

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Health Underwriters Political Action Committee

ADDRESS (number and street)

1212 New York Ave

Suite 1100

Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00283135

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
02 01 2017

through

M M / D D / Y Y Y Y Y Y
02 28 2017

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

Murphy, Jennifer, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Murphy, Jennifer, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
03 13 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**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

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
02 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017		166294.99
(b) Cash on Hand at Beginning of Reporting Period.....	171462.16	
(c) Total Receipts (from Line 19)	98569.40	145362.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	270031.56	311657.39
7. Total Disbursements (from Line 31).....	94617.69	136243.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	175413.87	175413.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
02	/	01	/	2017

To:

M M	/	D D	/	Y Y Y Y
02	/	28	/	2017

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

61149.40

69689.40

(ii) Unitemized

37420.00

75673.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

98569.40

145362.40

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

98569.40

145362.40

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

98569.40

145362.40

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

98569.40

145362.40

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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2587.69	3713.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2587.69	3713.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	92000.00	132500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	30.00	30.00
(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)).....	30.00	30.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	94617.69	136243.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	94617.69	136243.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	98569.40	145362.40
34. Total Contribution Refunds (from Line 28(d))	30.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98539.40	145332.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2587.69	3713.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	2587.69	3713.52

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

Form/Schedule: F3XA
Transaction ID :

Fixing 10 itemized contributors that did not have an occupation listed when filed.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kite, William, , ,

Mailing Address PO Box 629

City
Roanoke

State
VA

Zip Code
24004-0629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

D&S Agency

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2017

Transaction ID : 11108989

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schneider, Chad, P., ,

Mailing Address 111 W Illinois St
5th Floor

City
Chicago

State
IL

Zip Code
60654-4505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Code SixFour

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2017

Transaction ID : 11110096

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jennings, Julie, A., ,

Mailing Address 500 Faunce Corner Rd
Bldg 100, Suite 120

City
Dartmouth

State
MA

Zip Code
02747-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sylvia & Co. Ins. Agency, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2017

Transaction ID : 11110100

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

635.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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PAGE 8 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Kenneth, L., ,

Mailing Address 1332 Hunters Hollow Court

City
Eureka

State
MO

Zip Code
63025-1051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sonus Benefits by MSMF

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2017

Transaction ID : 11110428

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shumberger, Joshua, Andrew, ,

Mailing Address 4433 Brooklands Drive

City
Hilliard

State
OH

Zip Code
43026-1881

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MetLife, Inc.

Occupation (for Individual)

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2017

Transaction ID : 11110430

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Moriello, Nicholas, A., ,

Mailing Address 260 Chapman Road
Suite 107

City
Newark

State
DE

Zip Code
19702-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Savoy Associates

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2017

Transaction ID : 11168079

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1490.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Webb, Charles, A., ,

Mailing Address 2670 Electric Rd

City

Roanoke

State

VA

Zip Code

24018-3511

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Innovative Insurance Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2017

Transaction ID : 11168080

Amount of Each Receipt this Period

250.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burett, Raymond, , ,

Mailing Address 42 Broadway
Suite 1936

City

New York

State

NY

Zip Code

10004-3829

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Brio Benefit Consulting

Occupation (for Individual)

Broker

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2017

Transaction ID : 11168086

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Webb, Yolanda, Marie, ,

Mailing Address 6117 Clover Ct.

City

Chino

State

CA

Zip Code

91710-5337

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Webb Insurance Solutions

Occupation (for Individual)

Broker

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2017

Transaction ID : 11168090

Amount of Each Receipt this Period

150.00



Memo Item

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

1400.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 OF 78
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pedersen, Jill, L., ,

Mailing Address 16325 Boones Ferry Rd #204

City
Lake Oswego

State
OR

Zip Code
97035-4297

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Columbia Benefit Solutions, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 09 / 2017

Transaction ID : 11168098

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kaelin, Bobbi, , ,

Mailing Address 6180 Quail Valley Court

City
Riverside

State
CA

Zip Code
92507-0704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PayPro Administrators

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 09 / 2017

Transaction ID : 11168102

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stevens, Kenneth, W., ,

Mailing Address 4916 Bellemeade Ave

City
Evansville

State
IN

Zip Code
47715-4130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stevens Insurance Advisors

Occupation (for Individual)
Independent Agent & Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 09 / 2017

Transaction ID : 11168110

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

437.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wallace, Keith, , ,

Mailing Address 1400 Broadway

City
Bellingham

State
WA

Zip Code
98225-3036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wallace-Rice Benefits, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2017

Transaction ID : 11168112

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fisher, Erin, B., ,

Mailing Address 131-6 Courtland Avenue

City
Stamford

State
CT

Zip Code
06902-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Find Medicare Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2017

Transaction ID : 11168116

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fisher, Erin, B., ,

Mailing Address 131-6 Courtland Avenue

City
Stamford

State
CT

Zip Code
06902-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Find Medicare Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2017

Transaction ID : 11168118

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

1005.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Katz, Alan, S., ,

Mailing Address 8033 Sunset Blvd., #982

City
Los Angeles

State
CA

Zip Code
90046-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alan Katz Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2017

Transaction ID : 11168326

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Galloway, James, C., ,

Mailing Address PO Box 9670

City
Columbus

State
MS

Zip Code
39705-0021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Galloway-Chandler-McKinney Ins. Agency

Occupation (for Individual)

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2017

Transaction ID : 11168327

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reisinger Pool, Gentry, , ,

Mailing Address 3803 Village Glen Tr.

