815 North Park Ave.
City: Chevy Chase State: MD Zip Code: 20815
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1104.20
Date of Receipt: 10 31 2004
Transaction ID: 2004-10195
Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 625.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Robert Menkes
Mailing Address 4615 North Park Ave.
City: Chevy Chase State: MD Zip Code: 20815
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1104.20
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1528
Amount of Each Receipt this Period: 62.50

B.
Full Name (Last, First, Middle Initial)
Anthony Meoni
Mailing Address 14125 Clarksville Pike
City: Highland State: MD Zip Code: 20777-9524
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.50
Date of Receipt: 10 31 2004
Transaction ID: 2004-10196
Amount of Each Receipt this Period: 10.50

C.
Full Name (Last, First, Middle Initial)
Anthony Meoni
Mailing Address 14125 Clarksville Pike
City: Highland State: MD Zip Code: 20777-9524
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.50
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1554
Amount of Each Receipt this Period: 10.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 83.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 54
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Marcus Merz
Mailing Address 11048 Amen Circle NE
City: Blaine State: MN Zip Code: 55449
FEC ID number of contributing federal political committee: C
Name of Employer: PreferredOne
Occupation: President/CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 10 20 2004
Transaction ID: 99389-70721071958542
Amount of Each Receipt this Period: 1000.00
contribution

B.
Full Name (Last, First, Middle Initial)
Kathleen Masel
Mailing Address 10027 Ezra Court
City: Twinsburg State: OH Zip Code: 44087
FEC ID number of contributing federal political committee: C
Name of Employer: Central Reserve Life Insurance Company
Occupation: EVP and General Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 10 20 2004
Transaction ID: 99389-82705324888230
Amount of Each Receipt this Period: 1000.00
contribution

C.
Full Name (Last, First, Middle Initial)
Mark Nielsen
Mailing Address 9509 W. 115th Street
City: Overland Park State: KS Zip Code: 66210
FEC ID number of contributing federal political committee: C
Name of Employer: Continental General Insurance Group
Occupation: EVP
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 10 20 2004
Transaction ID: 99389-70868030454636
Amount of Each Receipt this Period: 1000.00
contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Dennis Dakes
Mailing Address 210 W. Rittenhouse Sqare
Apt. 1601
City: Philadelphia State: PA Zip Code: 19103-5774
FEC ID number of contributing federal political committee: C
Name of Employer: Aetna Inc.
Occupation: VP; Public Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 17 2004
Transaction ID: 3854500411185440957
Amount of Each Receipt this Period: 1000.00
Contribution

B.
Full Name (Last, First, Middle Initial)
Susan Pisano
Mailing Address 5510 Lincoln St
City: Bethesda State: MD Zip Code: 20817-3724
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1516.63
Date of Receipt: 10 15 2004
Transaction ID: 2004-10306
Amount of Each Receipt this Period: 83.33

C.
Full Name (Last, First, Middle Initial)
Susan Pisano
Mailing Address 5510 Lincoln St
City: Bethesda State: MD Zip Code: 20817-3724
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1516.63
Date of Receipt: 10 31 2004
Transaction ID: 2004-10198
Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1166.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Susan Pisano
Mailing Address 551D Lincoln St
City: Bethesda State: MD Zip Code: 20817-3724
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1516.63
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-151
Amount of Each Receipt this Period: 83.33

B.
Full Name (Last, First, Middle Initial)
Richard Ramsey
Mailing Address 1276 N Wayne St
City: Arlington State: VA Zip Code: 22201-5848
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1749.93
Date of Receipt: 10 15 2004
Transaction ID: 2004-10308
Amount of Each Receipt this Period: 83.33

C.
Full Name (Last, First, Middle Initial)
Richard Ramsey
Mailing Address 1276 N Wayne St
City: Arlington State: VA Zip Code: 22201-5848
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1749.93
Date of Receipt: 10 31 2004
Transaction ID: 2004-10200
Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ 249.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Richard Ramsay
Mailing Address 1276 N Wayne St
City: Arlington State: VA Zip Code: 22201-5848
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy General Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1749.93
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1525
Amount of Each Receipt this Period: 83.33

B.
Full Name (Last, First, Middle Initial)
Ingrid Reeves
Mailing Address 2822 Jutland Rd
City: Kensington State: MD Zip Code: 20895-2840
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 231.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10309
Amount of Each Receipt this Period: 11.00

