PAGE 1 / 186

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

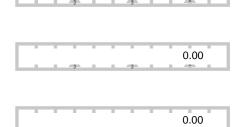
	For Other Than An Ai	utilorizea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Health Underwriters P	olitical Action Comm	nittee	
ADDRESS (number and street)	1212 New York Ave		
▼ Check if different	Suite 1100		
than previously reported. (ACC)	Washington		DC 20005 -
2. FEC IDENTIFICATION N	UMBER ▼	DITY A	STATE ▲ ZIP CODE ▲
C C00283135	3.	IS THIS REPORT X (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	eb 20 (M2) May 20 (May 20 (May 20 (May 20 (M3) Jun 20 (M3)	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (0	01)	pr 20 (M4) Jul 20 (M	
July 15 Quarterly Report (0	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	Flor	otion on	in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	(d) 30-Day POST-Election Report for the:	. (333)	Runoff (30R) Special (30S)
Termination Report (TER)	·	etion on 11 03	in the State of
5. Covering Period 10			M / D D / Y Y Y Y Y Z Z Z Z Z Z Z Z Z Z Z Z Z Z
I certify that I have examined th	nis Report and to the best Murphy, Jennifer, , ,	of my knowledge and belief it is	s true, correct and complete.
Type or Print Name of Treasure			
Signature of Treasurer	ohy, Jennifer, , ,	[Electronically Filed]	Date 12 / 03 / 2020
NOTE: Submission of false, erron	eous, or incomplete informa	tion may subject the person signing	ng this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Health Underwriters Political Action Committee 10 15 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 381415.46 January 1, 2020 (b) Cash on Hand at 243599.58 Beginning of Reporting Period..... 50055.67 490858.84 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 872274.30 293655.25 6(a) and 6(c) for Column B)..... 28399.29 607018.34 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 265255.96 265255.96 (subtract Line 7 from Line 6(d)).....

Debts and Obligations Owed **TO** the Committee (Itemize all on
 Schedule C and/or Schedule D)

10. Debts and Obligations Owed **BY**the Committee (Itemize all on
Schedule C and/or Schedule D)......



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. 05/2016)

Write or Type Committee Name

Health Underwriters Political Action Committee

10 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 36204.17 297400.17 (i) Itemized (use Schedule A)..... 9851.50 182458.67 (ii) Unitemized (iii) TOTAL (add 479858.84 46055.67 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 479858.84 46055.67 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 4000.00 11000.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))......▶ 490858.84 50055.67 20. Total Federal Receipts 50055.67 490858.84 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal		- Calondal Toul-to-Date
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	1399.29	14167.34
(c) Total Operating Expenditures	4000.00	14467.24
(add 21(a)(i), (a)(ii), and (b))	1399.29	14167.34
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	27000.00	589500.00
Independent Expenditures	0.00	0.00
(use Schedule E)	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeTo:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	3351.00
(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	3351.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 301) (a) Allocated Federal Election Activity (from Schedule H6)	01(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	4 4	
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28399.29	607018.34
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	28399.29	607018.34
	2000.20	007010.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	or disbursements	Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46055.67	479858.84
34. Total Contribution Refunds (from Line 28(d))	0.00	3351.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46055.67	476507.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1399.29	14167.34
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1399.29	14167.34

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	6	OF	186
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hain, Erica, R.,, Date of Receipt Mailing Address MC 32-20 2020 100 North Academy Avenue 15 City Zip Code State Transaction ID: 15266460 PA Danville 17822-0001 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Director, Commercial Sales Geisinger Health Plan Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rider, Susan, M., MS, REBC, Date of Receipt Mailing Address 803 Touralosa Dr 10 15 2020 City State Zip Code Transaction ID: 15266463 Westfield IN 46074-7303 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preventia Group, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 806.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Bellman, Mark, , , Date of Receipt Mailing Address 9120 Branch Hollow Dr 10 15 2020 City State Zip Code Transaction ID: 15266464 TX Dallas 75243-7510 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 215.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hepscher, William, , , Date of Receipt Mailing Address 38168 Medical Center Avenue 2020 15 City Zip Code State Transaction ID: 15266465 FL Zephyrhills 33540-1380 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Canadian Medstore **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Easterling, Sy, , , Date of Receipt Mailing Address 213 Porter Ave 10 15 2020 City State Zip Code Transaction ID: 15266466 MS Biloxi 39530-2950 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stewart Sneed Hewes/BancorpSouth Insur Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Skinner, Douglas, , , Date of Receipt Mailing Address PO Box 1277 10 15 2020 City Zip Code State Transaction ID: 15266467 IN Bloomington 47402-1277 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hoosier Dental Plans Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the

				MBER	:	PAGE	8	OF	186
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hartmann, Chris, , , Date of Receipt Mailing Address 1212 New York Ave, Suite 1100 2020 15 City Zip Code State Transaction ID: 15266480 DC 20005-3987 Washington Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) NAHU staff Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Frankel, Teri, , , Date of Receipt Mailing Address 21820 Burbank Blvd 10 16 2020 Suite 300 City State Zip Code Transaction ID: 15267718 Woodland Hills CA 91367-6485 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leavitt Insurance Services of Los Ange Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Owens, David, Patrick, , Date of Receipt Mailing Address 101 Eisenhower Parkway 10 16 2020 Second Floor City State Zip Code Transaction ID: 15267721 NJ Roseland 07068-1032 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E.B. Cohen & Co., Inc. Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 1115.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	=	9	OF	186
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Biers, Danielle, , , Date of Receipt Mailing Address 3800 N. Central Ave., 9th Floor 2020 16 City Zip Code State Transaction ID: 15267724 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Douglas, James, F., , Date of Receipt Mailing Address 5721 Woodboro Dr 10 16 2020 City State Zip Code Transaction ID: 15267726 CA **Huntington Beach** 92649-4949 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Sync Insurance Vice President Employee Benefits Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sullivan, Audra, I., SGS, Date of Receipt Mailing Address 1201 N Watson Rd 10 16 2020 Ste 287 City State Zip Code Transaction ID: 15267728 TX Arlington 76006-6222 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vogue Insurance Agency, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)		H	-				-		_	_	_	_	
TOTAL This Period (last page this line number only)	SUBTOTAL of Receipts This Page (optional)	L			J.	_		J.	_	10	7.00	_	
	TOTAL This Period (last page this line number only)		Ξ	_	-	Ξ	_	-	_	_	-	<u>_</u>	

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	1	10	OF	•	186
(0	che	ck only	or	ıe)							
	X	11a		11b		11c		12			
		13		14		15		16			17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hynes, Bernard, J.,, Date of Receipt Mailing Address 3200 N. Central Ave. 2020 Suite 1170 16 City State Zip Code Transaction ID: 15267731 ΑZ Phoenix 85012-2419 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hynes Benefits Consulting, LLC Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Fanuele, Dominick, , , Date of Receipt Mailing Address 214 Little Falls Rd., 2nd Floor 10 16 2020 City State Zip Code Transaction ID: 15267732 Fairfield NJ 07004-2637 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fanuele Financial Group LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Marinelli, Aaron, M. J., , Date of Receipt Mailing Address 36711 American Way 10 17 2020 Suite 2F City State Zip Code Transaction ID: 15270474 OH Avon 44011-4061 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magis Advisory Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1190.00 Other (specify) 242.00 SUBTOTAL of Receipts This Page (optional).....

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

FOF	R LINE	NUN	MBER	:	PAGE	_ ′	11	OF	1	86
(che	ck only	one	e)							
×	11a		11b		11c		12			
	13		14		15		16	;		17

_				1.0
	ny information copied from such Reports and Stator commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Health Underwriters Political Act	ion Comm	nittee	
Α.	Full Name of Individual (Last, First, Middle Initially, Perry, J., ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 6340 South Western Ave Ste 120 City	State	Zip Code	10 17 2020 Transaction ID : 15270475
	Sioux Falls	SD	57108-3413	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer (for Individual) Pernell Insurance Agency, Inc.	Occupa	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 595.00	
В.	Full Name of Individual (Last, First, Middle Initi-King, Colleen, , , Mailing Address 8427 Beckford Ave.	al) or Full Orga	anization Name	Date of Receipt
	City	State	Zip Code	10 17 2020 Transaction ID : 15270477
	Northridge	CA	91324-4208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer (for Individual) Colleen King Insurance Agency, Inc.	I	ation (for Individual) der/Owner	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 420.00	
С.	Full Name of Individual (Last, First, Middle Initi Patton, Lee, $R.$,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 1112 Maple Street City	State	Zip Code	10 17 2020 Transaction ID : 15270478
	West Des Moines	IA	50265-4420	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) Associations Marketing Group, Inc.	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 300.00	
s	SUBTOTAL of Receipts This Page (optional)		····	157.00
т	OTAL This Period (last page this line number o	nly)		

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one)

186

for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

					13		14	15	16	17
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) Health Underwriters Political Ac										
Full Name of Individual (Last, First, Middle Initial Ramsay, Robert, Gene, , Mailing Address 1836 Harrison Drive	tial) or Full O	Organi	ization Name		Date o					
City	State		Zip Code		10		17	527047	2020 9	Y
Gardendale	AL		35071-3468						is Period	
FEC ID number of contributing federal political committee.	С					Ξ			30.0	0
Name of Employer (for Individual) Your Benefits Advisor		•	on (for Individual) Advisor		N	1emc	Item			
Receipt For: Primary General Other (specify) ▼	Aggregate			00						
Full Name of Individual (Last, First, Middle Initalian Tompkins, Daniel, R., JD, MBA, Mailing Address 1720 Windward Concourse	tial) or Full O	Organi	ization Name		Date o		eceipt	/ Y	. Y . Y .	Y
Suite 290	Ctoto		Zin Codo		10		17		2020	
City Alpharetta	State		Zip Code 30005-2291	-			on ID : 1) is Period	
FEC ID number of contributing federal political committee.	C					. 0.	- Lucii i i	Joseph un	85.0	0
Name of Employer (for Individual) Admin America, Inc.	Occi		on (for Individual)		N	1emc	Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼	00						
Full Name of Individual (Last, First, Middle Initalian). Bailey, Andrea, , ,	tial) or Full O	Organi	ization Name		Date o	of Re	eceipt			
Mailing Address 3800 North Central Ave 9th Floor City	State		Zip Code		10 Tran		17	J L	2020	Y
Phoenix	AZ		85012-1979						is Period	
FEC ID number of contributing federal political committee.	С							, , , , , , , , , , , , , , , , , , ,	30.0	0
Name of Employer (for Individual) Black, Gould & Associates		cupationsident	on (for Individual)		N	/lemo	Item			
Receipt For: Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 300.	00						
SUBTOTAL of Receipts This Page (optional)				······ >			,	,	145.0	0
TOTAL This Period (last page this line number	only)					Ξ	7	-		

186 FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Samuels, Cindy, , , Date of Receipt Mailing Address 8430 W Lake Mead #100 2020 18 City Zip Code State Transaction ID: 15270544 NV Las Vegas 89128-7674 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Concepts of Nevada Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buechler, Anthony, C., , Date of Receipt Mailing Address 13811 S 50TH ST 10 18 2020 City State Zip Code Transaction ID: 15270545 NE Papillion 68133-2908 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Buechler Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kidder, Sue, , , Date of Receipt Mailing Address 2700 Newport Blvd 10 18 2020 Ste 190 City State Zip Code Transaction ID: 15270551 CA Newport Beach 92663-3735 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sue Kidder Health & Insurance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

Other (specify)

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBE (check only one)

F	OR	LINE	NU	IMBER	:	PAGE	•	14	OF	186
(che	ck only	or	ne)						
	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Villagran, Denise, S., MBA, Date of Receipt Mailing Address 1016 Santa Fe St, #205 2020 18 City State Zip Code Transaction ID: 15270552 TX Corpus Christi 78404-2343 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Broker Entrust. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 995.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brooks, Mark, , , Date of Receipt Mailing Address P.O. Box 10876 10 2020 City State Zip Code Transaction ID: 15270635 VA 24506-0876 Lynchburg Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Personal Design Financial Services, In Broker Receipt For: Aggregate Year-to-Date ▼ Primary General

	7 7						
Full Name of Individual (Last, First, Middle Stewart, Rachel, , ,	Date of Receipt						
Mailing Address 18130 N 64th Dr W	Mailing Address 18130 N 64th Dr W						
City	State Zip Code	Transaction ID: 15270636					
Glendale	AZ 85308-1068	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	30.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
RS Assurance	Agent	_					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00						
SUBTOTAL of Receipts This Page (optional)) >	123.00					

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

300.00

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Powell, Rita, H.,, Date of Receipt Mailing Address 3342 Greystone Way 2020 19 City Zip Code State Transaction ID: 15270640 GA Valdosta 31605-1096 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) H&H Insurance Solutions, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Underhill, Charles, E., , Date of Receipt Mailing Address PO Box 626 10 2020 City State Zip Code Transaction ID: 15270643 Woodland Hills CA 91365-0626 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Underhill Insurance Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 266.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hall, Dwight, , CHC, LUTCF, Date of Receipt Mailing Address 6107 Hazelwood Ave. 10 20 2020 City State Zip Code Transaction ID: 15271600 IN Indianapolis 46228-1316 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) D Hall & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186 FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Aimee, , , Date of Receipt Mailing Address 3111 C Street, Suite 500 2020 10 20 City Zip Code State Transaction ID: 15271604 AK Anchorage 99503-3973 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) RISQ Consulting Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bartholomew, Rhonda, , CHRS, Date of Receipt Mailing Address PO Box 5099 10 2020 City State Zip Code Transaction ID: 15271606 ID Twin Falls 83303-5099 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HUB International **Group Division Manager** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Raymond, Garrin, Mitchell, , Date of Receipt Mailing Address 13201 N.W. Fwy. Suite 265 10 20 2020 City Zip Code State Transaction ID: 15271609 TX Houston 77040-6165 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest General Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186 FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Woodward, Thomas, Nathan,, Date of Receipt Mailing Address 430 West Bankhead Hwy 2020 City Zip Code State Transaction ID: 15272140 GA Villa Rica 30180-1701 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MY FINANCIAL SERVICES LLC Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Moore, Adrian, E.,, Date of Receipt Mailing Address 7936 Covey Chase Drive 10 2020 City State Zip Code Transaction ID: 15272142 NC Charlotte 28210-7231 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **IHC Specialty Benefits** Regional Sales Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Farrell, Jennifer, Liane, , Date of Receipt Mailing Address 3800 North Central Avenue 10 21 2020 9th Floor City State Zip Code Transaction ID: 15272144 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 925.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

F	OH	LINE	NU	MBER	PAGE	: '	18	OF	186	
(0	che	ck only	or	ne)						
`					1					
	X	11a		11b		11c		12		
		13		14		15		16		17

				13 14 15 16 17						
Any or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may rame and addr	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
\	NAME OF COMMITTEE (In Full) Health Underwriters Political Actic	on Comm	ittee							
۱.	Full Name of Individual (Last, First, Middle Initial) Greene, Sean, C., , Mailing Address 6096 Innovation Way	_		Date of Receipt 10 21 2020						
-	City Carlsbad FEC ID number of contributing federal political committee.	State CA	Zip Code 92009-1741	Amount of Each Receipt this Period 30.00						
	Name of Employer (for Individual) Morrison Insurance Services Receipt For: Primary General Other (specify) ▼		ation (for Individual) yee Benefit Specialist ar-to-Date ▼ 300.00	Memo Item						
3.	Full Name of Individual (Last, First, Middle Initial) Kohlsdorf, Eric, , , Mailing Address 1501 Ingersoll Ave Suite 200 City Des Moines	State	Zip Code 50309-3102	Date of Receipt 10 22 2020 Transaction ID: 15274062 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) Prisma Strategies	Occupa Broker	ation (for Individual)	85.00 Memo Item						
	Primary General Other (specify) ▼	Aggregate Ye	595.00							
).	Full Name of Individual (Last, First, Middle Initial) Burns, Patrick, , CEBS, Mailing Address 5653 Maxwelton Road City	or Full Orga	anization Name	Date of Receipt 10 22 2020 Transaction ID: 15274064						
-	Oakland FEC ID number of contributing federal political committee.	CA	94618-2654	Amount of Each Receipt this Period						
	Name of Employer (for Individual) Burns Employee Benefits Insurance Serv Receipt For: Primary General Other (specify)	Occupa Broker Aggregate Yea	ar-to-Date ▼ 1700.00	Memo Item						
SI	UBTOTAL of Receipts This Page (optional)		<u> </u>	285.00						
TC	OTAL This Period (last page this line number only	y)	·····							

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wild, Trei,,, Date of Receipt Mailing Address 3724 Hearst Castle Way 2020 City Zip Code State Transaction ID: 15274065 TX Plano 75025-3719 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Protect Plans **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Boaz, Daniel, J.,, Date of Receipt Mailing Address 5565 Roberts Drive 10 2020 Suite 100 City State Zip Code Transaction ID: 15274066 GA Atlanta 30338-3350 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HealthLife Group, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Qualizza, Jacqueline, , , Date of Receipt Mailing Address 12877 W. 151st Street 10 22 2020 City State Zip Code Transaction ID: 15274068 KS Olathe 66062-9707 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Associate Insurance Services, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186 FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Siino, Thomas, , RHU, Date of Receipt Mailing Address 1126 Clifton Avenue 2020 City Zip Code State Transaction ID: 15274155 NJ Clifton 07013-3622 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Executive Benefits Group, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Pleasants, Jennifer, , , Date of Receipt Mailing Address 6726 Stuyvesant Ct. 10 2020 City State Zip Code Transaction ID: 15274156 Corpus Christi TX 78414-4269 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare Employer & Individual Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Goodman, Robert, Hiram, Date of Receipt Mailing Address 1 Independence Plaza 10 23 2020 Suite 800 City State Zip Code Transaction ID: 15274157 AL Birmingham 35209-2639 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) McGriff Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Winson, Shelly, K., , Date of Receipt Mailing Address PO Box 1914 2020 City Zip Code State Transaction ID: 15274158 ΑZ Chandler 85244-1914 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) True Choice Benefits LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baskett, John, , , Date of Receipt Mailing Address 2601C Blanding Ave #222 10 2020 City State Zip Code Transaction ID: 15274162 CA Alameda 94501-1507 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) John Baskett Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Braner, Jodie, E., , Date of Receipt Mailing Address 1820 Lake Ebenezer Trl 10 23 2020 City State Zip Code Transaction ID: 15274164 GΑ Marietta 30066-4457 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

186 22 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Griffey, Patricia, A., CSA, RHU,, Date of Receipt Mailing Address 56294 Primrose Cir 2020 10 City Zip Code State Transaction ID: 15274167 IN Elkhart 46516-1509 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Page 1 Medicare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1175.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Griffey, Don, R.,, Date of Receipt Mailing Address 56294 Prim Rose Circle 10 2020 City State Zip Code Transaction ID: 15274168 IN Elkhart 46516-1509 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hailey-Campbell, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 825.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sterner, Heidi, J., PAHM, LPRT, Date of Receipt Mailing Address 3402 Cinnamon Creek Ave 10 23 2020 City Zip Code State Transaction ID: 15274171 NV North Las Vegas 89031-3520 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A and H Insurance Insurance Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 205.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kern, Roy, W.,, Date of Receipt Mailing Address 3015 South Fort Avenue, Suite B 2020 City Zip Code State Transaction ID: 15274173 MO Springfield 65807-4311 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kern Insurance Services, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Franke, Gary, , MBA, Date of Receipt Mailing Address 1100 Bellevue Way NE 10 2020 Suite 8A-545 City State Zip Code Transaction ID: 15274174 WA Bellevue 98004-4280 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Achieve Alpha Insurance, LLC Health Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Blain, Bradford, H., , Date of Receipt Mailing Address 343 Waller Avenue 10 23 2020 Suite 101 City State Zip Code Transaction ID: 15274177 KY Lexington 40504-2912 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Al Torstrick Insurance Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Freeman, Joann, , , Date of Receipt Mailing Address 625 Oak Street 2020 City Zip Code State Transaction ID: 15274178 CA Laguna Beach 92651-2920 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Freeman Laguna Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McClaskey, Barbara, A.,, Date of Receipt Mailing Address 1965 Pine Street 10 2020 City State Zip Code Transaction ID: 15274179 CA Redding 96001-1921 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Barbara McClaskey Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Reeves, Valerie, , , Date of Receipt Mailing Address 3702 Brownsboro Rd 10 23 2020 City State Zip Code Transaction ID: 15274180 KY Louisville 40207-1820 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preferred Benefits, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 114.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tellesbo-Kembel, Marsha, , , Date of Receipt Mailing Address 1001 4th Avenue, 2020 44th Floor 10 City Zip Code State Transaction ID: 15274181 WA Seattle 98154-1119 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tellesbo & Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clingan, Nedra, C., GBDS, LPRT, Date of Receipt Mailing Address 13222 Huisache Way 10 2020 City State Zip Code Transaction ID: 15274186 TX Helotes 78023-3606 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Pittman, Joseph, E., , Date of Receipt Mailing Address P O Box 24133 10 23 2020 City Zip Code State Transaction ID: 15274236 NE Omaha 68124-0133 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Creative Association Management Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 285.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

186 FOR LINE NUMBER: PAGE 26 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Clark, Jonathan, S.,, Date of Receipt Mailing Address 6084 South 900 East, Suite 102 2020 City Zip Code State Transaction ID: 15274331 UT Murray 84121-1743 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fringe Benefits Analysts **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baker, Misty, J.,, Date of Receipt Mailing Address 117 Green Valley Dr 10 2020 City State Zip Code Transaction ID: 15274332 TX Leander 78641-9755 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BenefitMall Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sweatt, Shelly, , CIC, Date of Receipt Mailing Address 14 Commerce Road 10 24 2020 City State Zip Code Transaction ID: 15274335 CT Newtown 06470-1607 Amount of Each Receipt this Period FEC ID number of contributing C 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) TR Paul, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 3345.00 Other (specify) 415.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 27 OF

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	ck only 11a 13	11b 14	11c 15	12 16	17
ly information copied from such Reports and Statements may for commercial purposes, other than using the name and ad-					_		

					for the purpose of soliciting contributions olicit contributions from such committee.				
NAME OF COMMITTEE (Ir	n Full)								
Health Underwrite	•	Comn	nittee						
/									
Full Name of Individual (La Lubenow, Justin, , ,	st, First, Middle Initial) or	Full Org	anization Name		Data of Descipt				
	21				Date of Receipt				
Mailing Address 15 Alden S	street				10 24 2020				
Suite 8 City	Sta	ate	Zip Code		Transaction ID : 15274338				
Cranford		NJ 07016-2149			Amount of Each Receipt this Period				
EEC ID number of contribu	uting	-			Amount of Lacif Heceipt this Fellou				
FEC ID number of contributed federal political committee.	C				30.00				
<u> </u>									
Name of Employer (for Indi	ividual)	Occup	ation (for Individual)		Memo Item				
Lubenow Agency									
Receipt For:		egate Ye	ear-to-Date ▼						
Primary Ger Other (specify) ▼	neral		378.00)0					
☐ Other (Specify) ▼			376.00						
Full Name of Individual (La	et Firet Middle Initial) ar	Full Ove	anization Namo						
3. Kowalczyk-Gonzalez		. un Oig	ALIIZANON NAINT		Date of Receipt				
Mailing Address 6568 S Fe					M M / D D / Y Y Y Y				
5 0000 5 FB	110y 11210				10 24 2020				
City	Sta	ate	Zip Code		Transaction ID : 15274339				
Boise	ID		83716-9277		Amount of Each Receipt this Period				
FEC ID number of contribu	iting								
federal political committee.	C				85.00				
Name of Facility (1)	ividua!\	0-	otion (for Individual 1)		Memo Item				
Name of Employer (for Ind Personal Touch Ins & Benef			pation (for Individual) h Insurance Agent		MICHIO ILEIII				
Receipt For:	·								
	neral Aggi	egate Ye	ear-to-Date ▼						
Other (specify)		A	840.0	00					
			7						
Full Name of Individual (La			anization Name						
c. Fugitt-Hetrick, Pam					Date of Receipt				
Mailing Address 1123 Soqu	uel Avenue				M = M / D = D / Y = Y = Y				
-					10 24 2020				
City	Sta		Zip Code		Transaction ID: 15274342				
Santa Cruz		1	95062-2105		Amount of Each Receipt this Period				
FEC ID number of contribu	lting C				30.00				
federal political committee.	J								
Name of Employer (for Indi	ividual)	Occup	eation (for Individual)		Memo Item				
DCD Financial & Insurance		Broke	,						
Receipt For:	Aggi	egate Y	ear-to-Date ▼						
	neral	-		70					
Other (specify)			300.0						
CUDTOTAL AS	Dana (a. f "				145.00				
SUBTOTAL of Receipts This	rage (optional)			······ >	1-10.00				
TOTAL This Period (last page	e this line number onlv)								
()	7/			-					

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McConnaughey, John, R.,, Date of Receipt Mailing Address PO Box 805 2020 City Zip Code State Transaction ID: 15274343 OH West Chester 45071-0805 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) JRM & Associates Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Todd, Richard, H.,, Date of Receipt Mailing Address 54 Belle Meadow Lane 10 2020 City State Zip Code Transaction ID: 15274344 AR Little Rock 72210-3714 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sunstar Insurance of AR Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Todd, David, , , Date of Receipt Mailing Address 7011 Lucea Rd 10 24 2020 City State Zip Code Transaction ID: 15274345 AR Little Rock 72210-4146 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sunstar Insurance of AR Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

186

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Helms, John, S.,, Date of Receipt Mailing Address 2940 Camino Diablo 2020 # 205 City State Zip Code Transaction ID: 15274347 Walnut Creek CA 94597-3992 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) John Helms Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Todd, Helen, M.,, Date of Receipt Mailing Address 10800 Financial Centre Parkway 10 2020 Suite 300 City State Zip Code Transaction ID: 15274348 AR Little Rock 72211-3588 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sunstar Insurance of AR Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Barrera, Rolando, G., Date of Receipt Mailing Address 101 N Shoreline Blvd 10 24 2020 Suite 410 City State Zip Code Transaction ID: 15274349 TX Corpus Christi 78401-2825 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Roland Barrera Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NOMBER (check only one)