City
Arlington

State
TX

Zip Code
76016-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sterling Administration

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2017

Transaction ID : 11168329

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

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

2100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

PAGE 13 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sterner, Heidi, J., ,

Mailing Address 7881 Sw Charleston Blvd

City
Las Vegas

State
NV

Zip Code
89117-8323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Leavitt Group Benefits Services

Occupation (for Individual)
Insurance Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2017

Transaction ID : 11168331

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elam, Michael, Lee, ,

Mailing Address 9000 Northpark Drive

City
Johnston

State
IA

Zip Code
50131-4817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Delta Dental of Iowa

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2017

Transaction ID : 11168345

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Girdler, Richard, R., ,

Mailing Address 5110 Maryland Way, Suite 250

City
Brentwood

State
TN

Zip Code
37027-7508

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cowan, a Division of HUB International

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2017

Transaction ID : 11168356

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

1155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jetter, Art, , ,

Mailing Address 11305 Chicago Circle

City
Omaha

State
NE

Zip Code
68154-2633

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Art Jetter & Company

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

02 / 12 / 2017

Transaction ID : 11168368

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schiebel, Al, C., ,

Mailing Address 200 Sandy Springs Pl., # 300A

City
Atlanta

State
GA

Zip Code
30328-3854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Schiebel & Associates, LLC dba Shopben

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

02 / 13 / 2017

Transaction ID : 11168382

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schiebel, Al, C., ,

Mailing Address 200 Sandy Springs Pl., # 300A

City
Atlanta

State
GA

Zip Code
30328-3854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Schiebel & Associates, LLC dba Shopben

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

02 / 13 / 2017

Transaction ID : 11168385

Amount of Each Receipt this Period

150.00

☐ Memo Item

Reception

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

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

5195.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bright, Hazel, D., ,

Mailing Address 1470 Civic Court, #330

City
Concord

State
CA

Zip Code
94520-5230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HB Resources Insurance Service

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168388

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deagle, Michael, P., ,

Mailing Address 935 National Parkway
Suite 93550

City
Schaumburg

State
IL

Zip Code
60173-5150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BenAxis Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168389

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Warren, James, , ,

Mailing Address 4010 Oleander Drive
Suite 11

City
Wilmington

State
NC

Zip Code
28403-6810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JWB Insurance Group

Occupation (for Individual)
Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168394

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

1865.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lilburn, Corey, , ,

Mailing Address 15831 Trackside Dr

City
Odessa

State
FL

Zip Code
33556-2904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alltrust Insurance

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168399

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoefener, Patrick, L., ,

Mailing Address 1233 Lincoln Mall, Suite 100

City
Lincoln

State
NE

Zip Code
68508-2876

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Blue Cross and Blue Shield of Nebraska

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168404

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Brad, , ,

Mailing Address 622 Main St.

City
Woodland

State
CA

Zip Code
95695-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wraith, Scarlett, & Randolph Insurance

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168406

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

2075.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stricker, Gerald, J., ,

Mailing Address 5708 Farlook Dr

City
Cincinnati

State
OH

Zip Code
45247-6924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Walter P. Dolle Ins. Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168412

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pendergraft, Ross, W., ,

Mailing Address 21820 Burbank Blvd,
North Building, Suite 300

City
Woodland Hills

State
CA

Zip Code
91367-6476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Leavitt Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168413

Amount of Each Receipt this Period

75.00

☐ Memo Item

Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nelson, John, J., ,

Mailing Address 32110 Agoura Rd

City
Westlake Village

State
CA

Zip Code
91361-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Warner Pacific Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168422

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

5440.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schmidt, Kenneth, L., ,

Mailing Address 1332 Hunters Hollow Court

City
Eureka

State
MO

Zip Code
63025-1051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sonus Benefits by MSMF

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168424

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crandall, Lori, , ,

Mailing Address 2375 E Camelback Rd
Suite 250

City
Phoenix

State
AZ

Zip Code
85016-3491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USI

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168427

Amount of Each Receipt this Period

850.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grossman, Michael, , ,

Mailing Address 8000 1h 10W
Ste 1100

City
San Antonio

State
TX

Zip Code
78230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Bank of San Antonio Insurance Grou

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168433

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

1415.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mann, Michael, , ,

Mailing Address 110 Veterans Memorial Blvd
Ste 200

City
Metairie

State
LA

Zip Code
70005-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Eustis Benefits, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168434

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Qualley, Thomas, , ,

Mailing Address 2505 N 124th ST Suite 115

City

Brookfield

State

WI

Zip Code

53005-4677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sovereign Select LLC

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168435

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rang, James, W., ,

Mailing Address PO Box 1780

City

Dubuque

State

IA

Zip Code

52004-1780

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LMC Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168436