C.
Full Name (Last, First, Middle Initial)
Ingrid Reeves
Mailing Address 2822 Jutland Rd
City: Kensington State: MD Zip Code: 20895-2840
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 231.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10201
Amount of Each Receipt this Period: 11.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **105.33**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Ingrid Reeves
Mailing Address 2822 Jutland Rd
City: Kensington State: MD Zip Code: 20895-2840
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 231.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1547
Amount of Each Receipt this Period: 11.00

B.
Full Name (Last, First, Middle Initial)
Janice Rohr
Mailing Address 696 Moonridge Circle
City: Grand Junction State: CO Zip Code: 81505
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: VP; Human Resources
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 01 2004
Transaction ID: 69389-73540896177292
Amount of Each Receipt this Period: 400.00
contribution

C.
Full Name (Last, First, Middle Initial)
James Roosevelt
Mailing Address 333 Wyman St
City: Waltham State: MA Zip Code: 02451-1209
FEC ID number of contributing federal political committee: C
Name of Employer: Tufts Health Plan
Occupation:
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 19 2004
Transaction ID: 20101105021437725485
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 661.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Lisa Shreve
Mailing Address 12149 Darnley Rd
City: Woodbridge State: VA Zip Code: 22192-6615
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 218.82
Date of Receipt: 10 31 2004
Transaction ID: 2004-10203
Amount of Each Receipt this Period: 10.42

B.
Full Name (Last, First, Middle Initial)
Lisa Shreve
Mailing Address 12149 Darnley Rd
City: Woodbridge State: VA Zip Code: 22192-6615
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 218.82
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-156
Amount of Each Receipt this Period: 10.42

C.
Full Name (Last, First, Middle Initial)
Joel Steckman
Mailing Address 1533 W Lombard St
City: Baltimore State: MD Zip Code: 21223-2438
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 208.40
Date of Receipt: 10 31 2004
Transaction ID: 2004-10204
Amount of Each Receipt this Period: 10.42

SUBTOTAL of Receipts This Page (optional) ..... ▶ **31.26**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Scott Styles
Mailing Address 9 E del Ray Ave
City: Alexandria State: VA Zip Code: 22301-1423
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 3600.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10313
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
Scott Styles
Mailing Address 9 E del Ray Ave
City: Alexandria State: VA Zip Code: 22301-1423
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 3600.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10205
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial)
Scott Styles
Mailing Address 9 E del Ray Ave
City: Alexandria State: VA Zip Code: 22301-1423
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Executive Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 3600.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1540
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 900.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
James Sweeze
Mailing Address 9082 Jimson Weed Way
City: Highland Ranch State: CO Zip Code: 80126-2670
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: VP and General Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-75594729185105
Amount of Each Receipt this Period: 500.00
contribution

B.
Full Name (Last, First, Middle Initial)
Jeffrey Tindall
Mailing Address 601 Pennsylvania Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: State Regional Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 208.30
Date of Receipt: 10 31 2004
Transaction ID: 2004-10207
Amount of Each Receipt this Period: 20.83

C.
Full Name (Last, First, Middle Initial)
Patricia Trebino
Mailing Address 142 Manning St
City: Needham State: MA Zip Code: 02494-1541
FEC ID number of contributing federal political committee: C
Name of Employer: Tufts Health Plan
Occupation:
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-41568103698823
Amount of Each Receipt this Period: 500.00
contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1020.83**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Roderick Turner
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP; Product Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 833.30
Date of Receipt: 10 15 2004
Transaction ID: 2004-10316
Amount of Each Receipt this Period: 83.33

B.
Full Name (Last, First, Middle Initial)
Roderick Turner
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP; Product Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 833.30
Date of Receipt: 10 31 2004
Transaction ID: 2004-10208
Amount of Each Receipt this Period: 83.33

C.
Full Name (Last, First, Middle Initial)
Roderick Turner
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: VP; Product Policy
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 833.30
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1536
Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ 249.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Mark Van Koevering
Mailing Address: 236 Manor Circle
City: Takoma Park State: MD Zip Code: 20912
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 820.00
Date of Receipt: 10 15 2004
Transaction ID: 2004-10317
Amount of Each Receipt this Period: 45.00

B.
Full Name (Last, First, Middle Initial): Mark Van Koevering
Mailing Address: 236 Manor Circle
City: Takoma Park State: MD Zip Code: 20912
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 820.00
Date of Receipt: 10 31 2004
Transaction ID: 2004-10209
Amount of Each Receipt this Period: 45.00