FOR LINE NUMBER:						PAGE		30	OF		186
(c	(check only one)										
	×	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)

Health Underwriters Political Action Committee

Health Underwriters Political Ac	tion Comn	nittee	
Full Name of Individual (Last, First, Middle In Berg, Allan, , ,	itial) or Full Org	ganization Name	Date of Receipt
Mailing Address 3170 44th Street, Unit 110			10 25 2020
City Fargo	State ND	Zip Code 58104-8596	Transaction ID : 15274442 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) Premier Benefits Group	Occup	pation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle In Andress, Carolyn, Marie, REBC,	itial) or Full Org	ganization Name	Date of Receipt
Mailing Address 1959 Highway 34 2nd Floor			10 25 2020
City Wall Township	State NJ	Zip Code 07719-9750	Transaction ID: 15274445 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual) HUB International	Occup Broke	pation (for Individual) er	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle In Gwin, David, R., , Mailing Address P.O. Box 1396	itial) or Full Org	ganization Name	Date of Receipt
City	State	Zip Code	10 25 2020 Transaction ID : 15274449
Irmo	SC	29063-1396	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		85.00
Name of Employer (for Individual) Southeastern Insurance Consultants	Occup Broke	oation (for Individual) r	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 850.00	
SUBTOTAL of Receipts This Page (optional)		>	140.00
TOTAL This Period (last page this line number	only)	>	

186 FOR LINE NUMBER: PAGE 31 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rice, Russell, Lee, SGS, Date of Receipt Mailing Address 8830 Buckskin Dr 2020 10 City Zip Code State Transaction ID: 15274450 TX Boerne 78006-5554 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AVESIS. Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wright, Dennis, E., RHU, CSFP, Date of Receipt Mailing Address 1111 Chestnut Hills Pky 10 2020 City State Zip Code Transaction ID: 15274451 Fort Wayne IN 46814-8934 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Employee Plans, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Thal, Harry, P.,, Date of Receipt Mailing Address PO BOX 2137 10 25 2020 City Zip Code State Transaction ID: 15274452 CA **KERNVILLE** 93238-2137 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Harry P. Thal Insurance Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 32 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Beck, Carolyn, , , Date of Receipt Mailing Address 101 Plaza East Blvd 2020 City Zip Code State Transaction ID: 15274454 IN **Fvansville** 47715-2870 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SIHO Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lucas, William, H.,, Date of Receipt Mailing Address PO Box 1089 10 2020 City State Zip Code Transaction ID: 15274455 Richmond Hill GA 31324-1089 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bill Lucas & Associates Insurance CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Olson, Charles, , , Date of Receipt Mailing Address 4221 N. 203rd St, Suite 200 10 25 2020 City Zip Code State Transaction ID: 15274459 NE Elkhorn 68022-3474 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OCI **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 474.00 Other (specify) 122.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

FOR LINE NUMBER: (check only one)

FC	FOR LINE NUMBER:						53	OF	100	
(ch	nec	ck only	or	ne)						
[3	X	11a		11b		11c	12			
		13		14		15	16		17	

Any information copied from such Reports and Son for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Health Underwriters Political Ac	tion Committee	
Full Name of Individual (Last, First, Middle Init Spinelli, Frank, , , Mailing Address 1100 Superior Avenue Street	ial) or Full Organization Name	Date of Receipt
•		10 25 2020
Suite 1500 City	State Zip Code	Transaction ID : 15274460
Cleveland	OH 44114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) Oswald Companies	Occupation (for Individual) VP Group Benefits	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle Init Grant, Staci, R., , Mailing Address 74 Glendale Ave	ial) or Full Organization Name	Date of Receipt
	10 26 2020	
City	State Zip Code	Transaction ID : 15274497
Livingston	NJ 07039-2310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer (for Individual) Henry O. Baker Insurance Group	Occupation (for Individual) Vice President	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle Init	ial) or Full Organization Name	Date of Receipt
Mailing Address 2451 Broadway		10 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : 15274498
Fort Wayne	IN 46807-1105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) Hatfield Insurance Services, LLC	Occupation (for Individual) Broker	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)	•	90.00
TOTAL This Period (last page this line number of	only)	

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

Use separate schedule(s)

FOR LINE NUMBER:						PAGE	3	34 OF		186
(C	he	ck only	or	ne)						
	X	11a		11b	11c 12					
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gilbert, Debra, E., , Date of Receipt Mailing Address 2331 Mustang Drive 2020 Suite 200 City State Zip Code Transaction ID: 15274501 TX Grapevine 76051-1014 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President Innovative Insurance Solutions Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Linneman, Ron, , , Date of Receipt Mailing Address 1740 Rice Street 10 2020 Ste 200 City State Zip Code Transaction ID: 15274503 MN Saint Paul 55113-6825 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Western Insurance Agency Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 680.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Niederman, Brad, , , Date of Receipt Mailing Address 1745 Shea Center Dr 10 26 2020 4th Floor City State Zip Code Transaction ID: 15274506 CO Highlands Ranch 80129-1537 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Niederman Insurance Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 35 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

186

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mann, William, D.,, Date of Receipt Mailing Address 14727 E Red Bayberry Ct 2020 City Zip Code State Transaction ID: 15274507 TX Cypress 77433-5413 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO The Compliance Office Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schneider, Chad, P., , Date of Receipt Mailing Address 4470 Woodman Ave 10 2020 Apt 303 City State Zip Code Transaction ID: 15274508 Sherman Oaks CA 91423-5520 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Jellyvision Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 925.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Jurkus, Charles, , , Date of Receipt Mailing Address 823 Commerce Drive, Suite 350 10 26 2020 City State Zip Code Transaction ID: 15274511 IL Oak Brook 60523-8855 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Employee Benefit Risk Mgmt. Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

186 36 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Selby, John, , , Date of Receipt Mailing Address 3 Dodd Ter 2020 City Zip Code State Transaction ID: 15274514 NJ Verona 07044-1719 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. (Wooden) Lovincey, Rebecca, L.,, Date of Receipt Mailing Address 201 NE Park Plaza Dr #293 10 2020 City State Zip Code Transaction ID: 15274515 WA Vancouver 98684-5881 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AIMEA Insurance, Inc. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Rivera, Michael, A., Date of Receipt Mailing Address 13201 N.W. Fwy. Suite 265 10 26 2020 City Zip Code State Transaction ID: 15274517 TX Houston 77040-6165 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest General Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 37 OF 186 Use separate schedule(s) for each category of the Detailed Summary Page

ı	1 (<i>J</i> 11	LIIVL	IVO	IVIDLI	IAGL	- `	,,	Oi	
	(c	he	ck only	or	ıe)					
		X	11a		11b	11c		12		
			13		14	15		16		17

_				
An or	ly information copied from such Reports and State for commercial purposes, other than using the	atements may i	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	Health Underwriters Political Act	ion Comm	ittee	
V	Full Name of Individual (Last, First, Middle Initia	al) or Full Orga	anization Name	
Α.	Tretter, Robert, C., CLU, ChFC,,	,		Date of Receipt
	Mailing Address 6222 Spring Lake Drive			·
	Walling Address 6222 Spring Lake Drive			10 26 2020
	City	State	Zip Code	
	Hamilton	OH	45011-8189	Transaction ID : 15274518
	Tianiiton	011	43011-6169	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	National Association of Health Underwr	Broker	,	
	Receipt For:	Diokei		
		Aggregate Ye	ar-to-Date ▼	
	Primary General		420.00	
	Other (specify) ▼		420.00	
_	Full Name of Individual (I as First Mid II)	al) an Ecil O	naination Nome	
В	Full Name of Individual (Last, First, Middle Initial Cociu, Dorothy, M., RHU, REBC,,	ai) or Full Orga	anization Name	Data of Bossint
D.	•			Date of Receipt
	Mailing Address P.O. Box 6677			M M / D D / Y Y Y Y Y
		Ta	I=: a :	10 26 2020
	City	State	Zip Code	Transaction ID : 15274520
	Fullerton	CA	92834-6677	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		85.00
		1-		Mama Itam
	Name of Employer (for Individual) Advanced Benefit Consulting & Insuranc		ation (for Individual)	Memo Item
		Broker	•	
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General			
	Other (specify) ▼		925.00	
_		n		
C	Full Name of Individual (Last, First, Middle Initial Gutierrez, Antonio 'Tony', , ,	al) or Full Orga	anization Name	Date of Receipt
J .	Mailing Address 12833 River Dance Dr.			
	12033 RIVEL DANCE DE.			10 26 2020
	City	State	Zip Code	Transaction ID : 15274521
	Raleigh	NC	27613-7093	
	-			Amount of Each Receipt this Period
	FEC ID number of contributing	C		30.00
	federal political committee.			
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Benefitcare.com	Broker		_
	Receipt For:		anda Data W	-
	Primary General	Aggregate Ye	ear-to-Date ▼	
	Other (specify)		300.00	
	Carlot (opcorry)		7 1 4	
	UBTOTAL of Receipts This Page (optional)			157.00
$ hd_{}$	ODIOTAL OF HOOGIPIO THIS Tage (optional)			
-	OTAL This Period (last page this line number of	nlv)	_	
1'	OTAL This Period (last page this line number o	ı ııy)		

FOR LINE NUMBER: PAGE 38 OF Use separate schedule(s) (check only one)

186

for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

		201030 0011111		13	3	14	15	16	17
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) Health Underwriters Political A									
Full Name of Individual (Last, First, Middle In Stocks, Deborah, P., , Mailing Address 11551 Nuckols Rd Ste N	nitial) or Full C	rganization Name			e of R	eceipt	/ V	Y	Y
City	State	Zip Code		1	0	26	F074F00	2020	
Glen Allen	VA	23059-5565				tion ID : 1 f Each Re			
FEC ID number of contributing federal political committee.	С					7	-	30.0	0
Name of Employer (for Individual) Your Benefits Partner LLC	Occ	upation (for Individ	ual)		Mem	o Item			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	264.00						
Full Name of Individual (Last, First, Middle II Goodacre, James, William, ,	nitial) or Full C	rganization Name		Date	e of R	eceipt			
Mailing Address PO Box 22423					0	27	/ Y	2020	Y
City Carmel	State CA	Zip Code 93922-0423				tion ID:1			
FEC ID number of contributing federal political committee.	С					7	-	30.0	0
Name of Employer (for Individual) James W. Goodacre II	Occ Bro	upation (for Individ ker	ual)		Mem	o Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	300.00						
Full Name of Individual (Last, First, Middle In Jackson, Jerry, D., ,	nitial) or Full C	rganization Name		Date	e of R	eceipt			
Mailing Address 5113 N. Executive Drive Suite 102				M 1	М	27	ᄔ	2020	Y
City Peoria	State IL	Zip Code 61614-4893				tion ID: 1 f Each Re			
FEC ID number of contributing federal political committee.	С					,		42.0	0
Name of Employer (for Individual) Jackson Financial Services	Occ Brok	upation (for Individ ker	ual)		Mem	no Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	420.00						
SUBTOTAL of Receipts This Page (optional)						,		102.0	0
TOTAL This Period (last page this line number	r only)		>			7	45	- 40	

FOR LINE NUMBER: PAGE 39 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Furr, Kenneth, , , Date of Receipt Mailing Address 333 Village Bl., Ste. 203 2020 City Zip Code State Transaction ID: 15275035 Incline Village NV 89451-8293 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Menath Insurance Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schwartz, Matt, B., , Date of Receipt Mailing Address 2950 Breckenridge Lane, Suite 8A 10 2020 City State Zip Code Transaction ID: 15275036 KY Louisville 40220-1462 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schwartz Insurance Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Nezat, Ron, J., Date of Receipt Mailing Address PO Box 91180 10 2020 City State Zip Code Transaction ID: 15275040 Lafayette LA 70509-1180 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Global Financial Resources, Inc. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

F	OH	LINE	NU	MRFK	:	PAGE	- 4	10	OF	100
(0	che	ck only	or	ne)						
`		1	_	1 '			1			
	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tierney, Robert, J., HDHP, Date of Receipt Mailing Address 830 N Main St 2020 STE 200 10 City State Zip Code Transaction ID: 15275046 ID Meridian 83642-2611 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Compass Benefit Advisors **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 925.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Ruffin, Helena, , , Date of Receipt Mailing Address 1167 Roxbury Dr 10 2020 #103 City State Zip Code Transaction ID: 15275048 CA 90035-1044 Los Angeles Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ruffin Insurance Solutions, Inc. President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 \triangle

		4	
Full Name of Individual (Last, First, Middle In Hill, Donna, D., FLMI,	itial) or Full Org	anization Name	Date of Receipt
Mailing Address 2905 Premiere Parkway Suite 285			10 27 2020
City	State	Zip Code	Transaction ID: 15275049
Duluth	GA	30097-5246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		85.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
E2E Benefits Services Inc	Broker	r	
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 850.00	
	·		200.00

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

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

7

Receipt For:

C.

Primary

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NOMBER (check only one)

F	OR	LINE	NU	IMBER	:	PAGE	- 4	11	OF	186
(0	che	ck only	or	ne)						
	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Severo, Daniel, , , Date of Receipt Mailing Address 262 Chestnut St. 2020 Ste 200 City State Zip Code Transaction ID: 15275050 PΑ Meadville 16335-3302 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Broker The DJB Group, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Witt, Kelly, J.,, Date of Receipt Mailing Address 1017 Pine Hill Way 10 2020 City State Zip Code Transaction ID: 15275051 IN 46032-7701 Carmel Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Health and Wellness Group Chief Operating Officer

Other (specify) ▼		300.00	
Full Name of Individual (Last, First, Middle Ini Jennings, Julie, , , Mailing Address MassAHU 91 Cedar St City	itial) or Full O	rganization Name	Date of Receipt 10 27 2020 Transaction ID : 15275052
Milford FEC ID number of contributing federal political committee.	МА	01757-1178	Amount of Each Receipt this Period
Name of Employer (for Individual) Massachusetts Association of Health Un Receipt For: Primary General Other (specify)	Brok	rpation (for Individual) er Year-to-Date ▼ 850.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			145.00

Aggregate Year-to-Date ▼

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

Use separate schedule(s)

F	OR	LINE	NU	IMBER	:	PAGE	_ 4	42	OF	186
(che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Suzanne, K., RHU, CEBS,, Date of Receipt Mailing Address 5955 Carnegie Blvd Suite 150 2020 10 City Zip Code State Transaction ID: 15275054 NC Charlotte 28209-4664 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Employee Benefit Advisors Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Singleton, Terry, , REBC, CFP, C, Date of Receipt Mailing Address 1021 Douglas Ave 10 2020 City State Zip Code Transaction ID: 15275056 FL Altamonte Springs 32714-2029 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Enterprise Team Partner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1925.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Underhill, Elizabeth, J., , Date of Receipt Mailing Address 5951 Canoga Avenue 10 2020 City State Zip Code Transaction ID: 15275058 CA Woodland Hills 91367-5010 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Underhill Insurance Agency, Inc. Insurance agent Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify)

											_
SUBTOTAL of Receipts This Page (optional)	I		,	I				25	5.00	Ξ	
TOTAL This Period (last page this line number only)	_	_	7	_	_	7	_	_	4	Ξ	
											_

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

_	LINE	:	PAGE	 13	OF	•	186	
(che	ck only							
×	11a	11b		11c	12			
	13	14		15	16	.		17

					13	14	15	16	17
	ion copied from such Reports and Sta ercial purposes, other than using the n								
\	COMMITTEE (In Full) Underwriters Political Action	on Comm	ittee						
	of Individual (Last, First, Middle Initia Michael, S., ,	l) or Full Orga	anization Name	;	Date of	of Receipt			
Mailing Ac	ddress 330 River Pointe Drive				10	/ D 27		Y	1
City Elkhart		State	Zip Code 46514-145	7			: 15275059	Daviad	
FEC ID no	umber of contributing	С			Amour	nt or Each	Receipt this	85.00	
	Employer (for Individual) Ins. & Benefits Group, LLC	Occupa Broker	ation (for Indivi	dual)		/lemo Item			
Receipt Fo	or:	Aggregate Ye	ar-to-Date ▼						
	er (specify) ▼		1 45	850.00					
3. Tomline	of Individual (Last, First, Middle Initia son, Neal, Alan, ,	l) or Full Orga	anization Name)	Date of	of Receipt			
	ddress P.O. Box 71628	10	I=: 0 :		10	/ D 27		2020	
City Albany		State GA	Zip Code 31708-1628	3			: 15275060 Receipt this	Period	
	umber of contributing litical committee.	С			Ē	1-75-1	1-5-1	25.00	
Doherty D	Employer (for Individual) uggan Hart & Tiernan Insurors		ation (for Indivi ercial Account	,	I N	lemo Item			
Receipt Fo		Aggregate Ye	ar-to-Date ▼	250.00					
	of Individual (Last, First, Middle Initiack, Carol, , ,	l) or Full Orga	anization Name)	Date of	of Receipt			
Mailing Ac	ddress 3207 Cottingham Ct.				10	/ 2		2020	
City Greensbo	oro	State NC	Zip Code 27410-8362	2			: 15275061 Receipt this	Period	
	umber of contributing litical committee.	С					. , .	30.00	
Triune Ted	Employer (for Individual) chnologies, Inc.	Occupa Broker	ation (for Indivi	dual)		Memo Item			
Receipt For		Aggregate Ye	ar-to-Date ▼	300.00					
SUBTOTAL	of Receipts This Page (optional)			·····			. , .	140.00	
TOTAL This	Period (last page this line number on	nly)		>					

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

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

186 44 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Shepherd, Melissa, , , Date of Receipt Mailing Address 1183 N. Henderson St. 2020 City Zip Code State Transaction ID: 15275155 IL Galesburg 61401-2523 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Way Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Muhich, Brian, , , Date of Receipt Mailing Address 3658 Bristol Cove Lane 10 2020 City State Zip Code Transaction ID: 15275157 Saint Cloud FL 34772-8212 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Be Well Consulting Corp. President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Marra, Linda, H., , Date of Receipt Mailing Address 1983 Marcus Avenue 10 2020 Suite 114 City State Zip Code Transaction ID: 15275165 NY New Hyde Park 11042-2000 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ladmar Associates Ltd. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 45 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Grose, Ryan, , , Date of Receipt Mailing Address 620 Mabry Hood Rd., STE 201 2020 City Zip Code State Transaction ID: 15275175 TN Knoxville 37932-2661 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PMG Benefits Consulting, LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rose, Vincent, J.,, Date of Receipt Mailing Address 620 South Lake Street 10 2020 City State Zip Code Transaction ID: 15275180 MI Marquette 49855-5150 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) 44North Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 360.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** McGuinness, James, , , Date of Receipt Mailing Address 1258 S Washingotn 10 2020 City State Zip Code Transaction ID: 15275191 MI Saginaw 48601-2509 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Saginaw Bay Underwriters Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 840.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186 FOR LINE NUMBER: PAGE 46 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Michael, David, Date of Receipt Mailing Address 6200 Stone Hill Farms Parkway 2020 City Zip Code State Transaction ID: 15275197 TX Flower Mound 75028-4312 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Brokerage, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Seibel, Ronald, E., , Date of Receipt Mailing Address P. O. Box 317 10 2020 City State Zip Code Transaction ID: 15275199 TX Driftwood 78619-0317 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Advanced Benefits Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Avery, Michael, K., Date of Receipt Mailing Address 1015 North Dixie 10 2020 City Zip Code State Transaction ID: 15275203 TX Odessa 79761-2805 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AL J. Avery & Associates, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 47 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Freeman, Joann, , , Date of Receipt Mailing Address 625 Oak Street 2020 City Zip Code State Transaction ID: 15275211 CA Laguna Beach 92651-2920 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Freeman Laguna Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gant, Tom, , , Date of Receipt Mailing Address 100 North Weinbach Avenue 10 2020 City State Zip Code Transaction ID: 15275223 IN Evansville 47711-6006 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schultheis Life & Health Agency Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 828.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Thomas, Lyndon, B., , Date of Receipt Mailing Address P O Box 207 10 2020 City State Zip Code Transaction ID: 15275226 CA Ojai 93024-0207 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lyndon Thomas Insurance Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X)

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	-	18	OF	186
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schafer, Luke, , , Date of Receipt Mailing Address 80 Iron Point Circle #200 2020 City Zip Code State Transaction ID: 15275263 CA Folsom 95630-8593 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit & Risk Mgmt Svcs, Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Levy, Martin, , , Date of Receipt Mailing Address 21021 Ventura Boulevard, Suite 200 10 2020 City State Zip Code Transaction ID: 15275271 Woodland Hills CA 91364-2209 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Corporate Strategies Inc Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Goodacre, James, William, , Date of Receipt Mailing Address PO Box 22423 10 28 2020 City State Zip Code Transaction ID: 15275277 CA Carmel 93922-0423 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) James W. Goodacre II **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional).....

L	_	_	7	_	_	7	_	_	-qu-	_	_

FEC Schedule A (Form 3X) Rev. 06/2016

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

FOR LINE NOME (check only one)

-	OR	PAGE	 19	OF	186				
(0	che	ck only	or	ie)					
	×	11a		11b		11c	12		
		13		14		15	16	;	17

_				13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the	atements may r name and addr	not be sold or used by any per ress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	Health Underwriters Political Act	ion Comm	ittee	
<u>/</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full Orga	anization Name	
A.		, ,		Date of Receipt
	Mailing Address 15431 Washington St.			M = M / D = D / Y = Y = Y
				10 28 2020
	City	State	Zip Code	Transaction ID: 15275287
	Riverside	CA	92506-5763	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Dickerson Insurance Services	Broker	,	_
	Receipt For:	Aggregate Ye	ar-to-Date ▼	1
	Primary General	7.99.09ut0 10		
	Other (specify) ▼		300.00	
	Full Name of Individual (Last, First, Middle Initia	al) or Full Orga	anization Name	
В.	Olson, Trenton, M., ,			Date of Receipt
	Mailing Address 9980 S. 300 W. Suite 140			M M / D D / Y Y Y Y
				10 28 2020
	City	State	Zip Code	Transaction ID: 15275289
	Sandy	UT	84070-3641	Amount of Each Receipt this Period
	FEC ID number of contributing	С		30.00
	federal political committee.	O .		30.00
	Name of Employer (for Individual) Senior Benefits Insurance Services	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For:	Aggregate Ye	ar-to-Date ▼	1
	Primary General	riggregate re-	ui to bato .	
	Other (specify) ▼		300.00	
_	Full Name of Individual (Last, First, Middle Initia	al) or Full Orga	anization Name	
C.	Whaley, Vicki, Lee, ,			Date of Receipt
	Mailing Address PO Box 759			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	170 River Rock Rd	State	Zip Code	10 28 2020
	Lewiston	CA	96052-0759	Transaction ID: 15275292
			13002 0.00	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Vicki Whaley Ins Svcs.	Health A	Agent	
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General		520.00	
	Other (specify)		320.00	
s	SUBTOTAL of Receipts This Page (optional)		·····	102.00
T	OTAL This Period (last page this line number o	nly)	·····	

186 FOR LINE NUMBER: PAGE 50 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Applegate, Teena, , , Date of Receipt Mailing Address 3111 C Street, Suite 500 10 2020 City Zip Code State Transaction ID: 15275293 AK Anchorage 99503-3973 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Consultant RISQ Consulting Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Blackford, Stephen, I,, Date of Receipt Mailing Address 11481 Old St. Augustine Rd., # 201 10 2020 City State Zip Code Transaction ID: 15275295 Jacksonville FL 32258-1475 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Blackford Group Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Lago, Julian, E., , Date of Receipt Mailing Address 6671 W Indiantown Rd, Ste 50284 10 28 2020 City Zip Code State Transaction ID: 15275297 FL **Jupiter** 33458-3991 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benezon LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 925.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

51 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Waren, M. Hughes, , , Date of Receipt Mailing Address P.O. Box 7661 2020 10 City Zip Code State Transaction ID: 15275300 Wilmington NC 28406-7661 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **EbenConcepts Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Crosby, Neil, R.,, Date of Receipt Mailing Address 32110 Agoura Road 10 2020 City State Zip Code Transaction ID: 15275302 Westlake Village CA 91361-4026 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Warner Pacific Insurance Services Director of Sales Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Morrison, James, M., RHU, REBC, Date of Receipt Mailing Address 6096 Innovation Way 10 28 2020 City State Zip Code Transaction ID: 15275303 CA Carlsbad 92009-1741 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Morrison Insurance Services, Inc President Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

186 52 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tower, Kimberly, H.,, Date of Receipt Mailing Address 408 E ParkCenter Blvd, Suite 100 2020 City Zip Code State Transaction ID: 15275306 ID Boise 83706-6512 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PacificSource Health Plans Sales Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bilhartz, Brian, , , Date of Receipt Mailing Address 42376 Klondike Way 10 2020 City State Zip Code Transaction ID: 15275307 CA Indio 92203-2835 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bilhartz Desert Insurance Agency Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Malvich, Marlayna, , , Date of Receipt Mailing Address 4166 Jackson Blvd 10 28 2020 City State Zip Code Transaction ID: 15275308 MI White Lake 48383-1514 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Benefits Plus Receipt For: Aggregate Year-to-Date ▼ Primary General 264.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b

186 PAGE 53 OF 11c 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lardiere, Jim, , , Date of Receipt Mailing Address 25 B Hanover Road Suite 220 2020 City Zip Code State Transaction ID: 15275310 NJ Florham Park 07932-1443 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Savoy Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bechtold, Annette, , REBC, Date of Receipt Mailing Address 148 Stone Cliff Trace 10 2020 City State Zip Code Transaction ID: 15275311 Cleveland GA 30528-5397 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OneDigital Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 593.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Buza, Raymond, F., , Date of Receipt Mailing Address 1440 AIA 10 28 2020 City Zip Code State Transaction ID: 15275312 FL Vero Beach 32963 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Palm Beach Insurance Advisory Group, I Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) 178.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

federal political committee.