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

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

2750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Braly, Kimberly, Thompson, ,

Mailing Address 515 WSW Loop 323

City
TylerState
TXZip Code
75701-9455FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Threlkeld & Company InsuranceOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168437

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pilla, Joseph, A., ,

Mailing Address 75 W. Catawissa Street

City

Nesquehoning

State

PA

Zip Code

18240-1520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ETA Benefits GroupOccupation (for Individual)
Founder & President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168438

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Avery, Michael, K., ,

Mailing Address 1015 North Dixie

City

Odessa

State

TX

Zip Code

79761-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AL J. Avery & Associates, Inc.Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2017

Transaction ID : 11168456

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

1130.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rianhard, R. Dane, , ,

Mailing Address 1 E. Pratt St., Unit 902

City
Baltimore

State
MD

Zip Code
21202-1193

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TriBridge Partners, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
02 / 14 / 2017

Transaction ID : 11168466

Amount of Each Receipt this Period

150.00

☐ Memo Item

Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cummings, William, , ,

Mailing Address 3500 DePauw Blvd
Ste 1111

City
Indianapolis

State
IN

Zip Code
46268-1136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pathfinder Insurance Training

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
02 / 14 / 2017

Transaction ID : 11168468

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rash, Susan, Maley, ,

Mailing Address 2108 West Laburnum Avenue, Suite 3

City
Richmond

State
VA

Zip Code
23227-4300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BB&T Benefit Consultants of Virginia,

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

695.00

Date of Receipt

MM / DD / YYYY
02 / 14 / 2017

Transaction ID : 11168477

Amount of Each Receipt this Period

575.00

☐ Memo Item

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

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

1090.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stutts, Robert, Lawrence, ,

Mailing Address 3599 Timberview Road

City
Powhatan

State
VA

Zip Code
23139-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Anthem Blue Cross and Blue Shield

Occupation (for Individual)
Specialty Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2017

Transaction ID : 11168478

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stutts, Robert, Lawrence, ,

Mailing Address 3599 Timberview Road

City
Powhatan

State
VA

Zip Code
23139-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Anthem Blue Cross and Blue Shield

Occupation (for Individual)
Specialty Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2017

Transaction ID : 11168481

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hopwood, Kymberly, J., ,

Mailing Address 530 Water Street, 7th Floor

City
Oakland

State
CA

Zip Code
94607-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dealey, Renton & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

135.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2017

Transaction ID : 11168485

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Files, Pamela, , ,

Mailing Address P.O. Box 1490

City
Jackson

State
MS

Zip Code
39215-1490

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fisher Brown Bottrell Insurance Agency

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2017

Transaction ID : 11168492

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Danzig, Howard, , ,

Mailing Address 2157 Welsch Industrial Court

City

Saint Louis

State

MO

Zip Code

63146-4220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Employers Committed To Control Health

Occupation (for Individual)

Vice President of Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2017

Transaction ID : 11168498

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cooper, Catherine, L., ,

Mailing Address 39500 High Pointe Blvd., Suite 400

City

Novi

State

MI

Zip Code

48375-5517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Health Alliance Administrators

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2017

Transaction ID : 11168541

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

950.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mcneil, Keith, H., ,

Mailing Address One Willowbrook Court Suite 230

City
Petaluma

State
CA

Zip Code
94954-6551

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arrow Benefits Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
02 / 14 / 2017

Transaction ID : 11168543

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Giles, John, Keith, ,

Mailing Address 730 E. Strawbridge Avenue
Suite 210

City
Melbourne

State
FL

Zip Code
32901-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Verus Health Partners

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

MM / DD / YYYY
02 / 15 / 2017

Transaction ID : 11171111

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gant, Tom, , ,

Mailing Address 100 North Weinbach Avenue

City
Evansville

State
IN

Zip Code
47711-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Schultheis Life & Health Agency

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.00

Date of Receipt

MM / DD / YYYY
02 / 15 / 2017

Transaction ID : 11171114

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

1052.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Oleksiak, Edward, M., ,

Mailing Address 12712 Park Central Drive
Suite 100

City
Dallas

State
TX

Zip Code
75251-1527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Holmes Murphy & Assoc

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 15 / 2017

Transaction ID : 11171121

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayer, Frank, , ,

Mailing Address 1450 W Long Lake Suite 250

City
Troy

State
MI

Zip Code
48098-6355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cornerstone Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 15 / 2017

Transaction ID : 11171125

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kohlsdorf, Eric, , ,

Mailing Address 1501 Ingersoll Ave
Suite 200

City
Des Moines

State
IA

Zip Code
50309-3102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Prisma Strategies

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 15 / 2017

Transaction ID : 11171128

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 26 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Thomas, R., ,

Mailing Address 701 Lamar

City
Wichita Falls

State
TX

Zip Code
76301-6824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Boley Featherston Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2017

Transaction ID : 11171129

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bodolay, Robert, S., ,

Mailing Address PO Box 3608

City
Lakeland

State
FL

Zip Code
33802-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stahl and Associates Insurance, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2017

Transaction ID : 11171131

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Giles, Pamela, L., ,

Mailing Address 730 E. Strawbridge Avenue Suite 21

City
Melbourne

State
FL

Zip Code
32901-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Verus Health Partners

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2017

Transaction ID : 11171134

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

1165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bone, Jon, , ,

Mailing Address 3370 McGraw Ln

City
Lafayette

State
CA

Zip Code
94549-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Beere & Purves, Inc.