C.
Full Name (Last, First, Middle Initial): Mark Van Koevering
Mailing Address: 236 Manor Circle
City: Takoma Park State: MD Zip Code: 20912
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Deputy Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 920.00
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1541
Amount of Each Receipt this Period: 45.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **135.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
David Vickers
Mailing Address 197 Lawndale Avenue
City: Elmhurst State: IL Zip Code: 60126
FEC ID number of contributing federal political committee: C
Name of Employer: Central Reserve Life Insurance Company
Occupation: EVP; CFO & Treasurer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 20 2004
Transaction ID: 99389-12996037778854
Amount of Each Receipt this Period: 1000.00
contribution

B.
Full Name (Last, First, Middle Initial)
Kelly Vogel
Mailing Address 601 Pennsylvania Ave NW South Building; Suite 500
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director Federal Affairs
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 229.13
Date of Receipt: 10 31 2004
Transaction ID: 2004-10210
Amount of Each Receipt this Period: 20.83

C.
Full Name (Last, First, Middle Initial)
Kelly Vogel
Mailing Address 601 Pennsylvania Ave NW South Building; Suite 500
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director Federal Affairs
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 229.13
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1544
Amount of Each Receipt this Period: 20.83

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Eric Weber
Mailing Address 2711 Jenifer St NW
City: Washington State: DC Zip Code: 20015-1333
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1066.63
Date of Receipt: 10 15 2004
Transaction ID: 2004-10319
Amount of Each Receipt this Period: 83.33

B.
Full Name (Last, First, Middle Initial)
Eric Weber
Mailing Address 2711 Jenifer St NW
City: Washington State: DC Zip Code: 20015-1333
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1066.63
Date of Receipt: 10 31 2004
Transaction ID: 2004-10211
Amount of Each Receipt this Period: 83.33

C.
Full Name (Last, First, Middle Initial)
Eric Weber
Mailing Address 2711 Jenifer St NW
City: Washington State: DC Zip Code: 20015-1333
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1066.63
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1551
Amount of Each Receipt this Period: 83.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ **249.99**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Robert Wehmeyer
Mailing Address 1821 Kalorama Rd NW
City: Washington State: DC Zip Code: 20009-5188
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Legislative Specialist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 241.70
Date of Receipt: 10 15 2004
Transaction ID: 2004-10320
Amount of Each Receipt this Period: 12.50

B.
Full Name (Last, First, Middle Initial)
Robert Wehmeyer
Mailing Address 1821 Kalorama Rd NW
City: Washington State: DC Zip Code: 20009-5188
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Legislative Specialist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 241.70
Date of Receipt: 10 31 2004
Transaction ID: 2004-10212
Amount of Each Receipt this Period: 12.50

C.
Full Name (Last, First, Middle Initial)
Robert Wehmeyer
Mailing Address 1821 Kalorama Rd NW
City: Washington State: DC Zip Code: 20009-5188
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Legislative Specialist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 241.70
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1545
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ 37.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 54
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Kathryn Wilber
Mailing Address 500 Lymington Rd
City: Severna Park | State: MD | Zip Code: 21146-3541
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Special Projects
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 218.82
Date of Receipt: 10 31 2004
Transaction ID: 2004-10213
Amount of Each Receipt this Period: 10.42

B.
Full Name (Last, First, Middle Initial)
Kathryn Wilber
Mailing Address 500 Lymington Rd
City: Severna Park | State: MD | Zip Code: 21146-3541
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Special Projects
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 218.82
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1520
Amount of Each Receipt this Period: 10.42

C.
Full Name (Last, First, Middle Initial)
Thomas Wilder
Mailing Address 8811 Colesville Rd
City: Silver Spring | State: MD | Zip Code: 20910-4343
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Exec. Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 437.43
Date of Receipt: 10 15 2004
Transaction ID: 2004-10322
Amount of Each Receipt this Period: 20.83

SUBTOTAL of Receipts This Page (optional) ..... ▶ **41.67**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 54
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Thomas Wilder
Mailing Address 8811 Colesville Rd
City: Silver Spring State: MD Zip Code: 20910-4343
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Exec. Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 437.43
Date of Receipt: 10 31 2004
Transaction ID: 2004-10214
Amount of Each Receipt this Period: 20.83

B.
Full Name (Last, First, Middle Initial)
Thomas Wilder
Mailing Address 8811 Colesville Rd
City: Silver Spring State: MD Zip Code: 20910-4343
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Exec. Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 437.43
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1521
Amount of Each Receipt this Period: 20.83