Reents Insurance Agency

Receipt For:

Name of Employer (for Individual)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NOMBER: (check only one)

F	FOR LINE NUMBER:						: 5	54	OF	186
(0	(check only one)									
X 11a 11b					11c		12			
		13		14		15		16		17

Memo Item

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Childers, Russell, B., CLU, ChFC, Date of Receipt Mailing Address PO Box 1547 2020 10 City State Zip Code Transaction ID: 15275313 GA 31709-1547 Americus Amount of Each Receipt this Period FEC ID number of contributing C 90.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Broker Russ Childers, CLU Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Reents, Joni, Robin, , Date of Receipt Mailing Address 10701 Melody Drive 10 2020 Suite 320 City State Zip Code Transaction ID: 15275314 Northglenn CO 80234-4122 Amount of Each Receipt this Period FEC ID number of contributing 85.00

Primary General Other (specify) ▼	Aggregate Year-to-Date ¥			
C. Scopp, Kenneth, N, , Mailing Address 12121 Wilshire Blvd Ste	, c	Date of Receipt 10 28 2020 Transaction ID: 15275315		
Los Angeles FEC ID number of contributing federal political committee.	CA 90025-1166	Amount of Each Receipt this Period 25.00		
Name of Employer (for Individual) First Financial Resources Receipt For: Primary General Other (specify)	Occupation (for Individual) Broker Aggregate Year-to-Date ▼ 250.00	Memo Item		

Occupation (for Individual)

Broker

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

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

200.00

FOR LINE NUMBER: PAGE 55 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

186

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Scott, Nicole, , , Date of Receipt Mailing Address 6200 Northwest Pkwy 2020 City Zip Code State Transaction ID: 15275316 TX San Antonio 78249-3348 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) United Healthcare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kapostins, Ashley, , , Date of Receipt Mailing Address 2301 Maitland Center Pkwy 10 2020 Ste 125 City State Zip Code Transaction ID: 15275317 Maitland FL 32751-4173 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CIGNA** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Johnson, Sandra, , , Date of Receipt Mailing Address 252 Apacheria Pass W 10 28 2020 City State Zip Code Transaction ID: 15275319 TX Comfort 78013-3300 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hairston, Johnson & Associates, PLLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 56 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Blasman, Wayne,,, Date of Receipt Mailing Address 5210 Lewis Road, Suite 14 2020 10 City Zip Code State Transaction ID: 15275321 CA Agoura Hills 91301-2662 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bridgeport Benefits Inc **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Collins, Martha, T., RHU, Date of Receipt Mailing Address 545 N. Mountain Avenue 10 2020 Suite 208 City State Zip Code Transaction ID: 15275322 CA Upland 91786-5055 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Martin & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lawless, James, A., , Date of Receipt Mailing Address 710 East Main Street 10 28 2020 Suite 110 City State Zip Code Transaction ID: 15275323 KY Lexington 40502-1602 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Epic Insurance Solutions, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 57 OF 186 Use separate schedule(s) for each category of the Detailed Summary Page

1 01	LLIIVE	140	IVIDEI	17101	- `	,,	01		
(che	ck only	or	ie)						
×	check only one) X 11a 11b 13 14			11c		12			
	13		14	15		16		1	7

_				
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the	atements may iname and addi	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	-	<u> </u>	
$ \rangle$	Health Underwriters Political Act	ion Comm	ittee	
\angle				
	Full Name of Individual (Last, First, Middle Initial Ambro, Heather, , ,	al) or Full Orga	anization Name	Date of Descipt
Α.				Date of Receipt
	Mailing Address 11704 Lackland Industrial Drive	•		10 28 2020
	City	State	Zip Code	Transaction ID : 15275324
	Saint Louis	МО	63146-4209	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		85.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	The ECCHIC Group	CEO	(101 mannada)	
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General	99.09410 10		
	Other (specify) ▼		850.00	
_				
D	Full Name of Individual (Last, First, Middle Initia	al) or Full Orga	anization Name	Date of Possint
D.	Danzig, Howard, , , Mailing Address 11704 Lackland Industrial Drive			Date of Receipt
	11/04 Lackland Industrial Drive	10 28 2020		
	City	State	Zip Code	Transaction ID : 15275325
	Saint Louis	МО	63146-4209	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		85.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Employers Committed To Control Health		resident of Administration	_
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General	7.55.054.0		
	Other (specify) ▼		850.00	
_	Full Name of Individual (I. a. F. a. N	-I) F " O		
C	Full Name of Individual (Last, First, Middle Initial Wilson, Thomas, R., ,	ai) or Full Orga	anization Name	Date of Receipt
٥.	Mailing Address 701 Lamar			M M / D D / Y Y Y Y
				10 28 2020
	City	State	Zip Code	Transaction ID : 15275326
	Wichita Falls	TX	76301-6824	Amount of Each Receipt this Period
	FEC ID number of contributing	C		170.00
	federal political committee.			
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Boley Featherston Insurance Agency	Broker	,	
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General		1700.00	
	Other (specify)		1700.00	
s	SUBTOTAL of Receipts This Page (optional)			340.00
ř				
Т	OTAL This Period (last page this line number of	nly)	·····	

FOR LINE NUMBER: PAGE 58 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

186

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sklar, Erika, , , Date of Receipt Mailing Address 755 W Big Beaver Rd 2020 Ste 2020 City State Zip Code Transaction ID: 15275327 MI Troy 48084-4925 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benebiz Plus **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 336.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hartman, William, J., , Date of Receipt Mailing Address 215 Airport North Office Park 10 2020 City State Zip Code Transaction ID: 15275328 Fort Wayne IN 46825-6702 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hartman Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gant, Tom, , , Date of Receipt Mailing Address 100 North Weinbach Avenue 10 28 2020 City State Zip Code Transaction ID: 15275331 IN Evansville 47711-6006 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schultheis Life & Health Agency Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 870.00 Other (specify) 139.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 59 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stubbs, Guy, , , Date of Receipt Mailing Address PO Box 337 2020 City Zip Code State Transaction ID: 15275333 ID Jerome 83338-0337 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hall and Associates Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cagliola, Victoria, CPA, Date of Receipt Mailing Address 1041 Old Cassatt Rd 10 2020 City State Zip Code Transaction ID: 15275334 PA Berwyn 19312-1152 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Simkiss & Block CPA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Snowden, Scott, D., , Date of Receipt Mailing Address 812 Lyndon Lane, Suite 101 10 28 2020 City Zip Code State Transaction ID: 15275335 KY Louisville 40222-3844 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Snowden & Associates, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NOMBER: (check only one)

F	FOR LINE NUMBER:						- (60	OF		186
(0	(check only one)										
	X 11a 11b					11c		12			
		13		14		15		16	;		17

		1.0 1.0						
	Statements may not be sold or used by any perse name and address of any political committee t							
NAME OF COMMITTEE (In Full) Health Underwriters Political Ac	ction Committee							
Full Name of Individual (Last, First, Middle In Lubenow, Douglas, , ,	nitial) or Full Organization Name	Date of Receipt						
Mailing Address 214 West Main Street Suite 101		10 28 2020						
City Moorestown	State Zip Code NJ 08057-2345	Transaction ID : 15275336 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	85.00						
Name of Employer (for Individual) Lubenow Agency	Occupation (for Individual) Broker	Memo Item						
Receipt For: Primary General Other (specify) ▼								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ragusa, Ruth, Ferry, , Mailing Address 9029 Jefferson Highway Suite D 250 Date of Receipt 10 28 2020								
City								
FEC ID number of contributing federal political committee.	, l							
Name of Employer (for Individual) Fleurins	Occupation (for Individual) Broker	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00							
Full Name of Individual (Last, First, Middle In	nitial) or Full Organization Name	Date of Receipt						
Mailing Address 40 E. McDermott		10 28 2020						
City Allen	State Zip Code TX 75002-2802	Transaction ID : 15275338 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	250.00						
Name of Employer (for Individual) The DI Center	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2500.00							
SUBTOTAL of Receipts This Page (optional)		365.00						
TOTAL This Period (last page this line number	only)							

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

Use separate schedule(s)

l	FOR LINE NUMBER:						PAGE	- (31	OF	•	186
l	(C	he	ck only									
l		X	11a		11b		11c		12	!		
l			13		14		15		16	;		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bear, Dale, F.,, Date of Receipt Mailing Address 2550 NE Douglas St 2020 City Zip Code State Transaction ID: 15275339 MO Lees Summit 64064-2224 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Expat Solutions International dba ESI Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Healy, Jacqueline, , , Date of Receipt Mailing Address 3124 S. Parker Road 10 2020 Suite A2-143 City State Zip Code Transaction ID: 15275343 CO Aurora 80014-6215 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Trilogy Benefits, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 210.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Petersen, Benjamin, Lee, Date of Receipt Mailing Address PO Box 971 10 28 2020 City Zip Code State Transaction ID: 15275347 WA Ridgefield 98642-0971 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) K & B Benefit Advisors **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: (check only one)

l	FO	R LINE	NUMBE	PAGE	62	2 01	F 186	
l	(ch	eck only	one)					
l	X	11a	11b		11c	<i>·</i>	12	
l		13	14		15	☐ ·	16	17

_				1.0			
	ny information copied from such Reports and St for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) Health Underwriters Political Act	tion Comn	nittee				
A .	Full Name of Individual (Last, First, Middle Init Barnette, Mary Lynn, , ,	ial) or Full Org	anization Name	Date of Receipt			
	Mailing Address 121 Executive Center Dr. Suite 108 City	State	Zip Code	10 28 2020 Transaction ID : 15275353			
	Columbia	SC	29210-8418	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		365.00			
	Name of Employer (for Individual) The Barnette Agency, LLC	Occup Broke	pation (for Individual)	Memo Item			
	Receipt For: Primary General Other (specify) ▼	ear-to-Date ▼ 365.00					
В.	Full Name of Individual (Last, First, Middle Init Knippen Loeb, Karen, , , Mailing Address 234 Spring Lake Drive	Date of Receipt					
	City Itasca	Zip Code 60143-3202	Transaction ID : 15275355 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	1000.00					
	Name of Employer (for Individual) Euclid Managers		oation (for Individual) oyee Benefit Consultant	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-bate V					
С .	Full Name of Individual (Last, First, Middle Init Devos, Pamela, J., ,	ial) or Full Org	anization Name	Date of Receipt			
	Mailing Address 5437 Breckenridge Ct.	State	7in Codo	10 28 2020			
	City Frisco	TX	Zip Code 75034-4021	Transaction ID : 15275444 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		150.00			
	Name of Employer (for Individual) Pamela J. Devos Insurance Agency	Broke		Memo Item			
	Receipt For: Primary General Other (specify)	Primary General					
5	SUBTOTAL of Receipts This Page (optional)		····	1515.00			
lπ	OTAL This Period (last page this line number of	only)					

FOR LINE NUMBER: PAGE 63 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Grosjean, David, C.,, Date of Receipt Mailing Address 2125 Wyoming Blvd. NE 2020 City Zip Code State Transaction ID: 15275773 NM 87112-2617 Albuquerque Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Grosjean Insurance Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Barrera, Rolando, G., , Date of Receipt Mailing Address 101 N Shoreline Blvd 10 2020 Suite 410 City State Zip Code Transaction ID: 15275812 Corpus Christi TX 78401-2825 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Roland Barrera Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 950.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Johnston, David, N., Date of Receipt Mailing Address 1440 Beaumont Avenue 10 30 2020 City State Zip Code Transaction ID: 15276334 CA Cherry Valley 92223-6820 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Benefits Consultancy Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 253.00 Other (specify) 400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 64 OF 186 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kennedy-Simington, Dierdre, , CHRS, LPRT, Date of Receipt Mailing Address 1000 E Walnut Street, Suite 236 11 2020 City Zip Code State Transaction ID: 15276597 Pasadena CA 91106-5332 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BenAssist Health Insurance Services, L **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Little, Cathy, , , Date of Receipt Mailing Address 1145 2nd Street 2020 #A-269 11 City State Zip Code Transaction ID: 15276599 CA **Brentwood** 94513-2292 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Essential Exchange Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 402.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Smith, Michael, David, , Date of Receipt Mailing Address 6200 Stone Hill Farms Parkway 01 2020 City Zip Code State Transaction ID: 15276600 TX Flower Mound 75028-4312 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Brokerage, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify)

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

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

102.00

Use separate schedule(s) for each category of the

F	OR	LINE	NU	IMBER	PAGE	- (35	OF	186	
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jacquet, Tara, , , Date of Receipt Mailing Address 4584 North Rancho Drive 2020 11 City Zip Code State Transaction ID: 15276604 NV Las Vegas 89130-3478 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Branch Benefits Consultants** Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mayer, Alana, Marie, , Date of Receipt Mailing Address 3800 N. Central Ave 2020 9th Floor 11 City State Zip Code Transaction ID: 15276605 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Martin, M. Danny, , , Date of Receipt Mailing Address 1291 Jefferson Terrace 01 2020 City State Zip Code Transaction ID: 15276606 GΑ Macon 31201-6703 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) M. Danny Martin Insurance Advisor Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

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

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

F	OR	LINE	NU	MBER	PAGE	- (66	OF	186	
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bagley, Calvin, Dean, , Date of Receipt Mailing Address 9640 W. Tropicana Avenue, Suite 10 2020 11 City Zip Code State Transaction ID: 15276607 NV Las Vegas 89147-2604 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sun City Financial Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Shaw, Wanda, D.,, Date of Receipt Mailing Address 212 South 10 Street 11 2020 City State Zip Code Transaction ID: 15276619 Griffin GA 30224-2804 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Brokers of Georgia, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hoffman, Crystal, , SGS. Date of Receipt Mailing Address P.O. Box 709 02 2020 City State Zip Code Transaction ID: 15276622 TX Sugar Land 77487-0709 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Concepts, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 160.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

67 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Paul, E., , Date of Receipt Mailing Address 963 D Queen Street 2020 11 City Zip Code State Transaction ID: 15276623 CT Southington 06489-1282 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Paul E. Smith Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ameling, Mary, K.,, Date of Receipt Mailing Address 1202 Wood Lily Circle 2020 11 City State Zip Code Transaction ID: 15276625 NC Leland 28451-7686 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ganey, Byrd, & Dunn Insurance Group, I Producer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 390.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fitzgerald, Robert, Mark, Date of Receipt Mailing Address 185 Fowler St 03 2020 City State Zip Code Transaction ID: 15276907 GΑ Woodstock 30188-5023 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Robert Fitzgerald Insurance Agency, In Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1010.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) (check onlocated Summary Page

l	F	ЭR	LINE	NU	MBER	PAGE	- 6	86	OF	186	
l	(C	he	ck only	or	ıe)						
l		×	11a		11b		11c		12		
l			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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dorroh, Thomas, Allen, , Date of Receipt Mailing Address PO Box 996 2020 11 03 City State Zip Code Transaction ID: 15276908 TX Killeen 76540-0996 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **Employee Benefits Advisor BKCW Insurance Agency** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dinkel, Matthew, Kim, , Date of Receipt Mailing Address 13700 Six Mile Cypress Pkwy 11 2020 City State Zip Code Transaction ID: 15276911 Fort Myers FL 33912-4324 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AWA Insurance Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 935.00 C.

	4	4						
Full Name of Individual (Last, First, Middle Bibian, Jolene, , ,	Date of Receipt							
Mailing Address 255 Maple Ct # 212	Mailing Address 255 Maple Ct # 212							
City	State Zip Coo	le	Transaction ID: 15276913					
Ventura	CA 93003-	·9122	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		30.00					
Name of Employer (for Individual) Mills + Maple Insurance Solutions	Occupation (for I	ndividual)	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	370.00						
SUBTOTAL of Receipts This Page (optional).			145.00					

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

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

F	OR	LINE	NU	MBER	PAGE	- (69	OF	186	
(0	che	ck only	or	ne)						
	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name King, Carolyn, J.,, Date of Receipt Mailing Address 6 Country Lane 2020 11 03 City State Zip Code Transaction ID: 15276914 NJ 07461-4630 Sussex Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Broker Carolyn J King Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Stockstill, Julia Beckie, , , Date of Receipt Mailing Address 125 E. San Augustine 11 2020 City State Zip Code Transaction ID: 15276915 Deer Park TX 77536-4160 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stockstill & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 495,00 Other (specify)

Full Name of Individual (Last, First, Middle Ir Warwick, John, L., , Mailing Address 1907 B Mangrove Ave.							
City Chico	State CA	Zip Code 95926-2381	Transaction ID : 15276916 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		85.00				
Name of Employer (for Individual) John Warwick Insurance Services	Occu Broke	pation (for Individual) er	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 935.00					
SUBTOTAL of Receipts This Page (optional)			160.00				

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

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	PAGE	7	70 OF			186	
(0	che	ck only	or	ıe)							
	X	11a		11b		11c		12			
		13		14		15		16			17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cagliola, David, A.,, Date of Receipt Mailing Address 1041 Old Cassatt Rd 2020 11 City State Zip Code Transaction ID: 15277155 PA Berwyn 19312-1152 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Simkiss & Block **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1615.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Ashby, Thomas, F., LPRT, LUTC, Date of Receipt Mailing Address PO Box 70 2020 11 City State Zip Code Transaction ID: 15277157 NC Zirconia 28790-0070 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Healthcare Solutions, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mochan, Damian, , , Date of Receipt Mailing Address 100 Radnor Rd Ste 202 04 2020 City State Zip Code Transaction ID: 15277162 PΑ State College 16801-7986 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Central PA Benefit Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 262.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s)

F	OR	LINE	NU	MBER	PAGE	7	71	OF	186	
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Zavala, Tony, , , Date of Receipt Mailing Address 4814 Cranbrook Dr E 2020 City State Zip Code Transaction ID: 15277163 TX Colleyville 76034-4359 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Frost Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 693.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Nolimal, Frank, R, Date of Receipt Mailing Address 5740 S. Arville, Ste 204 2020 11 City State Zip Code Transaction ID: 15277165 NV Las Vegas 89118-3071 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Assurance Ltd. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rice, Patty, A., , Date of Receipt Mailing Address 3810 69th Ave W 04 2020 City Zip Code State Transaction ID: 15277166 WA Tacoma 98466-5173 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cascade Valley Insurance Senior Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 188.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the

ı	FOF	R LINE	NUMBER	PAGE	7	72 OF	186	
ı	(che	ck only	one)					
	×	11a	11b		11c		12	
ı		13	14		15		16	17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pedersen, Jill, L., REBC, Date of Receipt Mailing Address 16325 Boones Ferry Rd #204 2020 11 City Zip Code State Transaction ID: 15277168 OR Lake Oswego 97035-4297 Amount of Each Receipt this Period FEC ID number of contributing C 65.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Columbia Benefit Solutions. Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Trokey, Kevin, , , Date of Receipt Mailing Address 215 S. Kirkwood Rd 11 2020 Ste 201 City State Zip Code Transaction ID: 15277170 MO Saint Louis 63122-4359 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Q4intelligence LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Dillon, Michael, F., CEBS, Date of Receipt Mailing Address 329 Flint Street 05 2020 City Zip Code State Transaction ID: 15277591 NV Reno 89501-2005 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dillon Health President Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional).....

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

Use separate schedule(s)

FC)R	LINE	NU	MBER	:	PAGE	7	73	OF	186
(ch	nec	ck only	or	ıe)						
[X	11a		11b		11c		12		
		13		14		15		16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Buechler, Patricia, , , Date of Receipt Mailing Address 13811 S 50TH ST 2020 11 City Zip Code State Transaction ID: 15277592 NE Papillion 68133-2908 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Buechler Insurance Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hausladen, Victoria, , , Date of Receipt Mailing Address 3600 American Blvd Suite500 2020 11 City State Zip Code Transaction ID: 15277593 MN Bloomington 55431-4502 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gallagher Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Southan, Tamela, L., Date of Receipt Mailing Address 101 W. Renner Rd., Ste 330 05 2020 City State Zip Code Transaction ID: 15277594 TX Richardson 75082-2025 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Solutions By Design, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional).....

7

FOR LINE NUMBER: PAGE 74 OF (check only one) **X** 11a 11b 11c

186 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Grossman, Michael, , , Date of Receipt Mailing Address 1900 NW Loop 410 Suite 200 11 2020 City Zip Code State Transaction ID: 15277595 TX San Antonio 78213-2337 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Bank of San Antonio Insurance Grou **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kirk, Stephanie, S., , Date of Receipt Mailing Address 18887 State Highway 305 2020 Suite 300 11 City State Zip Code Transaction ID: 15277596 WA Poulsbo 98370-7461 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) J.C. Madison Inc Agency President & Licensed Producer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wham, Scott, , , Date of Receipt Mailing Address 145 E 5th Avenue 05 2020 City State Zip Code Transaction ID: 15277597 PΑ Conshohocken 19428-1789 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kistler Tiffany Benefits Director of Compliance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 ___

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

Use separate schedule(s)

F	OR	LINE	NU	IMBER	:	PAGE	75	OF	186
(0	he	ck only	or	ne)					
	×	11a		11b		11c	12		
		13		14		15	16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gussin, Craig, , CLU, LPRT,, Date of Receipt Mailing Address 701 Palomar Airport Road #260 2020 11 City Zip Code State Transaction ID: 15277598 CA Carlsbad 92011-1047 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Auerbach & Gussin Insurance and Finance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gualtieri, Peter, L., , Date of Receipt Mailing Address 1600 JFK Boulevard, Suite 1220 2020 11 City State Zip Code Transaction ID: 15277600 Philadelphia PA 19103-2810 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Savoy Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sale, Raymer, M., , Date of Receipt Mailing Address 2905 Premiere Parkway 05 2020 Suite 285 City State Zip Code Transaction ID: 15277601 GΑ Duluth 30097-5246 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E2E Benefits Services, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 230.00 SUBTOTAL of Receipts This Page (optional).....

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

Use separate schedule(s)

FOF	LINE	NUMBE	R:	PAGE	7	76 OI	F	186
(che	ck only	one)						
×	11a	11b		11c		12		
	13	14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Enders, Shannon, J.,, Date of Receipt Mailing Address 5797 Harvey Street - Suite A 2020 11 City Zip Code State Transaction ID: 15277602 MI Norton Shores 49444-6727 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lakeshore Employee Benefits **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 940.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Michaels, Norman, Joseph, , Date of Receipt Mailing Address 75 NO CENTREAL AVE 2020 11 City State Zip Code Transaction ID: 15277603 Elmsford NY 10523 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tristate Pay Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Dumancas, Harilyn, T., , Date of Receipt Mailing Address 500 NE Multnomah St. 05 2020 Attn: KPB14 City State Zip Code Transaction ID: 15277604 OR Portland 97232-2023 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Permanente Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional).....