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
02 / 15 / 2017

Transaction ID : 11171135

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deagle, Michael, P., ,

Mailing Address 935 National Parkway
Suite 93550

City
Schaumburg

State
IL

Zip Code
60173-5150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BenAxis Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

MM / DD / YYYY
02 / 15 / 2017

Transaction ID : 11171174

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cochran, Stacy, , ,

Mailing Address 2131 Fawkes Lane

City
Roanoke

State
TX

Zip Code
76262-9048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Caprock Health Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2017

Transaction ID : 11171391

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

880.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Firestone, Laura, , ,

Mailing Address PO Box 381730

City
Duncanville

State
TX

Zip Code
75138-1730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Laura T Firestone CPA PC

Occupation (for Individual)
ACA Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171411

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McPike, Brian, K, ,

Mailing Address 1040 N. Cotner Blvd.

City
Lincoln

State
NE

Zip Code
68505-2229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Compensation Programs, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171416

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sterner, Heidi, J., ,

Mailing Address 7881 Sw Charleston Blvd

City
Las Vegas

State
NV

Zip Code
89117-8323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Leavitt Group Benefits Services

Occupation (for Individual)
Insurance Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171418

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

865.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dytrich, Nancy, , ,

Mailing Address P O Box 27247

City
Austin

State
TX

Zip Code
78755-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Goldstein Insurance Services

Occupation (for Individual)
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171425

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Duczak, George, V., ,

Mailing Address 5407 Trillium Blvd., Suite 250

City

Hoffman Estates

State

IL

Zip Code

60192-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Worker Plans, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171427

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goldmann, Donald, W., ,

Mailing Address 721 South Parker
Suite 300

City

Orange

State

CA

Zip Code

92868-4732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Word and Brown

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171428

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

6365.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sweeney, Michelle, J., ,

Mailing Address 30 Warder St., # 200
PO Box 209

City
Springfield

State
OH

Zip Code
45504-2581

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wallace & Turner Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171429

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hayes, Judith, A., ,

Mailing Address 1802 West Crescent Drive

City
Odessa

State
TX

Zip Code
79761-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hayes Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171432

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kestran, Craig, J., ,

Mailing Address 500 W. 36th Ave., Ste 300

City
Anchorage

State
AK

Zip Code
99503-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insurance Brokers of Alaska

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 16 / 2017

Transaction ID : 11171451

Amount of Each Receipt this Period

240.00

☐ Memo Item

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

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

1740.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fitzgerald, Robert, Mark, ,

Mailing Address 2842 Landing Way

City
Marietta

State
GA

Zip Code
30066-2362

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Robert Fitzgerald Insurance Agency, In

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2017

Transaction ID : 11173828

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farrell, Jennifer, Liane, ,

Mailing Address 3800 North Central Avenue
9th Floor

City
Phoenix

State
AZ

Zip Code
85012-1979

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Black, Gould & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2017

Transaction ID : 11173835

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McMahon, Daniel, W., ,

Mailing Address 501 N. Riverpoint Blvd., Ste 125

City
Spokane

State
WA

Zip Code
99202-1649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PayneWest Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2017

Transaction ID : 11173851

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

233.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gadinas, Kathy, M., ,

Mailing Address 16325 Boones Ferry Rd., #204

City
Lake Oswego

State
OR

Zip Code
97035-4297

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Columbia Benefit Solutions, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2017

Transaction ID : 11173863

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kite, William, , ,

Mailing Address PO Box 629

City
Roanoke

State
VA

Zip Code
24004-0629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
D&S Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2172.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2017

Transaction ID : 11174099

Amount of Each Receipt this Period

1572.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wild, Trei, , ,

Mailing Address 3724 Hearst Castle Way

City
Plano

State
TX

Zip Code
75025-3719

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Protect Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2017

Transaction ID : 11174135

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

1672.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coburn, Richard, P., ,

Mailing Address 19 Minor Court

City

San Rafael

State

CA

Zip Code

94903-3716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Word and Brown

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
02 / 22 / 2017

Transaction ID : 11174136

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Griffey, Don, R., ,

Mailing Address 56294 Prim Rose Circle

City

Elkhart

State

IN

Zip Code

46516-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hailey-Campbell, Inc

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
02 / 22 / 2017

Transaction ID : 11174139

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sale, Raymer, M., ,

Mailing Address 2905 Premiere Parkway
Suite 285

City

Duluth

State

GA

Zip Code

30097-5246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

E2E Benefits Services, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

MM / DD / YYYY
02 / 22 / 2017

Transaction ID : 11174150

Amount of Each Receipt this Period

170.00

☐ Memo Item

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

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

230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fogle, Albert, , ,

Mailing Address 3111 C St.
Suite 500

City
Anchorage

State
AK

Zip Code
99503-3973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northrim Benefits Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174794