C.
Full Name (Last, First, Middle Initial)
Ronald Williams
Mailing Address 151 Farmington Avenue
City: Hartford State: CT Zip Code: 06156-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Aetna Inc.
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 17 2004
Transaction ID: 6608610411185414821
Amount of Each Receipt this Period: 1000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 54
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Bruce Wilson
Mailing Address 124 Santa Fe Drive
City: Grand Junction State: CO Zip Code: 81501
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: Medical Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 01 2004
Transaction ID: 99389-04414004087448
Amount of Each Receipt this Period: 500.00
contribution

B.
Full Name (Last, First, Middle Initial)
Robert Wilson
Mailing Address PO Box 80221
City: Grand Junction State: CO Zip Code: 81506
FEC ID number of contributing federal political committee: C
Name of Employer: Rocky Mountain HMO
Occupation: AVP
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 11 17 2004
Transaction ID: 2619480411185449449
Amount of Each Receipt this Period: 2500.00
Contribution

C.
Full Name (Last, First, Middle Initial)
Joseph Winn
Mailing Address 601 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Regional Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 458.37
Date of Receipt: 10 15 2004
Transaction ID: 2004-10323
Amount of Each Receipt this Period: 41.67

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3041.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 54
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Joseph Winn
Mailing Address 801 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Regional Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 458.37
Date of Receipt: 10 31 2004
Transaction ID: 2004-10215
Amount of Each Receipt this Period: 41.67

B.
Full Name (Last, First, Middle Initial)
Joseph Winn
Mailing Address 801 Penn Ave NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: AHIP
Occupation: Regional Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 458.37
Date of Receipt: 11 15 2004
Transaction ID: 2004-11-1531
Amount of Each Receipt this Period: 41.67

C.
Full Name (Last, First, Middle Initial)
Bradley Wolfram
Mailing Address 612 Coventry Place
City: Amherst State: OH Zip Code: 44001
FEC ID number of contributing federal political committee: C
Name of Employer: Ceres Group
Occupation: EVP; COO Medical Segment
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 20 2004
Transaction ID: 89389-89518374204636
Amount of Each Receipt this Period: 1000.00
contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1083.34**

TOTAL This Period (last page this line number only) ..... ▶ **30681.77**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 54
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A. Full Name (Last, First, Middle Initial)
Wellpoint Inc. Wellpac

Mailing Address 120 Monument Circle

City: Indianapolis
State: IN
Zip Code: 46204

FEC ID number of contributing federal political committee. C C00197228

Name of Employer

Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 05 2004

Transaction ID: 00866105021439844971

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5000.00

TOTAL This Period (last page this line number only) ..... ▶ 5000.00

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Riggs National Bank

Mailing Address 1913 Massachusetts Ave; NW

City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement: Bank Fee

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 2351030502143587774
Date of Disbursement: 11/03/2004

Amount of Each Disbursement this Period: 53.37

B.
Full Name (Last, First, Middle Initial)
Riggs National Bank

Mailing Address 1913 Massachusetts Ave; NW

City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement: Bank Fee

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 6751820502143752842
Date of Disbursement: 11/05/2004

Amount of Each Disbursement this Period: 1.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	54.37
TOTAL This Period (last page this line number only) ..... ▶	54.37

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Friends of Chris Dodd 2004
Mailing Address: PO Box 270701
City: West Hartford | State: CT | Zip Code: 06127
Purpose of Disbursement: 2004 General
Candidate Name: Dodd Christopher
Category/Type
Office Sought: House / X Senate / President
State: CT District: 00
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: D805620410224383780
Date of Disbursement: 10 / 22 / 2004
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): Heather Wilson for Congress
Mailing Address: PO Box 14070 PO Box 14070
City: Albuquerque | State: NM | Zip Code: 87191
Purpose of Disbursement: 2004 General
Candidate Name: Wilson Heather
Category/Type
Office Sought: X House / Senate / President
State: NM District: 01
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: 2850150410193457154
Date of Disbursement: 10 / 19 / 2004
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Hooley for Congress
Mailing Address: PO Box 2050
City: Salem | State: OR | Zip Code: 97308
Purpose of Disbursement: 2004 General
Candidate Name: Hooley Darlene
Category/Type
Office Sought: X House / Senate / President
State: OR District: 05
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: 1813430410193460031
Date of Disbursement: 10 / 19 / 2004
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