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	7	77	OF	186
(0	che	ck only	or	ıe)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lasley, Mariette, , , Date of Receipt Mailing Address 6100 Palmaya Lane 2020 11 City State Zip Code Transaction ID: 15277607 CA Orangevale 95662-5903 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **Ameritas** Receipt For: Aggregate Year-to-Date ▼ Primary General 258.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** DeBruin, Teresa, F., , Date of Receipt Mailing Address 5441 Edgerton Drive 2020 11 City State Zip Code Transaction ID: 15277843 GA Peachtree Corners 30092-2185 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DeBruin Benefit Services, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Niederman, Tammy, Lyn, Date of Receipt Mailing Address 10042 Silver Maple Circle 06 2020 City Zip Code State Transaction ID: 15277848 CO Highlands Ranch 80129-5420 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Avesis, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 104.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

186 78 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Webb, Charles, A.,, Date of Receipt Mailing Address 2670 Electric Rd 2020 11 City Zip Code State Transaction ID: 15277849 VA Roanoke 24018-3511 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Innovative Insurance Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 2750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Whitfield, Pamela, A., , Date of Receipt Mailing Address 341 W. Tudor Rd. #207 2020 11 City State Zip Code Transaction ID: 15277850 AK Anchorage 99503-6648 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Elite-VB LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Cupo, Gary, V., , Date of Receipt Mailing Address Fairfields Commons 06 2020 271 Route 46 West Suite F-109 City Zip Code State Transaction ID: 15277851 NJ Fairfield 07004-2447 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Solutions Health Insurance Specialist Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 310.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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

Use separate schedule(s) for each category of the

F	OR	LINE	NU	IMBER	:	PAGE	. 7	79	OF	186
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sokol, David, , , Date of Receipt Mailing Address 901 Wilshire Drive 2020 Suite 330 11 06 City State Zip Code Transaction ID: 15277852 MI Troy 48084-5611 Amount of Each Receipt this Period FEC ID number of contributing 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President/CEO Wilshire Benefits Group Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 1870.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Combs, Susan, L., PPACA, ChH, Date of Receipt Mailing Address 234 Fifth Ave 11 2020 Ste 512 City State Zip Code Transaction ID: 15277853 NY New York 10001-7607 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Combs & Company, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Odegard, James, , , Date of Receipt Mailing Address 21308 John Milless Drive 06 2020 Suite 102 City State Zip Code Transaction ID: 15277854 MN Rogers 55374-4875 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Odegard Benefit Services, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 254.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NOMB
(check only one)

F	OR	LINE	NU	MBER	:	PAGE	: 8	30	OF	186
(0	che	ck only	or	ne)						
	×	11a		11b		11c		12		
		13		14		15		16		17

_			L				13	14	15	16	17
	ly information copied from such Reports and St for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
$ \rangle$	Health Underwriters Political Act	tion Co	omm	ittee							
Α.	Full Name of Individual (Last, First, Middle Initi Brachlow, Michael, , ,	al) or Fu	ıll Orga	anization Na	me		Date of	Receipt			
Λ.	Mailing Address 1133 Westchester Ave, Suite S	2220					Bato 01				
	Walling Address 1135 Westchestel Ave, Suite S	0229					11) D		2020	Y
	City	State		Zip Code					: 1527785		
	White Plains	NY		10604-3	546				Receipt th		
	FEC ID number of contributing federal political committee.	С					Amount	Of Lacif	Tieceipt tii	20.0	
	Name of Employer (for Individual) BenefitMall			ation (for Ind ive Sales Dir			Me	emo Item			
	Receipt For:	Aggrag	oto Vo	or to Doto	7						
	Primary General	Aggreg	ale re	ar-to-Date ▼		_					
	Other (specify) ▼	L			220.00	4					
	Full Name of Individual (Last, First, Middle Initi	al) or Fu	ıll Orga	anization Na	me						
В.	Frizzell, Paula, C., ,	, ,	- 3-				Date of	Receipt			
	Mailing Address 1890 Star Shoot Parkway						M M	, D	D / Y	YYY	Y
	Suite 170-408						11	0		2020	
	City	State		Zip Code			Trono	action ID	: 1527808	^	
	Lexington	KY		40509-45	566				Receipt th		
		-	-	1 1 1			7 tillount	Of Edon	11000ipt til	ilo i cilioa	
	FEC ID number of contributing federal political committee.	С					Ŀ		7	85.0	00
	Name of Employer (for Individual) Frizzell & Associates	(Occupa	ation (for Inc	dividual)		Me	emo Item			
	Receipt For:	Agarea	ate Ye	ar-to-Date ▼	7						
	Primary General	133.13				- L	Members	ship Form			
	Other (specify) ▼		- 1		340.00	4		,			
_	Full Name of Individual (Last, First, Middle Initi	al) or Fu	ıll Orga	anization Na	me		D				
C.	Deru, Scott, E., ,						Date of	Receipt			
	Mailing Address PO Box 336	01-1-		7:- 0-1-			11 -	0	7	2020	Y
	City	State		Zip Code 84041-09	137	<u> </u>			: 1527808		
	Layton			04041-09	າວ <i>ເ</i>		Amount	of Each	Receipt th	is Period	
	FEC ID number of contributing federal political committee.	С							, ,	100.0	00
	Name of Employer (for Individual)	(Occura	ation (for Ind	lividual)		Me	emo Item			
	Fringe Benefits Analysts	I	Preside		iividuai)						
	Receipt For:	Aggrea	ate Ye	ar-to-Date ▼	7						
	Primary General		-			¬					
	Other (specify)			4	1900.00	4					
S	UBTOTAL of Receipts This Page (optional)									205.0	00
						_	 	-			=
T	OTAL This Period (last page this line number of	nly))	•				1 4	

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	: 8	31	OF	186
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pendorf, Paul, , , Date of Receipt Mailing Address 31666 W. Nine Dr. 2020 11 City State Zip Code Transaction ID: 15278083 CA Laguna Niguel 92677-2955 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Independent Financial Group LLC Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Daidone, Grace, , , Date of Receipt Mailing Address 3301 S. Virginia 11 2020 City State Zip Code Transaction ID: 15278086 NV Reno 89502-4516 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A and H Insurance, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Chubet, Julie, , , Date of Receipt Mailing Address 240 Main St. 07 2020 Suite B City State Zip Code Transaction ID: 15278087 CT Farmington 06032-2975 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rogers Benefit Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	_	_	,	Ξ	Ξ	,	Ι	14	5.00	_	
TOTAL This Period (last page this line number only)			7	_	_	7	_	_	~	Ξ	

FOR LINE NUMBER: PAGE 82 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sautter, Robert, E., , Date of Receipt Mailing Address 36 South 400 West 2020 Suite 201 City State Zip Code Transaction ID: 15278089 UT Vineyard 84058-5370 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Paylogics** Client Adviser Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rome, Rebecca, , , Date of Receipt Mailing Address 115 Lessard St 2020 11 City State Zip Code Transaction ID: 15278090 Donaldsonville LA 70346-2505 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Humana Market Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mariscal, Debra, K., Date of Receipt Mailing Address P O Box 1116 07 2020 City State Zip Code Transaction ID: 15278091 CA Westminster 92684-1116 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Infinisoure Benefit Solutions **Business Develop Manager** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 92.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

Use separate schedule(s)

FC	DR	LINE	NU	MBER	:	PAGE	: 8	33 OF	186
(c	he	ck only	or	ie)					
	X	11a		11b		11c		12	
		13		14		15		16	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Galardini, Richard, F.,, Date of Receipt Mailing Address 7000 Stonewood Dr 2020 Suite 251 11 City State Zip Code Transaction ID: 15278116 PA Wexford 15090-7376 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Emerson Reid/My Benefit Advisor, LLC Chairman & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tandrow, Tara, , CIC, Date of Receipt Mailing Address P O Box 5815 2020 11 City State Zip Code Transaction ID: 15278117 ID Boise 83705-0815 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HUB International Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Theesfeld, Angela, A., , Date of Receipt Mailing Address 403 Toyah Brk 80 2020 City Zip Code State Transaction ID: 15278118 TX San Antonio 78258-2564 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Davidson Camp Insurance Services, LLC Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 197.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

F	OH	LINE	NU	MRFK	:	PAGE	 34	OF	100
(c	he	ck only	or	ne)					
[X	11a		11b		11c	12		
		13		14		15	16		17

_				1.0
	ny information copied from such Reports and Stator commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)	ian Caman	oitto o	
	Health Underwriters Political Act	ion Comin	iiilee	
Α.	Full Name of Individual (Last, First, Middle Initial Pendergraft, Ross, $W.$, ,	al) or Full Org	anization Name	Date of Receipt
	Mailing Address 21820 Burbank Blvd,			M = M / D = D / Y = Y = Y
	North Building, Suite 300 City	State	Zip Code	11 08 2020
	Woodland Hills	CA	91367-6476	Transaction ID : 15278120 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer (for Individual) Leavitt Group	Occup Broker	ation (for Individual) r	Memo Item
	Receipt For:	Aggregate Ye	ear-to-Date ▼	
	Primary General Other (specify) ▼		1010.00	
_	Full Name of Individual (Last, First, Middle Initia	al) or Full Org	anization Name	2. (2.)
В.	Redmon, Bridget, L., , Mailing Address 2684 Charlestown Road			Date of Receipt
	Walling Address 2004 Charlestown Road			11 08 2020
	City	State	Zip Code	Transaction ID: 15278121
	New Albany	IN	47150-2537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer (for Individual) ISU Insurance & Investment Group	Occup Broke	ation (for Individual) r	Memo Item
	Receipt For:	Aggregate Ye	ear-to-Date ▼	
	Primary General Other (specify) ▼		220.00	
	Other (specify)	-	220.00	
<u>С</u> .	Full Name of Individual (Last, First, Middle Initia Garcia, J., Michael, ,	al) or Full Org	anization Name	Date of Receipt
	Mailing Address 820 Jordan Street Suite 400			11 08 2020
	City Shreveport	State LA	Zip Code 71101-4522	Transaction ID : 15278122
	·	LA	71101-4322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer (for Individual) Moreman,Moore & Co. Inc.		ation (for Individual) Manager	Memo Item
	Receipt For:	Aggregate Ye	ear-to-Date ▼	
	Primary General Other (specify)		275.00	
	Carior (specify)		1.0.00	
s	SUBTOTAL of Receipts This Page (optional)		>	130.00
T-	OTAL This Period (last page this line number o	nlv)		

Name of Employer (for Individual)

Alexander & Haberman

Receipt For:

Use separate schedule(s)

FC	R	LINE	NU	MBER	:	PAGE	: 8	35	OF	186
(ch	nec	ck only	or	ie)						
[X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wright, Geoffrey, , , Date of Receipt Mailing Address 7 Horvath Drive 2020 11 09 City Zip Code State Transaction ID: 15278140 NY Ithaca 14850-9711 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) New York Life Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Black, Elizabeth, R., , Date of Receipt Mailing Address PO Box 847 11 2020 City State Zip Code Transaction ID: 15278143 McMinnville OR 97128-0847 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hagan Hamilton Ins. & Financial Servic Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 265.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Haberman, Joshua, , RHU. Date of Receipt Mailing Address 9301 Bryant Ave S 09 2020 Suite 105 City State Zip Code Transaction ID: 15278145 MN Bloomington 55420-3473 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee.

Primary General Other (specify)	Aggregate Year-to-Date ▼ 1700.00									
SUBTOTAL of Receipts This Page (optional)				_	_	,	_	235.	.00	
TOTAL This Period (last page this line number		7	_	_	7	_				

Occupation (for Individual)

Broker

Memo Item

186 FOR LINE NUMBER: PAGE 86 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sansevieri, Paul, F., , Date of Receipt Mailing Address P O Box 641 2020 11 09 City Zip Code State Transaction ID: 15278147 CA Corona Del Mar 92625-0641 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sansevieri Insurance Services, Inc. Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 2750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coley, Maggie, , , Date of Receipt Mailing Address 29 Olde Gate Court 2020 11 City State Zip Code Transaction ID: 15278149 GA Pooler 31322-8281 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Coley Benefit Services, Inc Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Renkar, Christopher, J., , Date of Receipt Mailing Address 8814 Fargo Road 09 2020 Suite 125 City State Zip Code Transaction ID: 15278151 VARichmond 23229-4628 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Independent Benefits LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) 322.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE	3	37	OF	 186
(0	che	ck only	or	ıe)						
	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McKittrick, Kristin, , , Date of Receipt Mailing Address 4020 Danley Drive 2020 11 09 City Zip Code State Transaction ID: 15278152 SD Rapid City 57702-6893 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mountain Plains Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Scholz, Paul, Joseph, , Date of Receipt Mailing Address 4221 N 203rd St 2020 Ste 200 11 City State Zip Code Transaction ID: 15278153 NE Elkhorn 68022-3474 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OCI Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 935.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Jimison, Charles, , , Date of Receipt Mailing Address 6185 Magnolia Ave Ste 319 09 2020 City State Zip Code Transaction ID: 15278154 CA Riverside 92506-2524 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Jimison Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

F	OR	LINE	NU	MBER	:	PAGE	38	OF	186
((che	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16	;	17

_				
Ar or	ly information copied from such Reports and St. for commercial purposes, other than using the	atements may r name and addr	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	Health Underwriters Political Act	ion Comm	ittee	
\angle				
	Full Name of Individual (Last, First, Middle Initi	al) or Full Orga	anization Name	
A.	Deagle, Michael, P., REBC,			Date of Receipt
	Mailing Address 935 National Parkway			M = M / D = D / Y = Y = Y
	Suite 93550			11 09 2020
	City	State	Zip Code	Transaction ID: 15278156
	Schaumburg	IL	60173-5150	Amount of Each Receipt this Period
	FEC ID number of contributing			100.07
	federal political committee.			166.67
	Name of Francisco (f. 1, P. 11, P.		Allow Many Long P. 1. L. D.	Mama Itara
	Name of Employer (for Individual)		ation (for Individual)	Memo Item
	BenAxis, Inc.	Broker		
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General		1000.07	
	Other (specify) ▼		1833.37	
_	Full Name of Individual (Last, First, Middle Initi	al) or Full Orga	anization Name	
В.	Meredith, Griffin, , ,			Date of Receipt
	Mailing Address 550 S 5th St Unit 303			M M / D D / Y Y Y Y
		1-	T	11 09 2020
	City	State	Zip Code	Transaction ID: 15278157
	Louisville	KY	40202-4309	Amount of Each Receipt this Period
	FEC ID number of contributing			05.00
	federal political committee.	C		85.00
				Memo Item
	Name of Employer (for Individual) Commonwealth Insurance Partners	· · · · · · · · · · · · · · · · · · ·	ation (for Individual)	Memo item
		Preside	ent	
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General		035.00	
	Other (specify) ▼	4	935.00	
_				
_	Full Name of Individual (Last, First, Middle Initi Lindsay, Robert, , CPCU, CLU,	ai) or Full Orga	anization Name	Date of Receipt
U.				·
	Mailing Address 2560 Fairway Ct			11 09 2020
	City	State	Zip Code	Transaction ID : 15278158
	Bettendorf	IA	52722-6206	
				Amount of Each Receipt this Period
	FEC ID number of contributing	C		85.00
	federal political committee.			
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Arthur J. Gallagher & Company	Broker	,	_
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General	riggrogate re	a. to bate .	
	Other (specify)		935.00	
		4	4 4	
s	UBTOTAL of Receipts This Page (optional)			336.67
\vdash	,			
Т	OTAL This Period (last page this line number of	only)		
1				

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

ı	FOF	R LINE	NUMBER	: PAGE	E 89 OF	186
	(che	ck only	one)			
	×	11a	11b	11c	12	
		13	14	15	16	17

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Health Underwriters Political	Action Committee	
/ 		
Full Name of Individual (Last, First, Middle A. Rice, Lori, R., ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 131 Interpark Blvd		11 09 2020
City	State Zip Code	Transaction ID : 15278159
San Antonio	TX 78216-1841	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) Marsh Wortham	Occupation (for Individual) Broker	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	330.00	
	4 4	
Full Name of Individual (Last, First, Middle 3. Mordo, David, , ACA Certif,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 331 Newman Springs Rd		M = M / D = D / Y = Y = Y
Bldg 1 Suite 106	Otal:	11 09 2020
City Red Renk	State Zip Code	Transaction ID : 15278160
Red Bank	NJ 07701-5690	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer (for Individual) BenefitMall	Occupation (for Individual) Broker	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	962.00	
Full Name of Individual (Last, First, Middle C. Kelley, Dianne, M., ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 7320 N La Cholla Blvd.		·
154-219		11 11 2020
City	State Zip Code	Transaction ID : 15279414
Tucson	AZ 85741-2309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	63.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Sandbrook Group	Ins. Broker	_
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify)	693.00	
SUBTOTAL of Receipts This Page (optional)		135.00
TOTAL This Period (last page this line numb	per only)	4 4

FOR LINE NUMBER: PAGE 90 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

186

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McNally, Carl, , , Date of Receipt Mailing Address 41 Acme Road 2020 Suite 2 City Zip Code State Transaction ID: 15279646 ME Brewer 04412-1543 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Med-A-Vision, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Banchy, Kate, , , Date of Receipt Mailing Address 4233 Southtowne Drive 2020 11 City State Zip Code Transaction ID: 15279647 Eau Claire WI 54701-2652 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Spectrum Insurance Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Knight, Ronald David, Date of Receipt Mailing Address PO Box 507 12 2020 City State Zip Code Transaction ID: 15279648 GΑ Carrollton 30112-0009 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) J. Smith Lanier & Co., Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General Monthly Contribution 935.00 Other (specify) 169.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - 7

Use separate schedule(s)

l	F	OR	LINE	NU	MBER	:	PAGE	91	OF	186
(check only one)										
l		X	11a		11b		11c	12		
l			13		14		15	16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Harvey, Darren, Michael, , Date of Receipt Mailing Address 7001 Heritae Village Plaza Suite 1 2020 City Zip Code State Transaction ID: 15279650 VA Gainesville 20155-3094 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Capital Group Benefits Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lee, Kelli, , , Date of Receipt Mailing Address 510 L Street 11 2020 Suite 270 City State Zip Code Transaction ID: 15279653 AK 99501-1949 Anchorage Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Moda Health **Executive Director** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Moore, David, R., , Date of Receipt Mailing Address PO Box 1006 12 2020 City Zip Code State Transaction ID: 15279654 NC Burlington 27216-1006 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) David R. Moore, CLU & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	Ξ	I	,	Ξ	Ī	,	I	9	0.00		
TOTAL This Period (last page this line number only)	_	Ξ	<u></u>	_	_	<u></u>	_	_	4	_	

FOR LINE NUMBER: PAGE 92 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Norris, Michael, A.,, Date of Receipt Mailing Address 295 E Palmer Street 11 2020 City Zip Code State Transaction ID: 15279659 NC Franklin 28734-3049 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wayah Employee Benefits / EbenConcepts **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hild, Donald, A., , Date of Receipt Mailing Address 2640 Willard Dairy Rd. 2020 Suite 122 11 City State Zip Code Transaction ID: 15279664 **HIGH POINT** NC 27265-8709 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Moon Benefits Group Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Vipond, Elizabeth, T., CLU, CFP, Date of Receipt Mailing Address 1209 Cumberland Av Unit 1903 12 2020 City State Zip Code Transaction ID: 15279666 FL Tampa 33602-4260 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Senior Health Advisor Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

186 93 OF 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hinman, Noel, , , Date of Receipt Mailing Address 303 West 80th Place10070 2020 PO Box 10070 City Zip Code State Transaction ID: 15279667 IN Merrillville 46410-5433 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Professional Services Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nigro, Samuel, , , Date of Receipt Mailing Address 17117 Oak Drive 2020 Suite D 11 City State Zip Code Transaction ID: 15279668 NE Omaha 68130-2193 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Compass Benefit Advisors Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 935.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Brannon, William, J., , Date of Receipt Mailing Address 2 Terrace Way, Suite B 12 2020 City State Zip Code Transaction ID: 15279671 NC Greensboro 27403-3663 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Group US, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	94	OF	186
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Blomgren, Laura, , CLTC, RHU,, Date of Receipt Mailing Address 935 National Parkway 2020 Suite 93550 City State Zip Code Transaction ID: 15279674 IL Schaumburg 60173-5150 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BenAxis. Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Moore, Robert, L.,, Date of Receipt Mailing Address 1644 Plank Rd 2020 11 City State Zip Code Transaction ID: 15279675 Duncansville PA 16635-8376 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) L.R. Webber Associates, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fairbairn, Nicole, , , Date of Receipt Mailing Address Creative Insurance Concepts Inc 12 2020 8069 Little Circle Rd City State Zip Code Transaction ID: 15279676 IN Noblesville 46060-1071 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Creative Insurance Concepts Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 95 OF 186 Use separate schedule(s) for each category of the Detailed Summary Page

		LIIVL				IAGL	- `	,,	Oi	
(0	he	ck only	or	ie)						
	X	11a		11b		11c		12		
		13		14		15		16		17

						13		14	15	16	17
	ny information copied from such Reports and Stator commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
$ \rangle$	Health Underwriters Political Act	ion Co	mmi	ittee							
<u></u>	Full Name of Individual (Last, First, Middle Initia	al) or Full	Orga	nization Name							
Α.	Riensche, Glen, E., ,					Date o	of Re	eceipt			
	Mailing Address 6101 Havelock Ave					11	VI /	12	/ Y	2020	Y
	City	State		Zip Code			sact		1527967		
	Lincoln	NE		68507-1268					eceipt thi		
	FEC ID number of contributing federal political committee.	С					Ξ			30.	
	Name of Employer (for Individual)	0	ccupa	tion (for Individual)		- N	/lemo	Item			
	Advanced Insurance Services, Inc			al Professional							
	Receipt For:	Aggrega	te Yea	ar-to-Date ▼		1					
	Primary General		_	200	20.00						
	Other (specify) ▼		-	33	30.00						
_	Full Name of Individual (Last, First, Middle Initia	al) or Full	Orga	nization Name							
В.	Stewart, Diana, , ,					Date o	of Re	eceipt			
	Mailing Address 3111 C Street, Suite 500					11	/	12	/ Y	2020	Y
	City	State		Zip Code		Trans	sacti	ion ID :	15279679	•	
	Anchorage	AK		99503-3973		Amour	nt of	Each F	eceipt thi	is Period	
	FEC ID number of contributing federal political committee.	С					Ξ	7	-	42.	00
	Name of Employer (for Individual) RISQ Consulting	I .	ccupa Sr. Acc	tion (for Individual) t Mgr		l N	/lemo	Item			
	Receipt For:	Aggrega	te Yea	ar-to-Date ▼							
	Primary General Other (specify) ▼		•	46	62.00						
_	Full Name of Individual (Last, First, Middle Initia	al) or Full	Orga	nization Name							
C.	West, James, E., CIC,FLMI,					Date of	of Re	eceipt			
	Mailing Address 28875 Frost Lane	12		I		M 11		12	J L	2020	Y
	City Adel	State IA		Zip Code 50003-2212					1527968		
		_	_	00000 ZZ 1Z	_	Amour	IL OT	⊏acn H	eceipt thi	is Period	
	FEC ID number of contributing federal political committee.	C				Ŀ	_	,	,	30.	00
	Name of Employer (for Individual) NCMIC		ccupa roker	tion (for Individual)			/lemo) Item			
	Receipt For:	Aggrega	te Yea	ar-to-Date ▼]					
	Primary General		-		20.00						
	Other (specify)		-	33	30.00						
							-	-		102.0	00
S	SUBTOTAL of Receipts This Page (optional)				·····•	늗	+	,		102.0	00
Т	OTAL This Period (last page this line number of	nly)			·····•	L		7			

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

FOR LINE NUMBER: PAGE 96 OF Use separate schedule(s)

F	OR	LINE	PAGE	: (96	OF	•	186			
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16	;		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gertz, Josh, , , Date of Receipt Mailing Address 353 N Clark St 2020 11 12 City Zip Code State Transaction ID: 15279682 IL Chicago 60654-4704 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) ALLIANT INSURANCE Compliance Project Specialist Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Perry, Amy, , REBC, Date of Receipt Mailing Address 851 International Pkwy 2020 Suite 120 11 City State Zip Code Transaction ID: 15279683 TX Richardson 75081-2804 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OneDigital Senior Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. May, Robert, L., Date of Receipt Mailing Address 1416 East Main Suite A 12 2020 City State Zip Code Transaction ID: 15279686 WA Puyallup 98372-3170 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Robert L. May & Associates, Inc. DBA H **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 97 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Acuna, David, , , Date of Receipt Mailing Address 17284 Slover Ave. Ste. 111 2020 City Zip Code State Transaction ID: 15279692 CA **Fontana** 92337-7584 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Permanente Receipt For: Aggregate Year-to-Date ▼ Primary General 215.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barrett, William, J., CLU, ChFC, Date of Receipt Mailing Address 6 Keswick Commons 2020 11 City State Zip Code Transaction ID: 15279694 New Albany OH 43054-8231 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aetna Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Reid, Krys, , , Date of Receipt Mailing Address 582 Lynnhaven Parkway, #200 12 2020 City Zip Code State Transaction ID: 15280381 VAVirginia Beach 23452-7386 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tower Benefit Consultants, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General **BofA Deposit** 5000.00 Other (specify) 2045.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 98 OF

	1 01	ITAGE		,, ,	/ 1	.00					
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	×	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Denz, Stephanie, , , Date of Receipt Mailing Address 1100 Wild Ginger Lane 2020 13 City Zip Code State Transaction ID: 15280409 FL Fleming Island 32003-3224 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aetna Marketing Director Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Fabini, Jeff, , , Date of Receipt Mailing Address P.O.Box 10806 11 2020 632 W Hamilton Rd City State Zip Code Transaction ID: 15280411 Fort Wayne IN 46854-0806 Amount of Each Receipt this Period FEC ID number of contributing 22.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Secure Benefit Solutions Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 242.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schroeder, Scott, R., Date of Receipt Mailing Address 300 East First Street 13 2020 P O Box 327 City State Zip Code Transaction ID: 15280412 IΑ Mechanicsville 52306-0327 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schroeder & Associates President/Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify)

										 _
SUBTOTAL of Receipts This Page (optional)	Ξ	Ī	,	I		,		13	7.00	
TOTAL This Period (last page this line number only)	_	Ξ	-	Ξ	Ξ	-	Ξ	Ξ	-	
·										 -

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

99 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Patrician, James, P.,, Date of Receipt Mailing Address 923 N. Plum Grove Road, Suite C 2020 13 City Zip Code State Transaction ID: 15280419 IL Schaumburg 60173-5152 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Coordinated Benefits Company President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Blakely, Russ, , , Date of Receipt Mailing Address 246 E 11th Street 2020 Suite 302 11 City State Zip Code Transaction ID: 15280420 TN Chattanooga 37402-4269 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Russ Blakely & Associates, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 935.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Daugherty, Cathy, M., Date of Receipt Mailing Address 1500 Quail St 13 2020 Ste 570 City State Zip Code Transaction ID: 15280421 CA Newport Beach 92660-2752 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Bridgeport Benefits** Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186 FOR LINE NUMBER: PAGE 100 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schiebel, Al, C., , Date of Receipt Mailing Address 10 Glenlake Parkway 2020 North Tower, Suite 1050 11 13 City Zip Code State Transaction ID: 15280422 GA Atlanta 30328-3495 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schiebel & Associates, LLC dba Shopben **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 545.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Spell, Richard, Blake, , Date of Receipt Mailing Address 6176 Centre Camp Ct. 2020 11 City State Zip Code Transaction ID: 15280423 Greensboro NC 27455-8315 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mark III Employee Benefits Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 220.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sherrill, David, M., , Date of Receipt Mailing Address 498 Palm Springs Dr, Suite 270 13 2020 Zip Code State Transaction ID: 15280424 FL Altamonte Springs 32701-7805 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sherrill Insurance Brokerage Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) 95.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 101 OF 186 Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the **X** 11a 11b 12 11c Detailed Summary Page 13 14 16 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Matznick, Michael, E.,, Date of Receipt Mailing Address 3150 N. Elm Street 2020 Suite 201 11 13 City State Zip Code Transaction ID: 15280425 NC 27408-3840 Greensboro Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Name of Employer (for Individual) Occupation (for Individual) Memo Item Broker EbenConcepts

	Heceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	
3.	Full Name of Individual (Last, First, Middle Initi. Masucci, Joseph, A., , Mailing Address 333 Rouser Road Building 4 Suite 401 City Moon Township FEC ID number of contributing federal political committee. Name of Employer (for Individual) Health Benefit Services LLC Receipt For: Primary General Other (specify) Other (specify)	State Zip Code PA 15108-2779 C Occupation (for Individual) Insurance Broker Aggregate Year-to-Date 935.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S .	Full Name of Individual (Last, First, Middle Initi-Anderson, Corey, Lee, , Mailing Address 11247 69th St NE Albertville City Albertville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Corey Anderson Insurance Services Receipt For: Primary General Other (specify)	State Zip Code MN 55301-4576 C Occupation (for Individual) Broker Aggregate Year-to-Date 570.00	Date of Receipt M 1
	UBTOTAL of Receipts This Page (optional)		157.00 FEC Schedule A (Form 3X) Rev. 06/20
			, ,