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rash, Susan, Maley, ,

Mailing Address 2108 West Laburnum Avenue, Suite 3

City

Richmond

State

VA

Zip Code

23227-4300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BB&T Benefit Consultants of Virginia,

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174806

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rice, Russell, Lee, ,

Mailing Address 8000 IH-10 West, # 715

City

San Antonio

State

TX

Zip Code

78230-3880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVESIS, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174809

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

247.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 35 OF 78
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tellesbo-Kembel, Marsha, , ,

Mailing Address 1001 4th Avenue, Suite 3200

City
Seattle

State
WA

Zip Code
98154-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tellesbo & Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174817

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wright, Dennis, E., ,

Mailing Address 1111 Chestnut Hills Pky

City

Fort Wayne

State

IN

Zip Code

46814-8934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Employee Plans, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

170.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174821

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bartlein, Randall, J., ,

Mailing Address 22465 Panther Loop

City

Bradenton

State

FL

Zip Code

34202-6320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Suncoast Benefits & Analytics

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

24.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174828

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

267.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 36 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Embry, Michael, A., ,

Mailing Address 26555 Evergreen Road
Suite 535

City
Southfield

State
MI

Zip Code
48076-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Comprehensive Benefits

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174846

Amount of Each Receipt this Period

415.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thrash, Rachel, B., ,

Mailing Address 214 Milam Street

City

Shreveport

State
LA

Zip Code
71101-3226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Querbes & Nelson A Partnership

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174849

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stock, Tiffany, , ,

Mailing Address 3111 C St.
Suite 500

City

Anchorage

State
AK

Zip Code
99503-3973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northrim Benefits Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174850

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

495.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 37 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rock, Deidre, Dover, ,

Mailing Address P.O. Box 151

City
Camilla

State
GA

Zip Code
31730-0151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dover Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174857

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ward, Michael, , ,

Mailing Address 3219 E. Camelback Road
#569

City
Phoenix

State
AZ

Zip Code
85018-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Emerging Benefits Consultants, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174861

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Thomas, R., ,

Mailing Address 701 Lamar

City
Wichita Falls

State
TX

Zip Code
76301-6824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Boley Featherston Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174867

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

137.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kohlsdorf, Eric, , ,

Mailing Address 1501 Ingersoll Ave
Suite 200

City
Des Moines

State
IA

Zip Code
50309-3102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Prisma Strategies

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174869

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Selinsky, Steven, , ,

Mailing Address 28638 Oak Point Drive

City

Farmington Hills

State

MI

Zip Code

48331-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Alliance Plan

Occupation (for Individual)
Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174872

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brown, Carey, H., ,

Mailing Address Six Concourse Parkway
Suite 2750

City

Atlanta

State

GA

Zip Code

30328-6243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Benefit Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11174873

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christenson, Shawnee, , ,

Mailing Address PO Box 16394

City
Minneapolis

State
MN

Zip Code
55416-0394

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Crosstown Insurance

Occupation (for Individual)
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11175453

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blasman, Wayne, , ,

Mailing Address 5210 Lewis Road, Suite 14

City
Agoura Hills

State
CA

Zip Code
91301-2662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bridgeport Benefits Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11176816

Amount of Each Receipt this Period

850.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garcia, Stephanie, L., ,

Mailing Address 1204 Central Avenue SW

City
Albuquerque

State
NM

Zip Code
87102-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Linton & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2017

Transaction ID : 11177550

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 40 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Passe, Emma, M., ,

Mailing Address 6984 SE Langwood St

City
Hillsboro

State
OR

Zip Code
97123-6023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LaPorte Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2017

Transaction ID : 11177609

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fracchia, Anthony, , ,

Mailing Address 30600 Telegraph Rd
Suite 1225

City

Bingham Farms

State

MI

Zip Code

48025-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Altruis Benefits Consulting

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2017

Transaction ID : 11177740

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Martin, Lisa, A., ,

Mailing Address 192 Liberty Chapel Rd

City

Appomattox

State

VA

Zip Code

24522-8853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
D&S Agency, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2017

Transaction ID : 11177741

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

895.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 41 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reents, Joni, Robin, ,

Mailing Address 5760 W. 120th Avenue
Suite 260

City
Broomfield

State
CO

Zip Code
80020-6939

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reents Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2017

Transaction ID : 11177742

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bogott, Christine, M., ,

Mailing Address 125 Grand Avenue, Unit B

City

Grand Junction

State
CO

Zip Code
81501-2251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MHIB Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2017

Transaction ID : 11177748

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drysdale, Sam, , ,

Mailing Address P.O. Box 8222

City

Springfield

State
MO

Zip Code
65801-8222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mercy Health Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2017

Transaction ID : 11177767

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

157.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dinkel, Matthew, Kim, ,

Mailing Address 13720 Six Mile Cypress

City

Fort Myers

State

FL

Zip Code

33912-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alan Williams & Associates Insurance A