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

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Matheson for Congress
Mailing Address: 677 South 200 West, Suite A
City: Salt Lake City | State: UT | Zip Code: 84101
Purpose of Disbursement: 2004 General
Candidate Name: Matheson Jim
Category/Type
Office Sought: X House / Senate / President
State: UT District: 02
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: B056690410193457979
Date of Disbursement: 10 / 19 / 2004
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Meeks for Congress
Mailing Address: 219-10 South Conduit Avenue, 219-10 South Conduit Avenue
City: Springfield Garden | State: NY | Zip Code: 11413
Purpose of Disbursement: 2004 General
Candidate Name: Meeks Gregory
Category/Type
Office Sought: X House / Senate / President
State: NY District: 06
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: 3329690410193458639
Date of Disbursement: 10 / 19 / 2004
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Porter for Congress
Mailing Address: PO Box 26087
City: Las Vegas | State: NV | Zip Code: 89126
Purpose of Disbursement: 2004 General
Candidate Name: Porter Jon
Category/Type
Office Sought: X House / Senate / President
State: NV District: 03
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: 4407720410193456228
Date of Disbursement: 10 / 19 / 2004
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Rangel for Congress
Mailing Address: PO Box 5577, Manhattanville Station
City: New York | State: NY | Zip Code: 10027
Purpose of Disbursement: 2004 General
Candidate Name: Rangel Charles
Category/Type
Office Sought: X House / Senate / President
State: NY District: 15
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: B711050410258483082
Date of Disbursement: 10 / 25 / 2004
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Re-Elect Harold Ford
Mailing Address: 5120 Barry Road, Suite 1300
City: Memphis | State: TN | Zip Code: 38117
Purpose of Disbursement: 2004 General
Candidate Name: Ford Harold
Category/Type
Office Sought: X House / Senate / President
State: TN District: 09
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: 327336041014439427 0
Date of Disbursement: 10 / 14 / 2004
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Schultz Debbie Wasserman
Mailing Address: 4479 Foxglove Lane
City: Weston | State: FL | Zip Code: 33331
Purpose of Disbursement: 2004 General
Candidate Name: Schultz Wasserman Debbie
Category/Type
Office Sought: X House / Senate / President
State: FL District: 20
Disbursement For: 2004 / Primary / X General / Other (specify)
Transaction ID: 1293710410144395158
Date of Disbursement: 10 / 14 / 2004
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	3000.00
TOTAL This Period (last page this line number only) ..... ▶	11000.00

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)

21b	22	23	24	25	26
27	28a	28b	28c	X 29	30b

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Committee to Elect Hugh Holliman

Mailing Address 102 Warrior Way

City: Lexington | State: NC | Zip Code: 27295

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 4923490410264233470
Date of Disbursement: 10 / 26 / 2004

Amount of Each Disbursement this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Committee to Re-elect Senator Tony Rand

Mailing Address 2014 Litho Pl.

City: Fayetteville | State: NC | Zip Code: 28304

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 2915790410264234291
Date of Disbursement: 10 / 26 / 2004

Amount of Each Disbursement this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Harold J. Brubaker Committee

Mailing Address 312 W. Salisbury St.

City: Asheboro | State: NC | Zip Code: 27203

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: 3909480410264232150
Date of Disbursement: 10 / 26 / 2004

Amount of Each Disbursement this Period: 250.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **750.00**

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

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial): Marc Basnight Campaign
Mailing Address: P.O. Box 302
City: Manteo | State: NC | Zip Code: 27954
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D293140410264235422
Date of Disbursement: 10 / 26 / 2004
Amount of Each Disbursement this Period: 250.00

B.
Full Name (Last, First, Middle Initial): Representative Jere Hargrove
Mailing Address: 761 Loweland Road
City: Cookeville | State: TN | Zip Code: 38501
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: 1818170410264206288
Date of Disbursement: 11 / 03 / 2004
Amount of Each Disbursement this Period: 500.00

C.
Full Name (Last, First, Middle Initial): Senate Democratic Caucus
Mailing Address: 5 Legislative Plaza
City: Nashville | State: TN | Zip Code: 37243
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: 9177050410264195391
Date of Disbursement: 11 / 03 / 2004
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1250.00**

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

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Senator Jerry Cooper

Mailing Address 175 Faith Rae Blvd.

City: Morrison | State: TN | Zip Code: 37357

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: B4795104102841963 70
Date of Disbursement: 11 / 03 / 2004

Amount of Each Disbursement this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Speaker Jimmy Naifeh

Mailing Address P.O. Box 97

City: Covington | State: TN | Zip Code: 38019

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9409304102842070 98
Date of Disbursement: 11 / 03 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	1500.00
TOTAL This Period (last page this line number only) ..... ▶	3500.00