FOR LINE NUMBER: PAGE 102 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brooks, Timothy, , , Date of Receipt Mailing Address 4008 S Elm Pl. Ste C 2020 11 14 City Zip Code State Transaction ID: 15280726 OK Broken Arrow 74011-2021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Flippo Insurance Insurance Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnson, David, S., LUTCF, RHU,, Date of Receipt Mailing Address 12138 Big Canoe 2020 11 City State Zip Code Transaction ID: 15280728 GA Big Canoe 30143-5157 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) David S. Johnson Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hensley, Lizette, , , Date of Receipt Mailing Address PO Box 84 14 2020 City State Zip Code Transaction ID: 15280730 TX Royse City 75189-0084 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hensley Insurance Solutions Agency Inc Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186 FOR LINE NUMBER: PAGE 103 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Castellani, Lorelei, G., , Date of Receipt Mailing Address PO Box 905 2020 11 14 City Zip Code State Transaction ID: 15280734 NJ Branchville 07826-0905 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Guidance Systems **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sutton, Trent, J., , Date of Receipt Mailing Address 2824 Poleline Rd., # A 2020 11 City State Zip Code Transaction ID: 15280735 ID Pocatello 83201-6177 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Independent Health Insurance Broker Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Pierce, Mary, Jeannette, Date of Receipt Mailing Address 1306 SE 105th Ct 14 2020 City Zip Code State Transaction ID: 15280736 WA Vancouver 98664-4746 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Permanente Northwest Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Use separate schedule(s)

FO	R LINE	NUMBER	:	PAGE	: 1	04 OF	186		
(ch	eck only	one)							
7	1 11a	11b		11c		12			
	13	14		15		16	17		

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hain, Erica, R.,, Date of Receipt Mailing Address MC 32-20 2020 100 North Academy Avenue 15 City Zip Code State Transaction ID: 15280779 PA Danville 17822-0001 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Director, Commercial Sales Geisinger Health Plan Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mundell, Nancy, , , Date of Receipt Mailing Address 21486 Countryside Drive 15 2020 11 City State Zip Code Transaction ID: 15280781 CA Lake Forest 92630-6558 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 220.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rider, Susan, M., MS, REBC, Date of Receipt Mailing Address 803 Touralosa Dr 15 2020 City State Zip Code Transaction ID: 15280782 IN Westfield 46074-7303 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preventia Group, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 891.00 Other (specify) 205.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 105 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(che	11a 13	one) 11b 14	11c 15	12 16	17
ny information copied from such Reports and Statements may for commercial purposes, other than using the name and a					_		

Ar or NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bellman, Mark, , , Date of Receipt Mailing Address 9120 Branch Hollow Dr 2020 City State Zip Code Transaction ID: 15280783 TX **Dallas** 75243-7510 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hepscher, William, , , Date of Receipt Mailing Address 38168 Medical Center Avenue 2020 City State Zip Code Transaction ID: 15280784 FL Zephyrhills 33540-1380 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Canadian Medstore Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 595.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Easterling, Sy, , , Date of Receipt Mailing Address 213 Porter Ave 15 2020 City State Zip Code Transaction ID: 15280785 MS Biloxi 39530-2950 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stewart Sneed Hewes/BancorpSouth Insur Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: (check only one) **X** 11a 11b 11c

186 PAGE 106 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skinner, Douglas, , , Date of Receipt Mailing Address PO Box 1277 2020 11 15 City Zip Code State Transaction ID: 15280786 IN Bloomington 47402-1277 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hoosier Dental Plans **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sullivan, Audra, I., SGS, Date of Receipt Mailing Address 1201 N Watson Rd 16 2020 Ste 287 11 City State Zip Code Transaction ID: 15280807 TX Arlington 76006-6222 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vogue Insurance Agency, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hynes, Bernard, J., , Date of Receipt Mailing Address 3200 N. Central Ave. 16 2020 Suite 1170 City State Zip Code Transaction ID: 15280810 ΑZ Phoenix 85012-2419 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hynes Benefits Consulting, LLC Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE

(check only one)

FOR LINE NUMBER:						PAGE	: 1	07	ΟF		100
(0	(check only one)										
`		1		i I				1			
	×	11a		11b		11c		12			
		13		14		15		16			17

		13 14 15 16 17				
	d Statements may not be sold or used by any per the name and address of any political committee to					
NAME OF COMMITTEE (In Full)						
Health Underwriters Political	Action Committee					
Full Name of Individual (Last, First, Middle Fanuele, Dominick, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fanuele, Dominick, , ,					
Mailing Address 214 Little Falls Rd., 2nd Flo	oor	11 16 2020				
City Fairfield	State Zip Code NJ 07004-2637	Transaction ID : 15280811 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	42.00				
Name of Employer (for Individual) Fanuele Financial Group LLC	Occupation (for Individual) Broker	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	462.00					
Full Name of Individual (Last, First, Middle Frankel, Teri, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 21820 Burbank Blvd Suite 300	11 16 2020					
City Woodland Hills	State Zip Code CA 91367-6485	Transaction ID : 15280812				
FEC ID number of contributing		Amount of Each Receipt this Period				
federal political committee.	· (,					
Name of Employer (for Individual) Leavitt Insurance Services of Los Ange	Occupation (for Individual)	Memo Item				
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	330.00					
Full Name of Individual (Last, First, Middle Owens, David, Patrick, ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 101 Eisenhower Parkway Second Floor		11 16 2020				
City Roseland	State	Transaction ID: 15280815				
FEC ID number of contributing	2.00	Amount of Each Receipt this Period				
federal political committee.	[C]	85.00				
Name of Employer (for Individual) E.B. Cohen & Co., Inc.	Occupation (for Individual) Principal	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	935.00					
SUBTOTAL of Receipts This Page (optional)	>	157.00				
TOTAL This Period (last page this line numb	per only)					

Use separate schedule(s)

FO	R LINE	NUMBER	PAGE	1	08 OF		186		
(ch	(check only one)								
	1 1a	11b		11c		12			
	13	14		15		16		17	

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Biers, Danielle, , , Date of Receipt Mailing Address 3800 N. Central Ave., 9th Floor 2020 16 City Zip Code State Transaction ID: 15280818 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Douglas, James, F., , Date of Receipt Mailing Address 5721 Woodboro Dr 2020 11 City State Zip Code Transaction ID: 15280820 CA **Huntington Beach** 92649-4949 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Sync Insurance Vice President Employee Benefits Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 385.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Marinelli, Aaron, M. J., , Date of Receipt Mailing Address 36711 American Way 17 2020 Suite 2F City State Zip Code Transaction ID: 15280846 OH Avon 44011-4061 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magis Advisory Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1360.00 Other (specify) 235.00 SUBTOTAL of Receipts This Page (optional).....

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

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	1	09 ()F	186
(0	che	ck only	or	ie)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bly, Perry, J.,, Date of Receipt Mailing Address 6340 South Western Ave 2020 Ste 120 17 City State Zip Code Transaction ID: 15280847 SD Sioux Falls 57108-3413 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pernell Insurance Agency, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. King, Colleen, , , Date of Receipt Mailing Address 8427 Beckford Ave. 2020 11 City State Zip Code Transaction ID: 15280849 CA Northridge 91324-4208 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Colleen King Insurance Agency, Inc. Founder/Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Patton, Lee, R., Date of Receipt Mailing Address 1112 Maple Street 17 2020 City State Zip Code Transaction ID: 15280850 IΑ West Des Moines 50265-4420 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Associations Marketing Group, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X)

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	1	10 OF		186
(0	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ramsay, Robert, Gene, , Date of Receipt Mailing Address 1836 Harrison Drive 2020 17 City Zip Code State Transaction ID: 15280851 AL Gardendale 35071-3468 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefits Advisor Your Benefits Advisor Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tompkins, Daniel, R., JD, MBA, Date of Receipt Mailing Address 1720 Windward Concourse 2020 Suite 290 11 City State Zip Code Transaction ID: 15280852 GA Alpharetta 30005-2291 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Admin America, Înc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 935.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bailey, Andrea, , , Date of Receipt Mailing Address 3800 North Central Ave 17 2020 9th Floor City State Zip Code Transaction ID: 15280855 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates President Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 111 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Samuels, Cindy, , , Date of Receipt Mailing Address 8430 W Lake Mead #100 2020 18 City Zip Code State Transaction ID: 15280973 NV Las Vegas 89128-7674 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Concepts of Nevada Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buechler, Anthony, C., , Date of Receipt Mailing Address 13811 S 50TH ST 18 2020 11 City State Zip Code Transaction ID: 15280974 NE Papillion 68133-2908 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Buechler Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Abels, Paula, , , Date of Receipt Mailing Address 195 Rosebay Drive 18 2020 City State Zip Code Transaction ID: 15280978 CA **Encinitas** 92024-3323 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Abels Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

186

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kidder, Sue, , , Date of Receipt Mailing Address 2700 Newport Blvd Ste 190 11 18 2020 City State Zip Code Transaction ID: 15280981 CA Newport Beach 92663-3735 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sue Kidder Health & Insurance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Villagran, Denise, S., MBA, Date of Receipt Mailing Address 1016 Santa Fe St, #205 18 2020 11 City State Zip Code Transaction ID: 15280982 Corpus Christi TX 78404-2343 Amount of Each Receipt this Period FEC ID number of contributing 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Entrust, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1058.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Powell, Rita, H., , Date of Receipt Mailing Address 3342 Greystone Way 19 2020 City State Zip Code Transaction ID: 15281847 GΑ Valdosta 31605-1096 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) H&H Insurance Solutions, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 693.00 Other (specify) 156.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	PAGE	1	13 OF	186			
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16		17	

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hillenbrand, John, Ryan, , Date of Receipt Mailing Address 14500 S. Outer 40 Road 2020 Ste 203 11 19 City State Zip Code Transaction ID: 15281850 MO Chesterfield 63017-5736 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hillenbrand & Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brooks, Mark, , , Date of Receipt Mailing Address P.O. Box 10876 19 2020 11 City State Zip Code Transaction ID: 15281851 VA Lynchburg 24506-0876 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Personal Design Financial Services, In Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stewart, Rachel, , , Date of Receipt Mailing Address 18130 N 64th Dr W 19 2020 City State Zip Code Transaction ID: 15281852 ΑZ Glendale 85308-1068 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RS** Assurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 430.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional).....

7

FOR LINE NUMBER: PAGE 114 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Underhill, Charles, E., , Date of Receipt Mailing Address PO Box 626 2020 11 19 City Zip Code State Transaction ID: 15281853 CA Woodland Hills 91365-0626 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Underhill Insurance Agency Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 278.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wall, Mark, , , Date of Receipt Mailing Address Post Office Box 2845 2020 11 City State Zip Code Transaction ID: 15282076 MS Ridgeland 39158-2845 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mark Wall & Company, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hall, Dwight, , CHC, LUTCF, Date of Receipt Mailing Address 6107 Hazelwood Ave. 20 2020 City State Zip Code Transaction ID: 15282527 IN Indianapolis 46228-1316 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) D Hall & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 292.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 115 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Aimee, , , Date of Receipt Mailing Address 3111 C Street, Suite 500 11 20 2020 City Zip Code State Transaction ID: 15282529 AK Anchorage 99503-3973 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) RISQ Consulting Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bartholomew, Rhonda, , CHRS, Date of Receipt Mailing Address PO Box 5099 2020 11 City State Zip Code Transaction ID: 15282531 ID Twin Falls 83303-5099 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HUB International **Group Division Manager** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Raymond, Garrin, Mitchell, , Date of Receipt Mailing Address 13201 N.W. Fwy. Suite 265 20 2020 City Zip Code State Transaction ID: 15282534 TX Houston 77040-6165 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest General Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

186 PAGE 116 OF 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moore, Adrian, E., , Date of Receipt Mailing Address 7936 Covey Chase Drive 2020 11 City Zip Code State Transaction ID: 15282751 NC Charlotte 28210-7231 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Regional Sales Director **IHC Specialty Benefits** Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Farrell, Jennifer, Liane, , Date of Receipt Mailing Address 3800 North Central Avenue 2020 9th Floor 11 City State Zip Code Transaction ID: 15282754 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1010.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Greene, Sean, C., , Date of Receipt Mailing Address 6096 Innovation Way 2020 City State Zip Code Transaction ID: 15282759 CA Carlsbad 92009-1741 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Morrison Insurance Services **Employee Benefit Specialist** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 117 OF 186 Use separate schedule(s) for each category of the Detailed Summary Page

'''	011		110	IVIDEI		1 / (
(C	he	ck only	or	ıe)				
	X	11a		11b		11c	12	
		13		14		15	16	17

						13	14	15	16	17
	ny information copied from such Reports and St for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full)									
$ \rangle$	Health Underwriters Political Act	tion Com	mit	ttee						
	Full Name of Individual (Last, First, Middle Initial	al) or Full O)rgar	nization Name						
Α.		,	Ü			Date of	Receipt			
	Mailing Address 2055 Woodlake Drive					M M	/ D	D / Y	Y	Y
						11	2		2020	
	City	State		Zip Code		Trans	action ID	: 15282764		
	Benton	LA		71006-9307		Amount	of Fach	Receipt this	s Period	
	FEC ID number of contributing federal political committee.	С	I					7	250.0	0
	N (5 1 %)	10				Пм				
	Name of Employer (for Individual)		•	ion (for Individual)		IVIE	emo Item			
	Blue Cross Blue Shield of LA	Brok	ker							
	Receipt For:	Aggregate	Yea	r-to-Date ▼						
	Primary General			250.00						
	Other (specify) ▼		7	250.00						
_										
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rgar	nization Name		D				
В.	Kohlsdorf, Eric, , ,					Date of	Receipt			
	Mailing Address 1501 Ingersoll Ave					M = M	/ D		Y	Υ
	Suite 200	1		I=		11	22	2	2020	
	City	State		Zip Code	-	Trans	action ID	: 15282784		
	Des Moines	IA .		50309-3102		Amount	of Each	Receipt this	s Period	
	FEC ID number of contributing								05.0	0
	federal political committee.	C							85.0	0
						NA.	emo Item			
	Name of Employer (for Individual) Prisma Strategies			ion (for Individual)		IVIC	enio item			
		Brol	Ker							
	Receipt For:	Aggregate	Yea	r-to-Date ▼						
	Primary General			690.00						
	Other (specify) ▼		,	680.00						
_		n = :: -								
C.	Full Name of Individual (Last, First, Middle Initi Burns, Patrick, , CEBS,	al) or Full O	rgar	nization Name		Doto of	Doggint			
C.						Date of	Receipt			
	Mailing Address 5653 Maxwelton Road					м - м 11	/ D 2		2020	Y
	City	State		Zip Code				: 15282786		
	Oakland	CA		94618-2654	H					
			_			Amount	OI Eacii	Receipt this	s renou	
	FEC ID number of contributing federal political committee.	C							170.0	0
	rederal political committee.		_				-	,		
	Name of Employer (for Individual)	Occı	upati	ion (for Individual)		Me	emo Item			
	Burns Employee Benefits Insurance Serv	Brok	ker							
	Receipt For:	Aggregate	Yea	r-to-Date ▼						
	Primary General		. 54		— I					
	Other (specify)	1	-	1870.00						
			7	7-11-4						
										_
s	SUBTOTAL of Receipts This Page (optional)				▶				505.0	0
	<u>·</u>									-
Т	OTAL This Period (last page this line number of	nly)			▶		-			

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

Use separate schedule(s)

FC)R	LINE	NU	MBER	:	PAGE	1	18 OF		186
(check only one)										
[X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wild, Trei,,, Date of Receipt Mailing Address 3724 Hearst Castle Way 2020 11 City Zip Code State Transaction ID: 15282787 TX Plano 75025-3719 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Protect Plans **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Boaz, Daniel, J.,, Date of Receipt Mailing Address 5565 Roberts Drive 2020 Suite 100 11 City State Zip Code Transaction ID: 15282788 GA Atlanta 30338-3350 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HealthLife Group, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Qualizza, Jacqueline, , , Date of Receipt Mailing Address 12877 W. 151st Street 22 2020 City State Zip Code Transaction ID: 15282790 KS Olathe 66062-9707 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Associate Insurance Services, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 119 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Siino, Thomas, , RHU, Date of Receipt Mailing Address 1126 Clifton Avenue 2020 11 City Zip Code State Transaction ID: 15282822 NJ Clifton 07013-3622 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Executive Benefits Group, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Pleasants, Jennifer, , , Date of Receipt Mailing Address 6726 Stuyvesant Ct. 2020 11 City State Zip Code Transaction ID: 15282823 Corpus Christi TX 78414-4269 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare Employer & Individual Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Goodman, Robert, Hiram, Date of Receipt Mailing Address 1 Independence Plaza 23 2020 Suite 800 City State Zip Code Transaction ID: 15282824 AL Birmingham 35209-2639 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) McGriff Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 120 OF Use separate schedule(s) for each category of the Detailed Summary Page

١,			140	IVIDEI		17101	- '	20 01	
(c	he	ck only	or	ie)					
	X	11a		11b		11c		12	
		13		14		15		16	17

186

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Winson, Shelly, K.,, Date of Receipt Mailing Address PO Box 1914 2020 11 City State Zip Code Transaction ID: 15282825 ΑZ Chandler 85244-1914 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) True Choice Benefits LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baskett, John, , , Date of Receipt Mailing Address 2601C Blanding Ave #222 11 2020 City State Zip Code Transaction ID: 15282829 CA 94501-1507 Alameda Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) John Baskett Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00

Full Name of Individual (Last, First, Middle Braner, Jodie, E., ,	Initial) or Full Org	ganization Name	Date of Receipt
Mailing Address 1820 Lake Ebenezer Trl			11 23 2020
City	State	Zip Code	Transaction ID: 15282831
Marietta	GA	30066-4457	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00 Memo Item
Name of Employer (for Individual)	Occup Broke	oation (for Individual) r	Memo rem
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 330.00	
SUBTOTAL of Receipts This Page (optional).			90.00

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

7

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

l	FOF	LINE	NU	MBER	:	PAGE	1	21 OF	=	186
	(che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Griffey, Patricia, A., CSA, RHU,, Date of Receipt Mailing Address 56294 Primrose Cir 2020 11 City Zip Code State Transaction ID: 15282834 IN Elkhart 46516-1509 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Page 1 Medicare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kern, Roy, W.,, Date of Receipt Mailing Address 3015 South Fort Avenue, Suite B 11 2020 City State Zip Code Transaction ID: 15282840 MO Springfield 65807-4311 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kern Insurance Services, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 275.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Franke, Gary, MBA, Date of Receipt Mailing Address 1100 Bellevue Way NE 23 2020 Suite 8A-545 City Zip Code State Transaction ID: 15282841 WA Bellevue 98004-4280 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Achieve Alpha Insurance, LLC Health Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify)

											_
SUBTOTAL of Receipts This Page (optional)	_		,	Ξ		,	Ī	15	5.00		
TOTAL This Period (last page this line number only)	_	_	-	_	_	-	_	_	40.	_	
·											

186 FOR LINE NUMBER: PAGE 122 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Freeman, Joann, , , Date of Receipt Mailing Address 625 Oak Street 2020 City Zip Code State Transaction ID: 15282845 CA Laguna Beach 92651-2920 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Freeman Laguna Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 430.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McClaskey, Barbara, A.,, Date of Receipt Mailing Address 1965 Pine Street 2020 11 City State Zip Code Transaction ID: 15282846 CA Redding 96001-1921 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Barbara McClaskey Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 462.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Reeves, Valerie, , , Date of Receipt Mailing Address 3702 Brownsboro Rd 23 2020 City State Zip Code Transaction ID: 15282847 KY Louisville 40207-1820 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preferred Benefits, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 114.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 ___

FOR LINE NUMBER: PAGE 123 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

186

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tellesbo-Kembel, Marsha, , , Date of Receipt Mailing Address 1001 4th Avenue, 44th Floor 11 2020 City Zip Code State Transaction ID: 15282848 WA Seattle 98154-1119 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tellesbo & Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1870.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clingan, Nedra, C., GBDS, LPRT, Date of Receipt Mailing Address 13222 Huisache Way 2020 11 City State Zip Code Transaction ID: 15282853 TX Helotes 78023-3606 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Villagran, Denise, S., MBA, Date of Receipt Mailing Address 1016 Santa Fe St, #205 23 2020 City State Zip Code Transaction ID: PR433061223939 TX Corpus Christi 78404-2343 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Entrust, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 1100.00 Other (specify) 242.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 124 OF

Use separate schedule(s)	(che	ck only	or	ne)			
for each category of the Detailed Summary Page	×	11a		11b	11c	12	
_ come community conge		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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schreder, Lynn, M.,, Date of Receipt Mailing Address 130 North 25th Street 2020 City Zip Code State Transaction ID: PR433076123939 IΑ Fort Dodge 50501-4338 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) KHI Solutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 1075.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Adams, Carla, , CBC, GBA, Date of Receipt Mailing Address 210 Bridget Dr 2020 11 City State Zip Code Transaction ID: PR433095023939 Marble Falls TX 78654-4127 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Warner Pacific Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) ▼ 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Deacon, Joseph, H., Date of Receipt Mailing Address 221 1/2 Hale Street 23 2020 PO Box 2831 City Zip Code State Transaction ID: PR433129323939 WV Charleston 25301-2207 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Deacon & Deacon Insurance Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 172.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

FOR LINE NOMBER: (check only one)

FC	JH	LINE	NU	MBER		PAGE	: 1	25 Ur	-	100
(check only one)										
-	×	11a		11b		11c		12		
Γ		13		14		15		16		17

	ny information copied from such Reports and Stator commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Health Underwriters Political Act	ion Comm	ittee	
Α.		al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 8420 West Dodge Road			11 23 2020
	Suite 510 City	State	Zip Code	Transaction ID : PR433168123939
	Omaha	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer (for Individual) Senior Market Sales, Inc.	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$85.00 Monthly)		
В.	Full Name of Individual (Last, First, Middle Initi Barrett, William, J., CLU, ChFC,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 6 Keswick Commons	Ctoto	7in Codo	11 23 2020
	City New Albany	State	Zip Code 43054-8231	Transaction ID : PR433180623939
	FEC ID number of contributing federal political committee.	С	43034-0231	Amount of Each Receipt this Period 30.00
	Name of Employer (for Individual) Aetna	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 330,00	P/R Deduction (\$30.00 Monthly)
С .	Full Name of Individual (Last, First, Middle Initi Christense, H Elizabeth, , ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 3013 Sonora Canyon Rd			11 23 2020
	City Weatherford	State TX	Zip Code 76087-8215	Transaction ID : PR433187723939 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) United Senior Services of Texas	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	P/R Deduction (\$30.00 Monthly)		
H	SUBTOTAL of Receipts This Page (optional)			145.00

186 FOR LINE NUMBER: PAGE 126 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rifkin, Robert, L., , Date of Receipt Mailing Address 7 Stonewall Lane 2020 City Zip Code State Transaction ID: PR433196823939 NY Mamaroneck 10543-1025 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance & Financial Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Dorman, Harry, , , Date of Receipt Mailing Address 1500 N Casaloma Dr Suite 411 2020 City State Zip Code Transaction ID : PR433197423939 WI Appleton 54913-8219 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medicare Masters, LLC Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Long, Scott, W., CLCS, SGS, Date of Receipt Mailing Address 1715 Greenway Village Dr. 23 2020 City Zip Code State Transaction ID: PR433206823939 TX Katy 77494-2175 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Beazley Group Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 127 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

186

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brittain, Jennifer, , , Date of Receipt Mailing Address 208 N. Mill 2020 City Zip Code State Transaction ID: PR433214323939 OK Pryor 74361-2422 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brown & Brown, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 764.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gerken, Barb, , , Date of Receipt Mailing Address 5520 Monroe Street 2020 Suite A City State Zip Code Transaction ID: PR433268323939 OH Sylvania 43560-2538 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Insurance Group Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Shooshanian, Barbara, , , Date of Receipt Mailing Address 39500 High Pointe Blvd 23 2020 Ste 400 City State Zip Code Transaction ID: PR433298723939 MI Novi 48375-5517 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Alliance Administrators **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7 - - 7