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2017

Transaction ID : 11177774

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VanPutten, Denise, R., ,

Mailing Address 625 Kenmoor Ave

City

Grand Rapids

State

MI

Zip Code

49546-2395

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HUB International

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2017

Transaction ID : 11177791

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Underhill, Elizabeth, J., ,

Mailing Address 5951 Canoga Avenue

City

Woodland Hills

State

CA

Zip Code

91367-5010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Underhill Insurance Agency, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2017

Transaction ID : 11177799

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 43 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nevins, Erin, , ,

Mailing Address 1207 Troy Schenectady Rd
Suite 201

City
Latham

State
NY

Zip Code
12110-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EP Nevins Insurance Agency Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

148.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2017

Transaction ID : 11177806

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bechtold, Annette, , ,

Mailing Address 200 Galleria Pkwy SE
Ste 1950

City
Atlanta

State
GA

Zip Code
30339-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OneDigital

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2017

Transaction ID : 11177807

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gussin, Craig, , ,

Mailing Address 701 Palomar Airport Road #260

City
Carlsbad

State
CA

Zip Code
92011-1047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Auerbach & Gussin Insurance and Financ

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2017

Transaction ID : 11177818

Amount of Each Receipt this Period

170.00

☐ Memo Item

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

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

297.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rowe, Peter, L., ,

Mailing Address 3033 N. Central Ave
Suite 810

City
Phoenix

State
AZ

Zip Code
85012-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sunwest Benefits Consulting, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2017

Transaction ID : 11177824

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stewart, Edward, W., ,

Mailing Address 1248 Springfield Pike

City

Cincinnati

State
OH

Zip Code
45215-2142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ted Marty & Associates

Occupation (for Individual)
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2017

Transaction ID : 11177850

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lawson, Tonda, , ,

Mailing Address 6611 Orion Drive
Suite 201

City

Fort Myers

State
FL

Zip Code
33912-4329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brown & Brown, Inc.

Occupation (for Individual)
VP Employee Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177858

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

495.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Allard, Terry, , ,

Mailing Address 3000 A Street, Suite 400

City
Anchorage

State
AK

Zip Code
99503-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Wilson Agency, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177861

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoffman, Crystal, , ,

Mailing Address P.O. Box 709

City
Sugar Land

State
TX

Zip Code
77487-0709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Benefit Concepts, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177866

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stearns, Candius, Michelle, ,

Mailing Address 3290 W Big Beaver Rd
Ste 503

City
Troy

State
MI

Zip Code
48084-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mason-McBride/DFB

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177872

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

340.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 46 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Currier, Craig, Thomas, ,

Mailing Address 11213 Davenport St.
Ste. 201

City
Omaha

State
NE

Zip Code
68154-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Aon Risk Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177886

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Paul, E., ,

Mailing Address 100 Queen Street

City

Southington

State

CT

Zip Code

06489-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Paul E Smith Insurance, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177896

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ragusa, Ruth, Ferry, ,

Mailing Address 308 Lassalle Drive

City

River Ridge

State

LA

Zip Code

70123-3648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Associated Benefits Consulting

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 11177900

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

272.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 47 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Childers, Russell, B., ,

Mailing Address PO Box 1547

City
Americus

State
GA

Zip Code
31709-1547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Russ Childers, CLU

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

02 / 28 / 2017

Transaction ID : 11177908

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dinkel, Matthew, Kim, ,

Mailing Address 13720 Six Mile Cypress

City

Fort Myers

State

FL

Zip Code

33912-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alan Williams & Associates Insurance A

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

02 / 14 / 2017

Transaction ID : 11178220

Amount of Each Receipt this Period

75.00

☐ Memo Item

2017 CC Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Moody Gresham, Sandra, , ,

Mailing Address 762 E Main Street

City

Columbus

State

OH

Zip Code

43205-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Dehan Enterprises Insurance & Financia

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

02 / 28 / 2017

Transaction ID : 11185828

Amount of Each Receipt this Period

0.00

☒ Memo Item

Refund(s) on Schedule B Totaling \$30.00 This changes the YTD Total to \$0.00

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

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

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McPike, Christine, , ,

Mailing Address 1040 N. Cotner Blvd.

City
Lincoln

State
NE

Zip Code
68505-2229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Compensation Programs, Inc.

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4332017

Amount of Each Receipt this Period

1075.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ragusa, Ruth, Ferry, ,

Mailing Address 308 Lassalle Drive

City
River Ridge

State
LA

Zip Code
70123-3648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Associated Benefits Consulting

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4332718

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Giles, John, Keith, ,

Mailing Address 730 E. Strawbridge Avenue
Suite 210

City
Melbourne

State
FL

Zip Code
32901-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Verus Health Partners

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4334518

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

1525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crandall, Lori, , ,

Mailing Address 2375 E Camelback Rd
Suite 250

City
Phoenix

State
AZ

Zip Code
85016-3491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USI

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4335315

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lawson, Tonda, , ,

Mailing Address 6611 Orion Drive
Suite 201

City

Fort Myers

State
FL

Zip Code
33912-4329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brown & Brown, Inc.