FOR LINE NUMBER: PAGE 128 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vetter, Leah, M.,, Date of Receipt Mailing Address 10050 Regency Circle Suite 300 2020 City State Zip Code Transaction ID: PR433302723939 NE Omaha 68114-3721 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Arthur J. Gallagher **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Thams, Todd, , , Date of Receipt Mailing Address 1209 Broadway 2020 City State Zip Code Transaction ID: PR433308323939 IΑ Denison 51442-2632 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Thams Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) ▼ 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Spleet, Michael, , , Date of Receipt Mailing Address 2444 East Hill Rd. 23 2020 City State Zip Code Transaction ID: PR433316623939 MI **Grand Blanc** 48439-5098 Amount of Each Receipt this Period FEC ID number of contributing C 130.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Franklin Benefit Soutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$130.00 Monthly) 1270.00 Other (specify) 245.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: PAGE 129 OF 186 (check only one)

| The page | Page 129 OF 186 | P

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Webber, Tom, , , Date of Receipt Mailing Address 2444 E Hikk Rd 2020 City Zip Code State Transaction ID: PR433316723939 MI **Grand Blanc** 48439 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Franklin Benefit Soutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ornellas, Helen, , , Date of Receipt Mailing Address 239 W. Court St. 2020 City State Zip Code Transaction ID : PR433463223939 Woodland CA 95695-3080 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ornellas & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Willison, Clover, Denise, , Date of Receipt Mailing Address 355 Sprowel Creek Rd 23 2020 City State Zip Code Transaction ID: PR433468623939 CA Garberville 95542-3110 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clover Willison Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 1000.00 Other (specify) 172.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 130 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Drake, Laura, , , Date of Receipt Mailing Address 401 Gooding St N #106 2020 City Zip Code State Transaction ID: PR433504423939 ID Twin Falls 83301-6177 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Laura Drake Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coogan, Michael, , , Date of Receipt Mailing Address 118 North Bedford Road 2020 Suite 100 City State Zip Code Transaction ID : PR433548023939 NY Mount Kisco 10549-2555 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Coogan FX Insurance LLC Agency Founder Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) ▼ 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. VanDuine, Dustin, , , Date of Receipt Mailing Address 2850 W Grand Blvd 23 2020 City State Zip Code Transaction ID: PR433572623939 MI Detroit 48202-2643 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Alliance Plan Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 114.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 131 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Golden, Johnna, , , Date of Receipt Mailing Address 3800 Centerpoint Dr., Ste 940 2020 City Zip Code State Transaction ID: PR433692823939 AK Anchorage 99503-5825 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Premera Blue Cross Blue Shield of Alas Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Butler, Allison, , , Date of Receipt Mailing Address 2800 Civic Circle Suite 200 2020 City State Zip Code Transaction ID: PR433694523939 TX Amarillo 79109-1619 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Butler Benefits & Consulting, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schneider, JoEllen, , , Date of Receipt Mailing Address 2807 W Taft St 23 2020 City Zip Code State Transaction ID: PR433791823939 ID Boise 83703-5015 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Professionals Benefit Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 132 OF 186 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skinner, Roger, W.,, Date of Receipt Mailing Address 5518 Hammock Glen Drive 2020 City Zip Code State Transaction ID: PR436789423939 IN Indianapolis 46235-9779 Amount of Each Receipt this Period FEC ID number of contributing C 30.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aflac **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.50 Monthly) 305.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Trautwein, Janet, , , Date of Receipt Mailing Address 1212 New York Ave. NW, Ste 1100 2020 City State Zip Code Transaction ID: PR436821423939 DC Washington 20005-3987 Amount of Each Receipt this Period FEC ID number of contributing 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NAHU CEO Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) Other (specify) ▼ 1700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rios-Carl, Elizabeth, E., PIWT SGS, Date of Receipt Mailing Address 210 North Campbell 23 2020 City State Zip Code Transaction ID: PR436824523939 TX El Paso 79901-1406 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) 285.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 133 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Berman, David, A.,, Date of Receipt Mailing Address 8805 Sawleaf Rd 2020 City Zip Code State Transaction ID: PR436829723939 IN Indianapolis 46260-1534 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Berman Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 925.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ashmore, Elizabeth, , CBC, SGS, Date of Receipt Mailing Address 6102 82nd St, Bldg #6 2020 City State Zip Code Transaction ID: PR436830323939 TX Lubbock 79424-0803 Amount of Each Receipt this Period FEC ID number of contributing 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ashmore/Arthur J. Gallagher, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) Other (specify) 1700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Grundman, Robert, A., , Date of Receipt Mailing Address 7412 Karl Drive 23 2020 City Zip Code State Transaction ID: PR436838923939 NE Lincoln 68516-4368 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Benefit Strategies Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 500.00 Other (specify) 305.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

186 FOR LINE NUMBER: PAGE 134 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wright, Keith, L., ChHC, CLU, R, Date of Receipt Mailing Address 401 W Front St Ste 4 2020 City Zip Code State Transaction ID: PR436848523939 MI Traverse City 49684-2259 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wright Insurance Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bean, Darrald, T., , Date of Receipt Mailing Address 3922 Rampart ST 2020 11 City State Zip Code Transaction ID: PR436853323939 ID Boise 83704-4557 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bean Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Trebing, C. Louanne, , , Date of Receipt Mailing Address 1806 Patton Drive 23 2020 City State Zip Code Transaction ID: PR436856923939 TX Garland 75042-8205 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Trebing Insurance Services** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

F	OR	LINE	NU	MBER	PAGE	1	35 OF	186	
(0	che	ck only	or	ne)					
	X	11a		11b		11c		12	
		13		14		15		16	17

Memo Item

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Freeman, Michael, J., CLU, Date of Receipt Mailing Address 2333 Camino Del Rio South 2020 Suite 200 City State Zip Code Transaction ID: PR436861823939 San Diego CA 92108-3600 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Countywide Health Ins. Services, Inc. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mobley, Sandra, V., REBC, RHU, Date of Receipt Mailing Address 137 Executive Dr. Suite D 11 2020 City State Zip Code Transaction ID: PR436869323939 Madison MS 39110-8456 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee.

	Name of Employer (for Individual) Mobley Insurance Agency LLC	Occupa Broker	ation (for Individual)	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	P/R Deduction (\$50.00 Monthly)		
C.	Full Name of Individual (Last, First, Middle Init Wilson, Paula, L., , Mailing Address 31930 Daniel Way	tial) or Full Orga	nization Name	Date of Receipt 11 23 2020		
	City	State	Zip Code	Transaction ID : PR436873523939		
	Temecula	CA	92591-2129	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		85.00		
	Name of Employer (for Individual) Paula Wilson, Inc.	Occupa Broker	tion (for Individual)	Memo Item		
	Receipt For: Primary General Other (specify)	Primary General Aggregate real-to-Date V				
5	SUBTOTAL of Receipts This Page (optional)	165.00				

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

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

Use separate schedule(s)

F	OR	LINE	MBER	PAGE	186			
(0	ck only	ne)						
	X	11a		11b		11c	12	
		13		14		15	16	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Trahin, Cindy, K., RHU, CSA, Date of Receipt Mailing Address 7127 Homestead Road Suite B 2020 City Zip Code State Transaction ID: PR436875623939 IN Fort Wayne 46814-4601 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Trahin Insurance Services LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnston, David, N,, Date of Receipt Mailing Address 1440 Beaumont Avenue 2020 11 City State Zip Code Transaction ID: PR436881523939 Cherry Valley CA 92223-6820 Amount of Each Receipt this Period FEC ID number of contributing 17.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Benefits Consultancy Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$17.00 Monthly) Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stuart, Rodney, , , Date of Receipt Mailing Address 484 E Carmel Dr 23 2020 Suite 358 City State Zip Code Transaction ID: PR436883323939 IN Carmel 46032-2812 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Strategic Insurance Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 500.00 Other (specify) 97.00 SUBTOTAL of Receipts This Page (optional).....

7

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

l	FOF	R LINE	NUN	/BER	PAGE	: 1	37 OF	186	
l	(che	ck only	one	∍)					
l	×	11a		11b		11c		12	
l		13	Π.	14		15		16	17

_								
	ny information copied from such Reports and St for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) Health Underwriters Political Act	tion Comn	nittee					
Α.	Full Name of Individual (Last, First, Middle Init Adams, David, , ,	ial) or Full Org	anization Name	Date of Receipt				
	Mailing Address 1265 Minhinette Drive Suite 150	04-4-	77.0.4	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City Roswell	State GA	Zip Code 30075-3656	Transaction ID : PR436891523939 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		20.00				
	Name of Employer (for Individual) Purchasing Alliance Solutions, Inc.	Occup Broke	ation (for Individual) r	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 250.00	P/R Deduction (\$20.00 Monthly)				
В.	Full Name of Individual (Last, First, Middle Init Spragins, Jackie, L., , Mailing Address P O Box 2073	ial) or Full Org	ganization Name	Date of Receipt				
	City	State	Zip Code	11 23 2020 Transaction ID : PR436895323939				
	Wichita Falls FEC ID number of contributing	TX	76307-2073	Amount of Each Receipt this Period				
	federal political committee.	C		50.00				
	Name of Employer (for Individual) Allred-Thompson-Mason-Daugherty Insura	Occup Produ	oation (for Individual) ucer	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	P/R Deduction (\$50.00 Monthly)				
С .	Full Name of Individual (Last, First, Middle Init Janway, Leah-Anne, , ,	ial) or Full Org	ganization Name	Date of Receipt				
	Mailing Address 2225 SW 96 City	State	Zip Code	11 23 2020 Transaction ID : PR436901523939				
	Oklahoma City	OK	73159-6861	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual) Self	Occup Broke	ation (for Individual) r	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 300.00	P/R Deduction (\$30.00 Monthly)				
S	SUBTOTAL of Receipts This Page (optional)			100.00				
Ţ	TOTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X) **ITEMIZ**

FOR LINE NUMBER: PAGE 138 OF

186

ED RECEIPTS	for each category of the Detailed Summary Page	(che	eck only 11a 13	or	ne) 11b 14		11c		12 16		17
nation copied from such Reports and Statements ma	ay not be sold or used by any pe	rson	for the	pur	pose c	of so	oliciting	cor	ntribut	ions	

						13	14	15	16	17
	information copied from such Reports and State r commercial purposes, other than using the na									
\	AME OF COMMITTEE (In Full) Iealth Underwriters Political Action	n Comm	ittee							
	ull Name of Individual (Last, First, Middle Initial) Morrow, Todd, , ,	or Full Orga	anization Nai	me	D	Date of	Receipt			
Ma	ailing Address 453 CLEAR WATER TRAIL	_				м = м 11	23	/ Y	2020	
Cit H	ty OLLY LAKE RANCH	State TX	Zip Code 75765-73	313			of Each R		3723939	
FE	EC ID number of contributing deral political committee.	С				ount	J. Lauri n	Jooipt tills	42.00)
	ame of Employer (for Individual)	Occupa Broker	ation (for Ind	ividual)	— Ī	Mer	mo Item			
	eceint For:	Aggregate Yea		420.00] P/I	'R Dedu	ction (\$42.	00 Monthly	у)	
3. <u>B</u>	Ill Name of Individual (Last, First, Middle Initial) Booth, Tonya, S., ,	or Full Orga	anization Nai	me	_	Date of			V	
Cit	ailing Address 275 W. Campbell Road Suite 215 - LB 16	State	Zip Code		4 L	11	23	J L.	2020	
	ty ichardson	TX	75080-80			ction ID:				
	EC ID number of contributing deral political committee.	С				4	1-7-	100.00)	
Up	ame of Employer (for Individual) oshaw Insurance Agency	Occupa Broker	ation (for Ind	lividual)		Mer	mo Item			
Re	eceipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼	1000.00] P/F	P/R Deduction (\$100.00 Monthly)				
	ıll Name of Individual (Last, First, Middle Initial) Shaffer, Annette, , ,	or Full Orga	anization Nai	me	D	Date of	Receipt			
Ma	ailing Address 418 South Main Street		T=: -			M M M	/ 23	J L.	2020	
Cit Fi	ty indlay	State OH	Zip Code 45840-32	73			of Each R			
FE	EC ID number of contributing deral political committee.	C	113002			anount	oi Each H	eceipi inis	30.00)
	ame of Employer (for Individual) roup Benefit Consultants	Occupa Broker	ation (for Ind	ividual)		Me	mo Item			
	pooint For:	Aggregate Yea	ar-to-Date ▼	300.00] P/	'R Dedu	ction (\$30.	00 Monthl	y)	
SUB	BTOTAL of Receipts This Page (optional))	• [172.00)
тот	AL This Period (last page this line number only	y))	• [7			

FOR LINE NUMBER: PAGE 139 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaczmarek, Lawrence, , , Date of Receipt Mailing Address 145 N. Chestnut St., Ste. 202 2020 City Zip Code State Transaction ID: PR436923423939 OH Ravenna 44266-4009 Amount of Each Receipt this Period FEC ID number of contributing C 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaczmarek Ins. Services Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$31.00 Monthly) 310.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cason, Louie, L.,, Date of Receipt Mailing Address PO Box 11229 2020 City State Zip Code Transaction ID: PR436934823939 SC Columbia 29211-1229 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Cason Group, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stenger, James, R., Date of Receipt Mailing Address 8926 Crown Colony Boulevard 23 2020 City Zip Code State Transaction ID: PR436939923939 FL Fort Myers 33908-5627 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MVS Consulting Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) 201.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 140 OF 186 Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Seifert, Gregory, J., , Date of Receipt Mailing Address P.O. Box 189 916 Main Street 2020 City Zip Code State Transaction ID: PR436941623939 WA Vancouver 98666-0189 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) West Coast Ins Services dba Biggs Ins **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Woods, John, T., , Date of Receipt Mailing Address 9400 East Market Street 2020 City State Zip Code Transaction ID: PR436950023939 OH Warren 44484-5514 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INSURANCE NÁVIGATORS AGENCY Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Holland, Robert, V., , Date of Receipt Mailing Address PO Box 698 23 2020 City Zip Code State Transaction ID: PR436961723939 WA Centralia 98531-0698 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Centralia General Agencies Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$63.00 Monthly) 1630.00 Other (specify) 178.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

Use separate schedule(s)

				MBER	PAGE	PAGE 141 OF						
(c	he	ck only	or	ne)								
	X	11a		11b		11c		12				
		13		14		15		16		17		

for each category of the **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schneider, John, E,, Date of Receipt Mailing Address 4701 Trousdale Dr. Ste 202 2020 City Zip Code State Transaction ID: PR436963523939 TN Nashville 37220-1386 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Colonial Life **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Parker, John, C., RHU, LTCP, Date of Receipt Mailing Address 38 Hope St Unit 1312 2020 11 City State Zip Code Transaction ID: PR436986823939 CT Niantic 06357-2454 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Parker Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Splawn, William, Craig, Date of Receipt Mailing Address 800 Avenue C 23 2020 City State Zip Code Transaction ID: PR436992823939 TX Katy 77493-2302 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Splawn & Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 500.00 Other (specify) 180.00 SUBTOTAL of Receipts This Page (optional).....

7

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

Use separate schedule(s) for each category of the

FO	R LINE	NUMBER	PAGE	1	186		
(ch	eck only	one)					
X	1 11a	11b		11c	12		
	13	14		15	16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Phillips, Paige, W., , Date of Receipt Mailing Address 1434 Hwy 301 2020 City Zip Code State Transaction ID: PR436993023939 AL Calera 35040-5466 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Paige Phillips Agency, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) 475.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fristoe, Kelly, Don, LUTCF, SGS, Date of Receipt Mailing Address PO Box 4789 2020 11 City State Zip Code Transaction ID : PR437002323939 Wichita Falls TX 76308-0789 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Financial Partners Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Thorn, Ryan, P., , Date of Receipt Mailing Address 10342 South Springcrest Lane 23 2020 City Zip Code State Transaction ID: PR437004023939 UT South Jordan 84095-4538 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ryan P. Thorn Insurance Planning, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Monthly) 500.00 Other (specify) 95.00 SUBTOTAL of Receipts This Page (optional).....

7

FOR LINE NUMBER: PAGE 143 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

186

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Buie, Scott, T.,, Date of Receipt Mailing Address 4525 S 2300 E Ste 201 2020 City Zip Code State Transaction ID: PR437010523939 UT Salt Lake City 84117-4639 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Buie Insurance Services Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gray, Michael, D., RHU, Date of Receipt Mailing Address 233 South 13th Street, Suite 1650 2020 City State Zip Code Transaction ID: PR437016723939 NE Lincoln 68508-2036 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Harry A. Koch Co Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Duhon, Keith, M., Date of Receipt Mailing Address PO Box 80158 23 2020 City State Zip Code Transaction ID: PR437017123939 Lafayette LA 70598-0158 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Family Insurance Center, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 180.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

186 FOR LINE NUMBER: PAGE 144 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaczmarek, T. Darlene, , , Date of Receipt Mailing Address 145 N. Chestnut St., Suite 202 2020 City Zip Code State Transaction ID: PR437026323939 OH Ravenna 44266-4009 Amount of Each Receipt this Period FEC ID number of contributing C 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaczmarek Ins. Services Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$31.00 Monthly) 310.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Blizman, Donna, J., , Date of Receipt Mailing Address 1939 Racimo Dr 2020 City State Zip Code Transaction ID: PR437031523939 FL Sarasota 34240-9426 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Employee Benefits Marketing Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Moore, Wesley, P., , Date of Receipt Mailing Address P O Box 604 23 2020 City Zip Code State Transaction ID: PR437039423939 SC Darlington 29540-0604 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Moore Insurance Agency, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 91.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	PAGE	PAGE 145 OF					
(0	che	ck only	or	ıe)							
	X	11a		11b		11c		12			
		13		14		15		16		17	

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hayes, Leesa, Kay,, Date of Receipt Mailing Address 812 Lyndon Lane Suite 101 2020 City Zip Code State Transaction ID: PR437043323939 KY Louisville 40222-3844 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Snowden & Associates, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ameling, Mary, K.,, Date of Receipt Mailing Address 1202 Wood Lily Circle 2020 City State Zip Code Transaction ID : PR437057723939 NC Leland 28451-7686 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ganey, Byrd, & Dunn Insurance Group, I Producer Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Olson, Terri, M., Date of Receipt Mailing Address P. O. Box 21479 23 2020 City State Zip Code Transaction ID: PR437070223939 OR Keizer 97307-1479 Amount of Each Receipt this Period FEC ID number of contributing C 65.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Olson Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$65.00 Monthly) 650.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional).....

7 - - 7

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

F	OR	LINE	NU	MBER	:	PAGE	PAGE 146 OF					
(0	che	ck only	or	ie)								
	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) Health Underwriters Political Acti	on Comm	nittee										
Α.	Full Name of Individual (Last, First, Middle Initial Alberts, Suzetta, E., ,	al) or Full Orga	anization Name	Date of Receipt									
	Mailing Address 26555 Evergreen Drive			M = M / D = D / Y = Y = Y									
	Ste 535 City	State	Zip Code	11 23 2020 Transaction ID : PR437076123939									
	Southfield	MI	48076-4213	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		84.00									
	Name of Employer (for Individual) Comprehensive Benefits	Occupa Broker	ation (for Individual)	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1165.00	P/R Deduction (\$84.00 Monthly)									
В.	Full Name of Individual (Last, First, Middle Initial Smith, Kevin, W., CLU, RHU,	al) or Full Orga	anization Name	Date of Receipt									
	Mailing Address One Overton Park 3625 Cumberland Boulevard City	State	Zip Code	11 23 2020									
	Atlanta	30339-3361	Transaction ID : PR437077223939 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		30.00									
	Name of Employer (for Individual) KSA Insurance Agency, LLC	Occup Broke	ation (for Individual) r	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 300.00	P/R Deduction (\$30.00 Monthly)									
С .	Full Name of Individual (Last, First, Middle Initial Lopez, Juan, R., ,	al) or Full Orga	anization Name	Date of Receipt									
	Mailing Address 22431 Antonio Pkwy Suite B160-420	State	Tip Code	11 23 2020									
	City Rancho Santa Margarita	CA	Zip Code 92688-2804	Transaction ID : PR437079023939 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		85.00									
	Name of Employer (for Individual) Self	Occupa	ation (for Individual) Itant	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 850.00	P/R Deduction (\$85.00 Monthly)									
s	SUBTOTAL of Receipts This Page (optional)		>	199.00									
1	OTAL This Period (last page this line number or	nly)											

186

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Koehler, Linda Rose, , LPRT CIP C, Date of Receipt Mailing Address 2 Treeble Ct 2020 City Zip Code State Transaction ID: PR437090123939 NC Greensboro 27406-5375 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Roiz, Mario, , , Date of Receipt Mailing Address 10446 NW 31st Terrace 2020 City State Zip Code Transaction ID: PR437104923939 FL Doral 33172-1200 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HR Benefit Services, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stephens, James, R., Date of Receipt Mailing Address 100 Mansell Ct East 23 2020 Suite 400 City State Zip Code Transaction ID: PR437110723939 GΑ Roswell 30076-4859 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Humana **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 148 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Garner, G. Russell, , , Date of Receipt Mailing Address 1308 Murraywood Drive 2020 City Zip Code State Transaction ID: PR437113223939 SC Columbia 29212-1159 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) G. Russell Garner LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McEvilly, BRIAN, J., RHU, Date of Receipt Mailing Address 7260 West Azure Drive 2020 #140-201 City State Zip Code Transaction ID : PR437117723939 NV Las Vegas 89130-7999 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) McEvilly Benefits Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 476.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Roberts, Joseph, K., , Date of Receipt Mailing Address 1128 Lincoln Mall 23 2020 Suite 200 City State Zip Code Transaction ID: PR437118023939 NE Lincoln 68508-2878 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UNICO** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) 1700.00 Other (specify) 242.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - 7

FOR LINE NUMBER: PAGE 149 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Benton, Bruce, D., RHU, REBC, Date of Receipt Mailing Address 20300 Ventura Blvd Suite 200 2020 City State Zip Code Transaction ID: PR437123023939 CA Woodland Hills 91364-0959 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Genesis Financial & Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Antongiovanni, Joanna, , , Date of Receipt Mailing Address 2929 Allen Parkway 2020 Suite 2500 11 City State Zip Code Transaction ID: PR437128023939 TX Houston 77019-2178 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Marsh Wortham Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Papenfus, Jeffrey, , , Date of Receipt Mailing Address 32110 Agoura Road 23 2020 City State Zip Code Transaction ID: PR437137823939 CA Westlake Village 91361-4026 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Warner Pacific Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 150 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hebert, Laura, L., , Date of Receipt Mailing Address 5151 Flynn Pkwy Suite 403 2020 City State Zip Code Transaction ID: PR437154823939 TX Corpus Christi 78411-4372 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hebert Insurance Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Allard, Terry, , CEBS, Date of Receipt Mailing Address 3000 A Street, Suite 400 2020 City State Zip Code Transaction ID: PR437182323939 AK Anchorage 99503-4040 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wilson Albers Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 2500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Murray, Neal, , , Date of Receipt Mailing Address 1314 East Atlantic Boulevard 23 2020 City State Zip Code Transaction ID: PR437183423939 FL Pompano Beach 33060-6745 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Frank H. Furman, Inc **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 322.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: (check only one) **X** 11a 11b

186 PAGE 151 OF Use separate schedule(s) for each category of the 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ducote, Dale, , , Date of Receipt Mailing Address 235 Highlandia Drive Suite 100 2020 City State Zip Code Transaction ID: PR437184623939 LA Baton Rouge 70810-6056 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) RETIRED **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Debler, Johnnie, O., RHU, ChHC, Date of Receipt Mailing Address 1102 E. Laurel St. 2020 City State Zip Code Transaction ID: PR437196423939 TX Rockport 78382-2815 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) GSM Insurors Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bunkers, Scott, R., Date of Receipt Mailing Address 2211 Lee Road, Suite 100 23 2020 City State Zip Code Transaction ID: PR437196723939 FL Winter Park 32789-1849 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fringe Benefit Plans, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 152 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

186

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nace, Joshua, D.,, Date of Receipt Mailing Address 100 W. Harrison Street, Suite S440 2020 City Zip Code State Transaction ID: PR437203323939 WA Seattle 98119-4116 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dental Health Services Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bundy-Cobb, Jennifer, , , Date of Receipt Mailing Address 3000 A Street, Suite 400 2020 City State Zip Code Transaction ID : PR437204423939 AK Anchorage 99503-4040 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wilson Albers Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Garbina, James, S., , Date of Receipt Mailing Address 14010 FNB Pkwy Ste 300 23 2020 City Zip Code State Transaction ID : PR437212223939 NE Omaha 68154-5235 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Harry A. Koch Co **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

186 FOR LINE NUMBER: PAGE 153 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cooper, Catherine, L.,, Date of Receipt Mailing Address 39500 High Pointe Blvd., Suite 400 2020 City Zip Code State Transaction ID: PR437218323939 MI Novi 48375-5517 Amount of Each Receipt this Period FEC ID number of contributing C 112.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Alliance Administrators **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$112.00 Monthly) 1995.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Daubert, Jim, F., CLU, Date of Receipt Mailing Address P.O. Box 67220 2020 City State Zip Code Transaction ID: PR437219623939 NE Lincoln 68506-7220 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Concord Benefits Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Shores, Thomas, E., , Date of Receipt Mailing Address 8596 W Bolsa Ct. 23 2020 City Zip Code State Transaction ID: PR437221423939 ID Boise 83709-5196 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) T.A. Shores Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 294.00 Other (specify) 227.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

186 FOR LINE NUMBER: PAGE 154 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Musser, Rita, A.,, Date of Receipt Mailing Address 3330 Thames Drive 2020 City Zip Code State Transaction ID: PR437229123939 IN Fort Wayne 46815-5994 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Insurance Solutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gardner, Joy, K., LUTCF, Date of Receipt Mailing Address 9424 Double R Blvd 2020 City State Zip Code Transaction ID : PR437231223939 NV Reno 89521-5977 Amount of Each Receipt this Period FEC ID number of contributing 47.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Comstock Insurance Agencies, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$47.00 Monthly) Other (specify) 470.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rowe, Peter, L., CLU, Date of Receipt Mailing Address 3033 N. Central Ave 23 2020 Suite 810 City State Zip Code Transaction ID: PR437236923939 ΑZ Phoenix 85012-2804 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Arcwood Benefits Consulting, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) 1700.00 Other (specify) 247.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Use separate schedule(s)

F	OR	LINE	NU	MBER	PAGE	186			
(0	che	ck only	or	ie)					
	X	11a		11b		11c	12		
		13		14		15	16	17	

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Barton, Diane, L.,, Date of Receipt Mailing Address Arthur J Gallagher & Co 615 E. Britton Road 2020 City State Zip Code Transaction ID: PR437254123939 OK Oklahoma City 73114-7710 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gallagher Benefit Services, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Merken, Monte, A., , Date of Receipt Mailing Address 24577 Indian Hill Lane 2020 City State Zip Code Transaction ID: PR437256123939 West Hills CA 91307-3829 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Merken Insurance, Petersen Internation Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. McLane, Mark, A., , Date of Receipt Mailing Address 3301 Veterans Drive, Suite 210 23 2020 City Zip Code State Transaction ID: PR437258323939 MI Traverse City 49684-4575 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mark McLane Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 90.00

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

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

7

FOR LINE NUMBER: PAGE 156 OF 186 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Powers-Booth, Sandra, Lee, , Date of Receipt Mailing Address 4817 S. 175th Street 2020 City Zip Code State Transaction ID: PR437264323939 WA Seatac 98188-3710 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Benefits Northwest **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hardy, Allen, D., LUTCF, Date of Receipt Mailing Address 802 Kosciusko Road 2020 P.O. Box 89 City State Zip Code Transaction ID : PR437264923939 Philadelphia MS 39350-3555 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Philadelphia Security Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Harte, Heather, Roberts, Date of Receipt Mailing Address 11365 Avant Lane 23 2020 City Zip Code State Transaction ID: PR437268323939 OH Cincinnati 45249-2373 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

FOR LINE NOMBER: (check only one)

(check only one)

11a 11b 11

F	OR	LINE	NU	MBER	PAGE	1	57 OF	186	
(che	ck only	or	ne)					
	×	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Toups, Jennifer, L.,, Date of Receipt Mailing Address #1 Galleria Blvd, Suite 1122 2020 City State Zip Code Transaction ID: PR437270523939 LA 70001-2092 Metairie Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Broker Humana Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hissong, James, H., , Date of Receipt Mailing Address 8401 Widmer Rd 11 2020 City State Zip Code Transaction ID : PR437274723939 KS Lenexa 66215-5416 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) C.

Other (specify) ▼		300.00	1 // Deduction (\$50.00 Monthly)
Full Name of Individual (Last, First, Middle In Summers, James, F., , Mailing Address 8420 West Dodge Road, 5th	Date of Receipt 11 23 2020		
City	State	Zip Code	Transaction ID : PR437281023939
Omaha	NE	68114-3443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00 Memo Item
Name of Employer (for Individual)	Broker	ation (for Individual)	I World Roll
Senior Market Sales, Inc. Receipt For: Primary General Other (specify)	P/R Deduction (\$125.00 Monthly)		
SUBTOTAL of Receipts This Page (optional)			240.00

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

FOR LINE NUMBER: PAGE 158 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Grossnickle, Jeffrey, R.,, Date of Receipt Mailing Address 1405 North College Avenue 2020 City Zip Code State Transaction ID: PR437294723939 IN Bloomington 47404-2417 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Insurance Group Inc. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sullivan, T.J., , , Date of Receipt Mailing Address 235 Front St SE 2020 Suite 100 City State Zip Code Transaction ID : PR437310523939 OR Salem 97301-3303 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Huggins Insurance Services, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Bell, Marie, D., FLMI, AIAA, Date of Receipt Mailing Address 701 4th Ave S. #1500 23 2020 City Zip Code State Transaction ID: PR437323323939 MN Minneapolis 55415-1637 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DeRuyter-Bell, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 740.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

FOR LINE NUMBER: PAGE 159 OF 186 (check only one)

| The page | Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stiffler, Patricia, , , Date of Receipt Mailing Address 155 N. Riverview Dr Suite 100 2020 City State Zip Code Transaction ID: PR437326123939 CA Anaheim 92808-1225 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Options in Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 925.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Duvernay, Jack, , , Date of Receipt Mailing Address 714 Millikens Bend 2020 City State Zip Code Transaction ID : PR437344523939 LA Covington 70433-4581 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefitsone Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bajkowski, Catherine, A., , Date of Receipt Mailing Address 188 Industrial Drive, Suite 226 23 2020 City State Zip Code Transaction ID: PR437361123939 IL **Elmhurst** 60126-1610 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CB** Health Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) 152.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 160 OF 186 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Block, David, M.,, Date of Receipt Mailing Address P O Box 1809 2020 City Zip Code State Transaction ID: PR437364423939 NC Candler 28715-1809 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Specialties, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Paulus, Raquel, E., , Date of Receipt Mailing Address 1368 Business Park Drive 2020 City State Zip Code Transaction ID: PR437367923939 MI Traverse City 49686-8640 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Peterson McGregor & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Thomas, Jeffery, C., CLU, RHU, RE, Date of Receipt Mailing Address 3072 Arborwood Blvd. 23 2020 City State Zip Code Transaction ID: PR437385423939 MI Spring Arbor 49283-9663 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Small Business Assocation of Michigan Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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

FOR LINE NUMBER: PAGE 161 OF (check only one)

| The content of the page of t

186

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cutting, Brenda, , , Date of Receipt Mailing Address 4356 Bonney Road Suite 2-101 2020 City State Zip Code Transaction ID: PR437388323939 VA Virginia Beach 23452-1200 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sterling Benefits, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jensen, Cerrina, , CHRS, CBC,, Date of Receipt Mailing Address 2520 Venture Oaks Way #240 2020 City State Zip Code Transaction ID : PR437391223939 CA Sacramento 95833-4228 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Verus Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Bogard, Andrea, J., , Date of Receipt Mailing Address PO BOX 38 23 2020 City Zip Code State Transaction ID: PR437400023939 IN Jeffersonville 47131-0038 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A. Bogard Insurance Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 92.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 162 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

186

12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cramer, Valerie, Lynn, RHU, Date of Receipt Mailing Address 2701 Burgen Ct. NE 2020 City Zip Code State Transaction ID: PR437416423939 MI **Grand Rapids** 49525-3979 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HealthBridge **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gandy, Hollie, , , Date of Receipt Mailing Address 2920 Duniven Circle, #2 2020 City State Zip Code Transaction ID : PR437425023939 TX Amarillo 79109-1650 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Solutions Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Clark, Robert, S., , Date of Receipt Mailing Address 7548 Preston Road 23 2020 City State Zip Code Transaction ID: PR437427223939 TX Frisco 75034-5683 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clark Insurance Associates, PLLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) 172.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 163 OF 186 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mutter, Amy, D., , Date of Receipt Mailing Address 2670 Electric Road 2020 City Zip Code State Transaction ID: PR437454923939 VA Roanoke 24018-3511 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Innovative Insurance Group, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$63.00 Monthly) 630.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Creasy, Marcus, , , Date of Receipt Mailing Address P. O. Box 220 2020 City State Zip Code Transaction ID : PR437474923939 AR **Heber Springs** 72543-0220 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Adams & Creasy Insurance Agency, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Fiala, Colby, , , Date of Receipt Mailing Address 710 Fillmore St 23 2020 Ste 100 City State Zip Code Transaction ID: PR437475123939 ID Twin Falls 83301-4641 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magic Valley Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 123.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 164 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

186

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pennington, Carol, C.,, Date of Receipt Mailing Address 4640 Woodbridge Drive 2020 City Zip Code State Transaction ID: PR437485423939 NC Kernersville 27284-8850 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pennington Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miller, Dawn, M.,, Date of Receipt Mailing Address PO Box 847 2020 11 City State Zip Code Transaction ID : PR437488823939 McMinnville OR 97128-0847 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hagan Hamilton Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Stedt, Margaret, Evelyn, C.S.A., LP, Date of Receipt Mailing Address 486 Calle Amigo 23 2020 City State Zip Code Transaction ID: PR437529923939 CA San Clemente 92673-3003 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stedt Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 1000.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER: PAGE 165 OF												
(check only one)												
	×	11a	11b		11c		12					
ı		13	14		15		16		17			

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Swanson, Cynthia, , SGS, BAM, Date of Receipt Mailing Address 22240 Deval Ln 2020 City Zip Code State Transaction ID: PR437544923939 TX Frankston 75763-4037 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hibbs Hallmark & Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Giardina, Charles, J., , Date of Receipt Mailing Address 5440 Mounes Street, Suite 112 2020 City State Zip Code Transaction ID: PR437562823939 **New Orleans** LA 70123-3296 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MassMutual Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) ▼ 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Contorno, David, , , Date of Receipt Mailing Address 106 Langtree Village Dr 23 2020 Suite 301 City State Zip Code Transaction ID: PR437566623939 NC Mooresville 28117-7571 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E Powered Benefits **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly)

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

300.00

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

FOR LINE NOMBER (check only one)

-				MBER	PAGE	: 1	66 OF		186			
(0	check only one)											
	×	11a		11b		11c		12				
		13		14		15		16		17		

	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Health Underwriters Political Act	tion Comm	nittee	
Α.	Full Name of Individual (Last, First, Middle Init Mobley, Dennis, $F., $,	ial) or Full Org	anization Name	Date of Receipt
	Mailing Address 137 Executive Drive Suite D		T	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Madison	State MS	Zip Code 39110-8456	Transaction ID : PR437587523939 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) Mobley Group	Occup Broke	ation (for Individual) r	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	P/R Deduction (\$50.00 Monthly)
В.	Full Name of Individual (Last, First, Middle Init Waller, Doris, , LPRT Soari, Mailing Address 1778 N. Plano Rd.	ial) or Full Org	anization Name	Date of Receipt
	Suite 310	State	Zip Code	11 23 2020
	Richardson	TX	75081-1958	Transaction ID : PR437591523939 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer (for Individual) Pan-American Benefits Solutions, Inc.	Occup Broke	oation (for Individual) er	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 900.00	P/R Deduction (\$85.00 Monthly)
С .	Full Name of Individual (Last, First, Middle Init Robinson, Judith, $L., ,$	ial) or Full Org	anization Name	Date of Receipt
	Mailing Address P O Box 10071 City	State	Zip Code	11 23 2020
	Tyler	TX	75711-0071	Transaction ID : PR437594123939 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer (for Individual) Judith Robinson Insurance Services, LL Receipt For:	Broker		Memo Item
	Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 850.00	P/R Deduction (\$85.00 Monthly)
s	SUBTOTAL of Receipts This Page (optional)			220.00
 -	TOTAL This Period (last page this line number of	only)		

Name of Employer (for Individual)

General

Financial Planning Resources

Other (specify)

Receipt For:

Primary

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

F	OR	LINE	NU	MBER	:	PAGE	1	67 OF	186
(che	ck only	or	ne)					
	×	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Swinton, Ryan, R., , Date of Receipt Mailing Address 1128 Lincoln Mall Suite 200 2020 City Zip Code State Transaction ID: PR437594923939 NE Lincoln 68508-2878 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UNICO Group, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Starks, Eugene, , , Date of Receipt Mailing Address 1022 Highland Colony Parkway 2020 Suite 202 11 City State Zip Code Transaction ID: PR437603123939 MS Ridgeland 39157-2086 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Administration Services, Ltd. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) ▼ 975.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Williams, George, , , Date of Receipt Mailing Address 4109 Woodway Dr. 23 2020 City State Zip Code Transaction ID: PR437605723939 Monroe LA 71201-2218 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee.

											_
SUBTOTAL of Receipts This Page (optional)	•			,			,		20	0.00	Ī
TOTAL This Period (last page this line number	only)		_	7	_	_	7	_	_	- 	
											_

300.00

Occupation (for Individual)

Broker

Aggregate Year-to-Date ▼

Memo Item

P/R Deduction (\$30.00 Monthly)

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

FOR LINE NUMBER: (check only one) **X** 11a 11b 11c

PAGE 168 OF 186 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LaRocco, Andrew, M.,, Date of Receipt Mailing Address 5880 Live Oak Parkway, # 230 2020 City Zip Code State Transaction ID: PR437640923939 GA Norcross 30093-1740 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The LaRocco Companies **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$40.00 Monthly) 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Siciliano, Dominic, , , Date of Receipt Mailing Address 500 Cascade Road SE Suite 106 2020 City State Zip Code Transaction ID: PR437669523939 **Grand Rapids** MI 49546-2166 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Profiles, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Strouse, Marcie, , , Date of Receipt Mailing Address 9854 Colby Ave 23 2020 City State Zip Code Transaction ID: PR437683123939 IΑ Clive 50325-6422 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Capitol Benefits Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 840.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional).....

7 7

FOR LINE NUMBER: PAGE 169 OF 186 Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Atkinson, Lynn, , HIA, MBA, SC, Date of Receipt Mailing Address 2336 Cantle Lane 2020 City Zip Code State Transaction ID: PR437687323939 VA Roanoke 24018-6104 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Granado, Arthur, , , Date of Receipt Mailing Address 418 Peoples, # 505 2020 City State Zip Code Transaction ID : PR437693223939 Corpus Christi TX 78401-2350 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Granado Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Webb, Yolanda, Marie, CHRS, Date of Receipt Mailing Address 6117 Clover Ct. 23 2020 City State Zip Code Transaction ID: PR437705623939 CA Chino 91710-5337 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Webb Insurance Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 730.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

186 FOR LINE NUMBER: PAGE 170 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kirsch, Cara, , , Date of Receipt Mailing Address 720 Grenoble Drive 2020 City Zip Code State Transaction ID: PR437731123939 NE Bellevue 68123-4158 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President Silver Stone Group Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Berry, Ernest, , , Date of Receipt Mailing Address 5121 69th St., A9A 2020 City State Zip Code Transaction ID : PR437737423939 TX Lubbock 79424-1631 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Berry Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Conto, Teresa, , , Date of Receipt Mailing Address 702 King Farm Blvd 23 2020 Ste 210 City State Zip Code Transaction ID: PR437740823939 MD Rockville 20850-6563 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gallagher Benefit Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Use separate schedule(s) for each category of the

F	OR	LINE	NU	IMBER	:	PAGE	186	
(C	he	ck only	or	ne)				
	X	11a		11b		11c	12	
		13		14		15	16	17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Williams, Leslie, A., CHRS, Date of Receipt Mailing Address 2295 Hilltop Drive Suite 5 2020 City State Zip Code Transaction ID: PR437742923939 CA Redding 96002-0515 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leslie A. Williams Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 420.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Edwards, Susan, Christensen, Date of Receipt Mailing Address 40 S. Roop St. 2020 11 City State Zip Code Transaction ID : PR437755523939 CA Susanville 96130-4336 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E. Christensen Insurance Agency, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Johnson, John, P., , Date of Receipt Mailing Address 8414 N. Wall Street 23 2020 Ste C City State Zip Code Transaction ID: PR437775823939 WA Spokane 99208-6161 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **IFS** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$63.00 Monthly) 630.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	L			J.	_	_			15	5.00		L
TOTAL This Period (last page this line number only)		_	_	7	_	_	<u> </u>	_	_	_	_	_

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

Use separate schedule(s)

F	OR	LINE	NU	MBER	:	PAGE	1	72 OF	1	86
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cade, Kareim, R.,, Date of Receipt Mailing Address 28411 Northwestern Hwy., Ste 950 2020 City Zip Code State Transaction ID: PR437778623939 MI Southfield 48034-5515 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Great Lakes Benefit Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Heider, Ryan, , , Date of Receipt Mailing Address 710 Fillmore St, Suite 100 2020 City State Zip Code **Transaction ID: PR437792223939** ID Twin Falls 83301-4641 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magic Valley Ins. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schell, Gregory, J., , Date of Receipt Mailing Address 545 South Third Street 23 2020 Suite 300 City State Zip Code Transaction ID: PR437797623939 KY Louisville 40202-1936 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sterling Thompson Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional).....

7 - - 7

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

F	OR	LINE	NU	MBER	:	PAGE	1	73 OI	F	186
(0	che	ck only	or	ne)						
	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) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Purcilly, Amy, , , Date of Receipt Mailing Address 3155 W Big Beaver Rd 2020 Ste 125 City State Zip Code Transaction ID: PR437814923939 MI 48084-3007 Troy Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Mason-McBride, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Daricek, Natalie, , , Date of Receipt Mailing Address 8220 N 23rd Ave. Bldg2 11 2020 City State Zip Code Transaction ID: PR437834923939 Phoenix ΑZ 85021-4872 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee.

	Name of Employer (for Individual) Blue Cross Blue Shield of AZ		tion (for Individual) t Executive	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 425.00	P/R Deduction (\$30.00 Monthly)
C.	Full Name of Individual (Last, First, Middle Initial Hediger, Debbie, R., ,	itial) or Full Orga	nization Name	Date of Receipt
	Mailing Address One N Dale Mabry Hwy Ste 1	008		11 23 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : PR437852423939
	Tampa	FL	33609-2755	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) McGriff Insurance Services, Inc	Occupat Broker	tion (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 625.00	P/R Deduction (\$50.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			110.00

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

7

Use separate so for each catego Detailed Summa

	_			MBER	:	PAGE	: 1	74 OF	186
chedule(s) ory of the	(che	ck only	or	ne)				1	
ary Page	×	11a		11b		11c		12	
, 0		13		14		15		16	17

	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Health Underwriters Political Ac	tion Comm	ittee	
Α.	· · · · · · · · · · · · · · · · · · ·	ial) or Full Orga	anization Name	Date of Receipt
	Mailing Address 1145 2nd Street #A-269			11 23 2020
	City	State	Zip Code	Transaction ID : PR437855623939
	Brentwood	CA	94513-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.00
	Name of Employer (for Individual) Essential Exchange Insurance Services	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 440.00	P/R Deduction (\$38.00 Monthly)
В.	Full Name of Individual (Last, First, Middle Init James, Leslie, C., , Mailing Address 6368 Pearl Rd	ial) or Full Orga	anization Name	Date of Receipt
	Mailing Address 6368 Pearl Rd			11 23 2020
	City	State	Zip Code	Transaction ID : PR437860023939
	Cleveland	OH	44130-3064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) Insurance Strategy, Inc.	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General Other (specify) ▼	4	300.00	P/R Deduction (\$30.00 Monthly)
<u> </u>	Full Name of Individual (Last, First, Middle Init Emidy, Mike, , ,	ial) or Full Orga	anization Name	Date of Receipt
	Mailing Address P O Box 2021			11 23 2020
	City	State	Zip Code	Transaction ID : PR437878323939
	Ridgeland	MS	39158-2021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) Colonial Life	Occupa Broker	ation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	P/R Deduction (\$30.00 Monthly)		
H	SUBTOTAL of Receipts This Page (optional)			98.00

FOR LINE NUMBER: PAGE 175 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

186 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McDonald, Jesse, D., , Date of Receipt Mailing Address 111 River St 2020 #7 City Zip Code State Transaction ID: PR437887923939 CT Milford 06460-3326 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Modern Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Blanchard, Brian, G,, Date of Receipt Mailing Address 225 S 6th Ste 2900 2020 City State Zip Code Transaction ID: PR438000023939 MN Minneapolis 55402-4609 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Financial Representative Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Atencio, Linda, K., LPRT, Date of Receipt Mailing Address PO Box 87021 23 2020 City State Zip Code Transaction ID: PR439256923939 ΑZ Phoenix 85080-7021 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Linda Atencio **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 940.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

FOR LINE NUMBER: PAGE 176 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

186

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lubenow, Justin, , , Date of Receipt Mailing Address 15 Alden Street Suite 8 2020 City Zip Code State Transaction ID: PR470069123939 NJ Cranford 07016-2149 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lubenow Agency Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Monthly) 390.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Waltman, Jessica, , , Date of Receipt Mailing Address 10 Doyle Road 2020 11 City State Zip Code Transaction ID: PR470100123939 PA Wayne 19087-3903 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Forward Health Consulting Principal Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 850.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Riley, Amanda, Danielle, Date of Receipt Mailing Address 24830 SE 278th St 23 2020 City Zip Code State Transaction ID: PR476686823939 WA Maple Valley 98038-2019 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HealthEquity, Inc. Regional Sales Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 500.00 Other (specify) 127.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 177 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

186

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stevens, Kenneth, W.,, Date of Receipt Mailing Address 4916 Bellemeade Ave 2020 City Zip Code State Transaction ID: PR496323823939 IN **Fvansville** 47715-4130 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stevens Insurance Advisors Independent Agent & Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 850.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wayt, Andrew, , , Date of Receipt Mailing Address 747 Winslow Ave 2020 City State Zip Code Transaction ID : PR528187223939 MN Saint Paul 55107-3349 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) IFC National Marketing **Producer Consultant** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 740.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Parker, Frederick, R., , Date of Receipt Mailing Address 12303 Hwy 707 23 2020 Suite B City State Zip Code Transaction ID: PR742659123939 SC Murrells Inlet 29576-9740 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hibbits Insurance Inc CFO Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 300.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

F	FOR	LINE	NU	MBER	:	PAGE	1	78 OF	186
(che	ck only	or	ne)					
	×	11a		11b		11c		12	
		13		14		15		16	17

	ny information copied from such Reports and Stator commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) Health Underwriters Political Act	ion Comn	nittee				
A.	Full Name of Individual (Last, First, Middle Initial Nichols, Thomas, L., , Mailing Address 2888 Shadowlake Dr City Oklahoma City FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State OK	Zip Code 73159	Date of Receipt 11 23 2020 Transaction ID : PR840269923939 Amount of Each Receipt this Period 85.00 Memo Item			
	Colonial Life Receipt For: Primary General Other (specify) ▼	Aggregate Y	ct General Manager ∕ear-to-Date ▼ 850.00	P/R Deduction (\$85.00 Monthly)			
В.	Full Name of Individual (Last, First, Middle Initia Morgan, Christian, D., , Mailing Address 2200 W Commercial Blvd Ste 306 City	State	Zip Code 33309-3064	Date of Receipt 11 23 2020 Transaction ID : PR891081423939			
	Fort Lauderdale FEC ID number of contributing federal political committee. Name of Employer (for Individual) Morgan Fidelity Associates, Inc.	C	pation (for Individual)	Amount of Each Receipt this Period 170.00 Memo Item			
	Receipt For: Primary General Other (specify) ▼	oipt For: Primary General Aggregate Year-to-Date ▼					
<u>С</u> .	Full Name of Individual (Last, First, Middle Initia	al) or Full Org	ganization Name	Date of Receipt			
	Mailing Address			M = M / D = D / Y = Y = Y			
	City	State	Zip Code	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.						
	Name of Employer (for Individual)	Occup	oation (for Individual)	Memo Item			
	Receipt For: Primary General Other (specify)						
H	SUBTOTAL of Receipts This Page (optional)			255.00 36204.17			

S 17

SCHEDULE A (FEC Formatter) ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 OF 186 (check only one) 11a
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Health Underwriters Poli	itical Action Com	nmittee	
Full Name of Individual (Last, First, A. Lummis For Wyoming Inc.	Middle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 111 S Durbin St Ste 300			10 27 2020
City Casper	State WY	Zip Code 82601	Transaction ID : 15275153 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0443580	4000.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: 2020 Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4000.00	Refund from extra donation
Full Name of Individual (Last, First, B.	Middle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name of Individual (Last, First, C.	Middle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (c	pptional)		4000.00