Occupation (for Individual)
VP Employee Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4336392

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dinkel, Matthew, Kim, ,

Mailing Address 13720 Six Mile Cypress

City

Fort Myers

State
FL

Zip Code
33912-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alan Williams & Associates Insurance A

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4370929

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 50 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hopwood, Kymberly, J., ,

Mailing Address 530 Water Street, 7th Floor

City
Oakland

State
CA

Zip Code
94607-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dealey, Renton & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4371209

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayer, Frank, , ,

Mailing Address 1450 W Long Lake Suite 250

City
Troy

State
MI

Zip Code
48098-6355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cornerstone Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4371669

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bartlein, Randall, J., ,

Mailing Address 22465 Panther Loop

City
Bradenton

State
FL

Zip Code
34202-6320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Suncoast Benefits & Analytics

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4371698

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gant, Tom, , ,

Mailing Address 100 North Weinbach Avenue

City
Evansville

State
IN

Zip Code
47711-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Schultheis Life & Health Agency

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4374759

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reisinger Pool, Gentry, , ,

Mailing Address 3803 Village Glen Tr.

City
Arlington

State
TX

Zip Code
76016-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sterling Administration

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4376203

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nevins, Erin, , ,

Mailing Address 1207 Troy Schenectady Rd
Suite 201

City
Latham

State
NY

Zip Code
12110-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EP Nevins Insurance Agency Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4378094

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 52 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stricker, Gerald, J., ,

Mailing Address 5708 Farlook Dr

City
Cincinnati

State
OH

Zip Code
45247-6924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Walter P. Dolle Ins. Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : 4378205

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schreder, Lynn, M., ,

Mailing Address 130 North 25th Street

City

Fort Dodge

State

IA

Zip Code

50501-4338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KHI Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR433076115730

Amount of Each Receipt this Period

175.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McFerrin, Dwane, C., ,

Mailing Address 8420 West Dodge Road
Suite 510

City

Omaha

State

NE

Zip Code

68114-3432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Senior Market Sales, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR433168115730

Amount of Each Receipt this Period

160.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 53 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spleet, Michael, , ,

Mailing Address 2444 East Hill Rd.

City
Grand Blanc

State
MI

Zip Code
48439-5098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Franklin Benefit Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR433316615730

Amount of Each Receipt this Period

135.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ward, Michael, , ,

Mailing Address 3219 E. Camelback Road
#569

City
Phoenix

State
AZ

Zip Code
85018-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Emerging Benefits Consultants, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR433329615730

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Watts, Jessica, J., ,

Mailing Address 401 Congress Ave

City
Austin

State
TX

Zip Code
78701-4071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Frost Insurance

Occupation (for Individual)
VP, Benefits Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR433425115730

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

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

365.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 54 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Trautwein, Janet, , ,

Mailing Address 1212 New York Ave. NW, Ste 1100

City
Washington

State
DC

Zip Code
20005-3987

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NAHU

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR436821415730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Besselman, Thomas, , ,

Mailing Address 6421 Perkins Rd., # 2B, Bldg A

City
Baton Rouge

State
LA

Zip Code
70808-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gallagher Benefit Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR436824615730

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Patton, Jesse, A., ,

Mailing Address 1112 Maple Street

City
West Des Moines

State
IA

Zip Code
50265-4420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Associations Marketing Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR436829515730

Amount of Each Receipt this Period

350.00

☐ Memo Item

P/R Deduction (\$350.00 Monthly)

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

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

770.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ashmore, Elizabeth, , ,

Mailing Address 6102 82nd St, Bldg #6

City
Lubbock

State
TX

Zip Code
79424-0803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ashmore & Associates Insurance Agency,

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

02 / 28 / 2017

Transaction ID : PR436830315730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wright, Keith, L., ,

Mailing Address 401 W Front St
Ste 4

City

Traverse City

State

MI

Zip Code

49684-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wright Insurance Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

02 / 28 / 2017

Transaction ID : PR436848515730

Amount of Each Receipt this Period

192.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stenger, James, R., ,

Mailing Address 8926 Crown Colony Boulevard

City

Fort Myers

State

FL

Zip Code

33908-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NAHU

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

02 / 28 / 2017

Transaction ID : PR436939915730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

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

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

532.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 56 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seifert, Greg, , ,

Mailing Address P.O. Box 189

916 Main Street

City

Vancouver

State

WA

Zip Code

98666-0189

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Biggs Insurance Services

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

02 / 28 / 2017

Transaction ID : PR436941615730

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fristoe, Kelly, Don, ,

Mailing Address 807 8th Street, Suite 300

City

Wichita Falls

State

TX

Zip Code

76301-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Financial Partners

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

02 / 28 / 2017

Transaction ID : PR437002315730

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gray, Michael, D., ,

Mailing Address 233 South 13th Street, Suite 1650

City

Lincoln

State

NE

Zip Code

68508-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Harry A. Koch Co

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

02 / 28 / 2017

Transaction ID : PR437016715730

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

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

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

315.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 57 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **Alberts, Suzetta, E., ,**

Mailing Address 26555 Evergreen Drive
Ste 535

City
Southfield

State
MI

Zip Code
48076-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Comprehensive Benefits

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437076115730

Amount of Each Receipt this Period

84.00

☐ Memo Item

P/R Deduction (\$84.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Koehler, Linda Rose, , ,**