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

4000.00

S 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 purpose, other than using the name and address of any political committee to solicit contributions from such committee. A. Merchant Services Mailing Address 7300 Chapman Way City Knoxville Purpose of Disbursement Merchant Services Candidate Name Office Sought: House Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President San Jose Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President San Jose Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President Disbursement Category/ Type Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period	SCHEDULE B (FEC Form 3X)			FOR	FOR LINE NUMBER: PAGE 180 C				F 186			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Merchant Services Mailing Address 7300 Chapman Way City Knoxville Office Sought: House Senate President City San Jose Purpose of Disbursement Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Merchant Services Candidate Name City San Jose Purpose of Disbursement City San Jose Purpose of Disbursement City San Jose Purpose of Disbursement City San Jose Purpose of Disbursement President City San Jose Purpose of Disbursement Category' Transaction ID: 15287928 Amount of Each Disbursement this Period Transaction ID: 15287928 Amount of Each Disbursement this Period Category' Transaction ID: 15287928 Amount of Each Disbursement this Period Category' Transaction ID: 15287928 Amount of Each Disbursement this Period Transaction ID: 15287928 Amount of Each Disbursement this Period Category' Transaction ID: 15287928 Amount of Each Disbursement this Period Transaction ID: 15287928 Amount of Each Disbursement this Period Category' Transaction ID: 15287928 Amount of Each Disbursement this Period Transaction ID: 15287928 Amount of Each Disbursement this Period Transaction ID: 15287928 Amount of Each Disbursement this Period Transaction ID: 15287928 Transaction ID: 15287928 Transaction ID: 15287928 Transaction ID: 15287928	ITEMIZED DISBURSEMENTS				k only one)				_			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Merchant Services Mailing Address 7300 Chapman Way City Furpose of Disbursement Merchant Services Candidate Name Oiffice Sought: Full Name (Last, First, Middle Initial) B. PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Office Sought: Full Name (Last, First, Middle Initial) B. PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Office Sought: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53862 City Phonoin Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53862 City Phonoin P				×								
NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Merchant Services Mailing Address 7300 Chapman Way City Knoxville Purpose of Disbursement Merchant Services Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Office Sought: Full Name (Last, First, Middle Initial) B. PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement City San Jose Purpose of Disbursement Merchant Services Merchant Servi	Г											
Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Merchant Services Mailing Address 7300 Chapman Way City Knoxville TN 37920 Purpose of Disbursement Merchant Services Candidate Name Office Sought: FeC Identification Number Category/ Type 188.96 Merchant Services Merchant Services Merchant Services It is a senate Primary Other (specify) FeC Identification Number Category/ Type 188.96 Merchant Services Transaction ID: 15287924 Amount of Each Disbursement his Period Category/ Type 188.96 Merchant Services Merchant Services Merchant Services Merchant Services Merchant Services Merchant Services Transaction ID: 15287925 Amount of Each Disbursement City San Jose Purpose of Disbursement Candidate Name Category/ Type 188.96 Merchant Services Transaction ID: 15287925 Amount of Each Disbursement br: Category/ Type 111 / 23 / 2020 Transaction ID: 15287925 Amount of Each Disbursement Category/ Type 1176.78 Date of Disbursement Merchant Services Transaction ID: 15287925 Transaction ID: 15287926												
Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Merchant Services Mailing Address 7300 Chapman Way City Knoxville TN 37920 Purpose of Disbursement Merchant Services Candidate Name Office Sought: FeC Identification Number Category/ Type 188.96 Merchant Services Merchant Services Merchant Services It is a services Merchant Services Merchant Services It is a services Merchant Services Mer	NAME OF COMMITTEE (In Full)											
A. Merchant Services Mailing Address 7300 Chapman Way City Knoxville Purpose of Disbursement Merchant Services Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Senate President Candidate Name Office Sought: District: City Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Senate President Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Senate President District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Candidate Name Fec Identification Number Category/ Type Transaction ID: 15287925 Amount of Each Disbursement His Period Transaction ID: 15287925 Amount of Each Disbursement Mailing Address PO Box 53852 City Phoenix President Candidate Name Fec Identification Number Transaction ID: 15287925	1 \	n Comm	nittee									
Mailing Address 7300 Chapman Way City Knoxville Purpose of Disbursement Merchant Services Candidate Name Category/Type Office Sought: Full Name (Last, First, Middle Initial) B. PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name City San Jose Candidate Name City Category/Type Disbursement Control Security Amount of Each Disbursement this Period FEC Identification Number City Transaction ID : 15287925 Amount of Each Disbursement this Period Transaction ID : 15287925 Amount of Each Disbursement this Period Transaction ID : 15287925 Amount of Each Disbursement this Period Transaction ID : 15287925 Transaction ID : 15287925 FEC Identification Number City Transaction ID : 15287925 Fec Identification Number City Phoenix President State Disbursement Transaction ID : 15287925						_						
City Knoxville Purpose of Disbursement Marchant Services Candidate Name Office Sought: House						M ■ M	f Disbu	D II I) /			Y
TN 37920 Purpose of Disbursement Merchant Services Candidate Name Category/ Type 188.96 Merchant Services Senate Primary General Other (specify) Tansaction ID: 15287924 Amount of Each Disbursement this Period Merchant Services Mercha	Mailing Address 7300 Chapman Way					1.1		23	_		2020	
Purpose of Disbursement Merchant Services Candidate Name Office Sought: House President Primary General District: Full Name (Last, First, Middle Initial) B. PayPal Mailling Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Office Sought: House Primary General City San Jose CA 95131 Category/ Type Transaction ID : 15287924 Amount of Each Disbursement this Period Merchant Services	,		'			FEC Id	entifica	ation	Numl	ber		
Merchant Services Candidate Name Office Sought:			37920		_							
Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. PayPal Malling Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Category/ Type Office Sought: House Disbursement Office Sought: House Disbursement Fell Name (Last, First, Middle Initial) Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City State Zip Code AZ B5072 Phoenix Purpose of Disbursement Oot Transaction ID: 15287925 Amount of Each Disbursement Date of Disbursement Date of Disbursement FEC Identification Number FEC Identification Number FEC Identification Number FEC Identification Number Transaction ID: 15287926				001					D 45	0070	24	
Office Sought:	Candidate Name			Catego	ν/	1						eriod
Senate President District: State: District:								-	-	_		
State: District: Full Name (Last, First, Middle Initial) B. PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) Candidate Name Other (specify) Transaction ID: 15287925 Amount of Each Disbursement this Period Other (specify) Memo Item Memo Item FEC Identification Number Category/ Type Other (specify) Date of Disbursement this Period Transaction ID: 15287925 Amount of Each Disbursement this Period Disbursement Type Transaction ID: 15287925 Date of Disbursement Date of Disbursement FEC Identification Number Category/ Type Transaction ID: 15287926		1	0								188.96	j .
State: District: Full Name (Last, First, Middle Initial) B. PayPal Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate Primary Other (specify) State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 Date of Disbursement Date of Disbursement Mailing Address 2211 North First Street Date of Disbursement Date of Disbursement Transaction ID: 15287925 Amount of Each Disbursement this Period Memo Item Date of Disbursement FEC Identification Number Date of Disbursement FEC Identification Number Date of Disbursement FEC Identification Number Candidate Name Date of Disbursement FEC Identification Number Candidate Name Date of Disbursement FEC Identification Number Candidate Name Transaction ID: 15287926									1ercha	nt Se	rvices	
Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 Date of Disbursement Transaction ID: 15287925 Amount of Each Disbursement this Period Memo Item Date of Disbursement FEC Identification Number Category/ Type Other (specify) Date of Disbursement For: Memo Item Fell Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement AZ B5072 FEC Identification Number FEC Identification Number FEC Identification Number Transaction ID: 15287926] Oo. (ope	∀			Me Me	emo Ite	em				
Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Candidate Name Office Sought: House	Full Name (Last, First, Middle Initial)											
Mailing Address 2211 North First Street City San Jose Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate Primary Other (specify) State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Mailing Address PO Box 53852 Category/ Type Disbursement For: Senate Primary Other (specify) Date of Disbursement Mailing Address PO Box 53852 FEC Identification Number Category/ Type Date of Disbursement Mailing Address PO Box 53852 FEC Identification Number FEC Identification Number FEC Identification Number FEC Identification Number Transaction ID: 15287926	B. PayPal					Date o	f Disbu		_	V	V V	V
San Jose Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate President President State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name	Mailing Address 2211 North First Street											
Purpose of Disbursement Candidate Name Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name	-					FEC Id	entifica	ation	Numl	ber		
Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Date of Disbursement Category/ Type Intransaction ID: 15287925 Amount of Each Disbursement this Period Memo Item Date of Disbursement Category/ Type Intransaction ID: 15287925 Intransaction ID: 15287926 Intransaction ID: 15287926		CA	95131				-				-	
Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement President Other (specify) Date of Disbursement Memo Item Date of Disbursement FEC Identification Number Candidate Name Candidate Name Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 15287926				001					- 45	0070	\ <u></u>	
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement President Other (specify) Date of Disbursement Mailing Address PO Box 53852 FEC Identification Number Candidate Name Candidate Name	Candidate Name				ry/	1			-			'eriod
State: District: Memo Item Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name Candidate Name Other (specify) Memo Item Date of Disbursement Mailing Address PO Box 53852 FEC Identification Number Candidate Name Transaction ID: 15287926	Office Sought: House Disburse	ement For:	I								1176.78	8
State: District: Full Name (Last, First, Middle Initial) C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name Candidate Name Memo Item Date of Disbursement Date of Disbursement FEC Identification Number Candidate Name Transaction ID: 15287926		_										
C. American Express Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Other (spe	ecify)			Me	emo Ite	em				
Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name State AZ Zip Code 85072 FEC Identification Number Candidate Name Transaction ID: 15287926	Full Name (Last, First, Middle Initial)											
Mailing Address PO Box 53852 City Phoenix Purpose of Disbursement Candidate Name State AZ Zip Code 85072 FEC Identification Number Candidate Name Transaction ID: 15287926	C. American Express						f Disbu		_			
Phoenix Purpose of Disbursement Candidate Name AZ 85072 Candidate Name Transaction ID: 15287926	Mailing Address PO Box 53852					1]		_			1
Phoenix AZ 85072 Purpose of Disbursement Candidate Name Transaction ID: 15287926	City	State	Zip Code			EEC Id	entifica	ation	Numl	her		
Candidate Name Transaction ID : 15287926		AZ	85072					411011	1101111		-	
Candidate Name	Purpose of Disbursement			001		C						
Category/ Amount of Each Disbursement this Fehou	Candidate Name				n./	1						Pariod
Type '					'y/	Amoun	t OI La	acii L	Jisbui	Seme	11 11115 F	enou
Office Sought: House Disbursement For: 33.55	Office Sought: House Disburse	ement For:									33.5	5
Senate Primary General							,		,			
State: District: Other (specify) ▼ Memo Item		Other (spe	ecity) 🔻			Me	mo Ite	em				
Giate. District.	State. DISTRICT.											
SUBTOTAL of Disbursements This Page (optional)	SUBTOTAL of Disbursements This Page (optional).									-		
TOTAL This Period (last page this line number only)										7	1399.2	.9

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. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Pallone For Congress Mailing Address PO Box 3176 City Long Branch Purpose of Disbursement Congressman's Annual Birthday Party Candidate Name Pallone, Frank, , Rep., Jr. Office Sought: X House President State: NJ District: 06 Full Name (Last, First, Middle Initial) B. Scott Peters For Congress Mailing Address PO Box 22074 FEC Identification Number Congressman's Annual B Memo Item Party Date of Disbursement Transaction ID: 15271617 Amount of Each Disbursement this Perior Congressman's Annual B Memo Item Party FEC Identification Number Congressman's Annual B Scott Peters For Congress Mailing Address PO Box 22074 FEC Identification Number Congressman's Annual B Date of Disbursement this Perior Category/ Type Date of Disbursement Category/ Type Date of Disbursement this Perior Category/ Type Date of Disbursement this Perior Congressman's Annual B FEC Identification Number Congressman's Annual B FEC Identification Number Congressman's Annual B FEC Identification Number Category/ Type Transaction ID: 15271618 Amount of Each Disbursement Transaction ID: 15271618 Amount of Each Disbursement For: 2020 Transaction ID: 15271618 Amount of Each Disbursement For: 2020 Transaction ID: 15271618 Amount of Each Disbursement For: 2020 Transaction ID: 15271618 Amount of Each Disbursement For: 2020 Transaction ID: 15271618 Transaction ID: 15271618 Transaction ID: 15271618 Amount of Each Disbursement For: 2020 Transaction ID: 15271618 Transaction ID: 15271618	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate for each cate Detailed Sur	FOR LINE NUMBER: PAGE 181 OI (check only one)					
A Pallone For Congress Mailing Address PO Box 3176 City Pallone, Frank, Rep., Jr. Office Sought:								
NAME OF COMMITTEE (in Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) Pallone For Congress Mailing Address PO Box 3176 City Congress of Disbursement Congress and Sarnual Birthday Party Candidate Name Process A Process of Disbursement Process Of Disbursement Congressman's Annual Birthday Party Candidate Name President State: NJ District: 06 Full Name (Last, First, Middle Initial) B. Scott Peters For Congress Mailing Address PO Box 22074 City San Diego Prupose of Disbursement Zoom Meeting Peters, Scott, Rep., Office Sought: X House Senate President State: CA District: 52 Full Name (Last, First, Middle Initial) State: CA District: 52 Full Name (Last, First, Middle Initial) Candidate Name Peters, Scott, Rep., Office Sought: X House Senate President State: CA District: 52 Full Name (Last, First, Middle Initial) Candidate Name District: 52 Full Name (Last, First, Middle Initial) City Washington Purpose of Disbursement Category/ Type Office Sought: X House Senate President State: CA District: 52 Full Name (Last, First, Middle Initial) City Washington Purpose of Disbursement City Washington Purpose of Disbursement Category/ Type Office Sought: X House Senate President District: 52 Full Name (Last, First, Middle Initial) City Washington Purpose of Disbursement Category/ Type Office Sought: X House Senate Suite 201 City Washington Purpose of Disbursement Category/ Type Office Sought: X House Senate President District: 52 Full Name (Last, First, Middle Initial) City Washington Purpose of Disbursement Category/ Type Office Sought: X House Senate President District: 52 Full Name (Last, First, Middle Initial) City Washington Purpose of Disbursement Category/ Transaction ID: 15271619 Amount of Each Disbursement Date of Disbursement Transaction ID: 15271619 Amount of Each Disbursement Date of Disbursement Da								
A. Pallone For Congress Mailing Address PO Box 3176 City City Long Branch Purpose of Disbursement Congressman's Annual Bithday Party Candidate Name Pallone, Frank, , Rep., Jr. Office Sought:	NAME OF COMMITTEE (In Full)		71					
A. Pallone For Congress Mailing Address PO Box 3176 City Long Branch Purpose of Disbursement Congressments Annual Bithday Party Candidate Name Peters, Scott, , Rep., Office Sought: X House President Zom Meeting Peters, Scott, , Rep., Office Sought: X House Poters, Scott, Rep., Office Sought: X House Sanate President Zom Meeting State: Disbursement Date of Disbursement this Perior Transaction ID::15271618 Amount of Each Disbursement Date of Disbursement Date	Full Name /Lest First Middle Initial)			1				
City Long Branch Purpose of Disbursement Congressman's Annual Birthday Party Candidate Name Pallone, Frank, , Rep., Jr. Office Sought:					M M / D D / Y Y Y Y			
Long Branch Purpose of Disbursement Congressman's Annual Birthday Parry Candidate Name Pallone, Frank, Rep., Jr. Office Sought:	Mailing Address PO Box 3176				10 20	2020		
Congressman's Annual Birthday Party Candidate Name Pallone, Frank, Rep., Jr. Office Sought:	Long Branch		•			ımber		
Pallone, Frank, , Rep., Jr. Office Sought:	Congressman's Annual Birthday Party		[Transaction ID :			
Office Sought:					Amount of Each Dish	oursement this Period		
State: NJ District: 06 Full Name (Last, First, Middle Initial) B. Scott Peters For Congress Mailing Address PO Box 22074 City San Diego Purpose of Disbursement Zoom Meeting Candidate Name Peters, Scott, , Rep., Office Sought:	Office Sought: House Disburse Senate	Primary	x General	1,750		gressman's Annual Birtho		
Full Name (Last, First, Middle Initial) B. Scott Peters For Congress Mailing Address PO Box 22074 City San Diego Purpose of Disbursement Zoom Meeting Candidate Name Peters, Scott, , Rep., Office Sought: State: CA District: S2 Full Name (Last, First, Middle Initial) C. IMPACT Mailing Address 660 Pennsylvania Ave, SE Suite 201 City Washington Purpose of Disbursement Candidate Name Office Sought: Memo Item Date of Disbursement Date of Disbursement Transaction ID: 15271618 Amount of Each Disbursement this Perior Zoom Meeting Memo Item FEC Identification Number Category/ Type 1000.00 Zoom Meeting Memo Item FEC Identification Number Category/ Type Transaction ID: 15271619 Amount of Each Disbursement Transaction ID: 15271619 Amount of Each Disbursement Date of Disbursement Transaction ID: 15271619 Amount of Each Disbursement Date of Disbursement Transaction ID: 15271619 Amount of Each Disbursement Transaction ID: 15271619 Amount of Each Disbursement For: Senate Primary Office Sought: Disbursement Transaction ID: 15271619 Amount of Each Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary Other (specify) Memo Item		Other (specify)	▼		Memo Item Part	y		
Mailing Address PO Box 22074 City San Diego	Full Name (Last, First, Middle Initial)				Date of Disbursemer	nt		
San Diego Purpose of Disbursement Zoom Meeting Candidate Name Peters, Scott, , Rep., Office Sought:								
Candidate Name Peters, Scott, , Rep., Office Sought:	•		FEC Identification Nu	ımber				
Peters, Scott, , Rep., Office Sought:	Purpose of Disbursement			011		15271619		
Office Sought:								
State: CA District: 52 Full Name (Last, First, Middle Initial) C. IMPACT Mailing Address 660 Pennsylvania Ave, SE Suite 201 City Washington Purpose of Disbursement Candidate Name Candidate Name Disbursement Disbursement Other (specify) Memo Item Zoom Meeting Memo Item Date of Disbursement Date of Disbursement Date of Disbursement FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Transaction ID: 15271619 Amount of Each Disbursement this Period Memo Item	000	ment For: 202	0	Туре		1000.00		
State: CA District: 52 Full Name (Last, First, Middle Initial) C. IMPACT Mailing Address 660 Pennsylvania Ave, SE Suite 201 City Washington Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate President State: District: Other (specify) Memo Item					700	7 7		
C. IMPACT Mailing Address 660 Pennsylvania Ave, SE Suite 201 City Washington Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Date of Disbursement M M M 10 20 2020 FEC Identification Number Category/ Type Transaction ID: 15271619 Amount of Each Disbursement this Period Primary General Other (specify) ▼ Memo Item						g		
Mailing Address 660 Pennsylvania Ave, SE Suite 201 City Washington Purpose of Disbursement Candidate Name Office Sought: House President President State: District: Mailing Address 660 Pennsylvania Ave, SE Suite 201 State Zip Code DC 20003 FEC Identification Number Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Memo Item	-							
Washington Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General President State: District: DC 20003 O11 Transaction ID: 15271619 Amount of Each Disbursement this Period 2500.00 Memo Item	· · · · · · · · · · · · · · · · · · ·							
Candidate Name Office Sought: House Senate Primary General President State: District: Office Sought: District: Transaction ID : 15271619 Amount of Each Disbursement this Period 2500.00 Memo Item	Washington		•			ımber		
Office Sought: House Senate Primary General President State: District: Senate Primary General Memo Item	•		[Category/				
State: District: Memo Item	Senate	Турс		2500.00				
5000.00		Other (specify)	▼		Memo Item			
· ·	SUBTOTAL of Disbursements This Page (optional)			······•	7	5000.00		

SCHEDULE B (FEC Form 3X)	11	(-)	FOR LINE I	NUMBER:	PAGE 182 OF 186
ITEMIZED DISBURSEMENTS	Use separate sch for each category		(check only	′	
	Detailed Summary		21b 28a	22 X 23 28c	26 27 29 30b
Associations are included for an early Department of Obtain		-1-1			
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
Health Underwriters Political Actio	n Committee				
/			+		
Full Name (Last, First, Middle Initial) A. Garbarino for Congress				Date of Disburse	ment
A. Garbarino for Congress				M M / D	
Mailing Address PO Box 101				10 20	
City	State Zip Co NY 11705			FEC Identification	Number
Bayport Purpose of Disbursement	NY 11705) _		C C0072995	
			011	0 111	
Candidate Name			Category/		ID: 15271620 Disbursement this Period
Garbarino, Andrew, R, ,			Type		
	ment For: 2020				1000.00
Senate President	Primary x Good Other (specify)	eneral		_	
State: NY District: 02	Other (specify)			Memo Item	
Full Name (Last, First, Middle Initial)					
B. Nevadans For Steven Horsford				Date of Disburser	ment
				M M / D	D / Y Y Y Y Y
Mailing Address PO Box 336664				10 20	2020
City	State Zip Co	de		CCO Identification	NI. mala au
North Las Vegas	NV 89033			FEC Identification	Number
Purpose of Disbursement			044	C C0066822	8
Candidate Name		L	011		ID : 15271638
Horsford, Steven, , Rep.,		'	Category/ Type	Amount of Each	Disbursement this Period
	ment For: 2020		1,700		1000.00
Senate	Primary G	eneral		4	4 4
President	Other (specify)			Memo Item	
State: NV District: 04					
Full Name (Last, First, Middle Initial)				Date of Disburse	ment
C. Scott Franklin For Congress				M M / D	
Mailing Address P.O. Box 2811				10 20	
-					
City Lakeland	State Zip Co FL 33806			FEC Identification	Number
Purpose of Disbursement	1 2 33000			C C0074224	7
			011		ID : 15271640
Candidate Name			Category/		Disbursement this Period
Franklin, Scott, , ,			Туре		2000.00
Office Sought: House Disburse Senate	ment For: 2020 Primary	eneral		4	2000.00
President	Primary x General G	erierai			
State: FL District: 15	(-r)/ V			Memo Item	
					1006.55
SUBTOTAL of Disbursements This Page (optional).			······•		4000.00
TOTAL This Period (last page this line number only	·)				
	,				

		rate schedule(s)	I	FOR LINE NUMBER: PAGE 183 OF 186 (check only one)		
BIODONOLIMENTO		ategory of the Summary Page	21b 28a	22 x 23 28 28 28	3 26 27 8c 29 30b	
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) Health Underwriters Political Action			<u>u. 00</u>			
/ Treatiti Officer writers i Officer Action	Commi					
Full Name (Last, First, Middle Initial)				Date of Disbu	reomant	
A. Mann For Congress					D D / Y Y Y Y	
Mailing Address PO Box 1084				10	20 2020	
	tate KS	Zip Code 67402		FEC Identifica	ation Number	
Salina Purpose of Disbursement	NO	67402		C C0046	30650	
·			011		ion ID : 15271641	
Candidate Name			Category/		ach Disbursement this Period	
Mann, Tracey, , , Office Sought: Mann Mann	ent For: 20	200	Туре		2000.00	
	ent For. 20 Primary	√ General			7 7	
State: KS District: 01	Other (speci			Memo Ite	em	
Full Name (Last, First, Middle Initial)						
3. Team Graham Inc			Date of Disbu	ursement		
Mailing Address PO Box 1801				10	22 2020	
	tate	Zip Code		FEC Identifica	ation Number	
Columbia Purpose of Disbursement	SC	29202		C C0045	8828	
			011		ion ID : 15274099	
Candidate Name			Category/		ach Disbursement this Period	
Graham, Lindsey, , Sen., Office Sought: House Disburseme	ent For: 20	020	Туре		500.00	
	ont For. 20 Primary	General		4	4 4	
State: SC District:	Other (speci	ify)		Memo Ite	em	
Full Name (Last, First, Middle Initial)				Date of Disbu	reamont	
C. Thom Tillis Committee				D D / Y Y Y Y		
Mailing Address PO Box 97396				10	22 2020	
,	tate	Zip Code		FEC Identifica	ation Number	
Raleigh Purpose of Disbursement	NC	27624		C 0005	15772	
Purpose of Dispursement 011				C C0054	ion ID : 15274100	
Candidate Name			Category/		ach Disbursement this Period	
Tillis, Thom, , , Office Sought: House Disburseme	ont Form		Type		500.00	
	ent For: 20 Primary	020 χ General			300.00	
<u> </u>	Other (speci	••		Memo Ite	em	
State: NC District:				Wiemo ite)III	
State: NC District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			<u> </u>	Memo ite	3000.	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
	for each category of the Detailed Summary Page	21b 28a	22 X 23 26 27 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Health Underwriters Political Action	,		Solicit Contribution Form Scott Contribution.
Full Name (Last, First, Middle Initial)			
A. Buck For Colorado	Date of Disbursement		
Mailing Address P.O. Box 338018	1		10 27 2020
City Greeley Purpose of Disbursement	State Zip Code CO 80633		FEC Identification Number
Candidate Name		011	C C00461368 Transaction ID : 15275148 Amount of Each Disbursement this Period
Buck, Ken, , Rep.,		Category/ Type	Amount of Each Dispulsement this Period
Senate	ment For: 2020 Primary		1000.00
State: CO District: 04	Other (apecity)		Memo Item
Full Name (Last, First, Middle Initial) B. Yarmuth For Congress			Date of Disbursement
Mailing Address 1815 Brownsboro Road, Suite 101	1		11 02 / 2020
Louisville	State Zip Code KY 40206		FEC Identification Number
Purpose of Disbursement Void - Yarmuth For Congress	C C00419630 Transaction ID : 15276829		
Candidate Name Yarmuth, John, A., Rep.,		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	ment For: 2020 Primary		– 3000.00 Void - Yarmuth For Congres
State: KY District: 03			Memo Item
Full Name (Last, First, Middle Initial) C. Yarmuth For Congress			Date of Disbursement
Mailing Address 1815 Brownsboro Road, Suite 101			11 02 2020
Louisville Purpose of Disbursement	State Zip Code KY 40206		FEC Identification Number
Check Re Print Candidate Name Yarmuth, John, A., Rep.,		011 Category/ Type	Transaction ID: 15276830 Amount of Each Disbursement this Period
Office Sought: House Disbursen	ment For: 2020 Primary 🗶 General Other (specify) 🔻	Турс	3000.00 Check Re Print Memo Item
SUBTOTAL of Disbursements This Page (optional)		·····	1000.00
TOTAL This Period (last page this line number only))		

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s	FOR LINE (check only	
	for each category of the Detailed Summary Page	21b 28a	22 X 23 26 27 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) Health Underwriters Political Action			
Full Name (Last, First, Middle Initial) A. Jeff Fortenberry For United States	Date of Disbursement		
Mailing Address PO Box 30265		11 02 2020	
City Lincoln Purpose of Disbursement	State Zip Code NE 68503		FEC Identification Number
Candidate Name		011 Category/	C C00395467 Transaction ID: 15276832 Amount of Each Disbursement this Period
	nent For: 2020 Primary X General	Type	4000.00
	Primary ★ General Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial) 3. GEORGIANS FOR KELLY LOEFF Mailing Address DO DOY 20026	LER		Date of Disbursement
Mailing Address PO BOX 20036 City S	State Zip Code		11 19 2020
-	GA 30325		FEC Identification Number C C00729608
Candidate Name GEORGIANS FOR KELLY LOEFF		O11 Category/ Type	Transaction ID: 15282056 Amount of Each Disbursement this Period
x Senate	nent For: 2020 Primary General Other (specify)		2500.00
State: GA District:	2020 RUNO	FF	Memo Item
Full Name (Last, First, Middle Initial) GEORGIANS FOR KELLY LOEFF	LER		Date of Disbursement
Mailing Address PO BOX 20036			11 19 2020
City ATLANTA Purpose of Disbursement	State Zip Code GA 30325	011	FEC Identification Number C C00729608
Candidate Name GEORGIANS FOR KELLY LOEFF		Category/ Type	Transaction ID: 15282057 Amount of Each Disbursement this Period
x Senate	nent For: 2020 Primary General Other (specify) ▼		2500.00 Memo Item
		FF	
State: GA District: SUBTOTAL of Disbursements This Page (optional)	2020 RUNOI		9000.00

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 186 OF
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 26 27 28a 28b 28c 29 30b
		I by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	The arta address of arry pointed.	Sommittee to consider continuous nome cach committee.
Health Underwriters Political Action	n Committee	
Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Perdue For Senate	M M / D D / Y Y Y Y	
Mailing Address PO Box 12077		11 19 2020
,	State Zip Code	FEC Identification Number
Atlanta	GA 30355	
Purpose of Disbursement	l r	C C00547570
Candidate Name		011 Transaction ID : 15282058
		Category/ Amount of Each Disbursement this Period
Perdue, David, , , Office Sought: House Disburser		Type 2500.00
	ment For: 2020	2300.00
X Senate President	Primary General	
State: GA District:	Other (specify) ▼ 2020 RUNOFF	Memo Item
Full Name (Last, First, Middle Initial)	2020 11011011	
3. Perdue For Senate		Date of Disbursement
refude For Seriale		
Mailing Address PO Box 12077		11 19 2020
City	State Zip Code	FEC Identification Number
Atlanta	GA 30355	
Purpose of Disbursement	l r	C C00547570
		011 Transaction ID : 15282059
Candidate Name		Category/ Amount of Each Disbursement this Period
Perdue, David, , ,		Type
	ment For: 2020	2500.00
x Senate	Primary General	
State: GA District:	Other (specify) 2020 RUNOFF	Memo Item
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	FEC Identification Number
Purpose of Disbursement	I	C
Candidate Name		
Candidate Name		Category/ Amount of Each Disbursement this Period Type
Office Sought: House Disburser	ment For:	
Senate	Primary General	7 7 7
President	Other (specify) ▼	Memo Item
State: District:		Wollie Reli
$\textbf{SUBTOTAL} \ \ \text{of Disbursements This Page (optional)}$		
TOTAL This Davied (Issaers and Italy III		27000.00
TOTAL This Period (last page this line number only)	1	