Mailing Address 235 Main Street

City

Pleasanton

State

CA

Zip Code

94566-8206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Herzog Insurance Agency, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437090115730

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Roberts, Joseph, K., ,**

Mailing Address 1128 Lincoln Mall
Suite 200

City

Lincoln

State

NE

Zip Code

68508-2878

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNICO

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437118015730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

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

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

339.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 58 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Benton, Bruce, D., ,

Mailing Address 17200 Ventura Blvd
Suite 312

City
Encino

State
CA

Zip Code
91316-5018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genesis Financial & Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437123015730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Braden, Victoria, J., ,

Mailing Address 3875 Johns Creek Parkway, Suite C

City

Suwanee

State
GA

Zip Code
30024-1294

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Braden Benefit Strategies, Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437201915730

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stenger, Marilyn, A., ,

Mailing Address 8926 Crown Colony Blvd

City

Fort Myers

State
FL

Zip Code
33908-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MVS Consulting

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437206415730

Amount of Each Receipt this Period

210.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

630.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 59 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wright, Dennis, E., ,

Mailing Address 1111 Chestnut Hills Pky

City

Fort Wayne

State

IN

Zip Code

46814-8934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Employee Plans, LLC

Occupation (for Individual)

Broker

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437214815730

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cooper, Catherine, L., ,

Mailing Address 39500 High Pointe Blvd., Suite 400

City

Novi

State

MI

Zip Code

48375-5517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Health Alliance Administrators

Occupation (for Individual)

Broker

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437218315730

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gardner, Joy, K., ,

Mailing Address 9424 Double R Blvd

City

Reno

State

NV

Zip Code

89521-5977

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Comstock Insurance Agencies, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437231215730

Amount of Each Receipt this Period

47.00

☐ Memo Item

P/R Deduction (\$47.00 Monthly)

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

182.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 60 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rowe, Peter, L., ,

Mailing Address 3033 N. Central Ave
Suite 810

City
Phoenix

State
AZ

Zip Code
85012-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sunwest Benefits Consulting, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437236915730

Amount of Each Receipt this Period

75.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Toups, Jennifer, L., ,

Mailing Address #1 Galleria Blvd, Suite 1122

City

Metairie

State

LA

Zip Code

70001-2092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Humana

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437270515730

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Summers, James, F., ,

Mailing Address 8420 West Dodge Road, 5th Floor

City

Omaha

State

NE

Zip Code

68114-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Senior Market Sales, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437281015730

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$125.00 Monthly)

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

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

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 61 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rice, Russell, Lee, ,

Mailing Address 8000 IH-10 West, # 715

City
San Antonio

State
TX

Zip Code
78230-3880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVESIS, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437283415730

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cramer, Valerie, Lynn, ,

Mailing Address 588 - 3 Mile Road, NW
Suite 101

City
Grand Rapids

State
MI

Zip Code
49544-8221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grotenhuis

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437416415730

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mutter, Amy, D., ,

Mailing Address 2670 Electric Road

City
Roanoke

State
VA

Zip Code
24018-3511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Innovative Insurance Group, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437454915730

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

192.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 62 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smith, David, C., ,

Mailing Address 915 Englewood Avenue

City
DurhamState
NCZip Code
27701-1105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ebenconcepts CompanyOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437474515730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rider, Susan, M., ,

Mailing Address 1402 N Capital
#400City
IndianapolisState
INZip Code
46202-2375FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gregory & Appel InsuranceOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437510715730

Amount of Each Receipt this Period

213.00

☐ Memo Item

P/R Deduction (\$63.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Currier, Craig, Thomas, ,

Mailing Address 11213 Davenport St.
Ste. 201City
OmahaState
NEZip Code
68154-2604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Aon Risk SolutionsOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437605415730

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$20.83 Monthly)

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

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

533.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 63 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rose, Mark, , ,

Mailing Address 11225 SE 6 Th St
 Suite 110

City
 Bellevue

State
 WA

Zip Code
 98004-6478

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 The Partners Group

Occupation (for Individual)
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 28 / 2017

Transaction ID : PR437657715730

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Webb, Yolanda, Marie, ,

Mailing Address 6117 Clover Ct.

City
 Chino

State
 CA

Zip Code
 91710-5337

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 Webb Insurance Solutions

Occupation (for Individual)
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 28 / 2017

Transaction ID : PR437705615730

Amount of Each Receipt this Period

142.00

☐ Memo Item

P/R Deduction (\$142.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schell, Gregory, J., ,

Mailing Address 545 South Third Street
 Suite 300

City
 Louisville

State
 KY

Zip Code
 40202-1936

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 Sterling G. Thompson Company

Occupation (for Individual)
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 28 / 2017

Transaction ID : PR437797615730

Amount of Each Receipt this Period

160.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

472.00

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 64 OF 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Purcilly, Amy, , ,

Mailing Address PO Box 7028

City
Troy

State
MI

Zip Code
48007-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mason-McBride, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437814915730

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fisher, Erin, B., ,

Mailing Address 131-6 Courtland Avenue

City

Stamford

State

CT

Zip Code

06902-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Find Medicare Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR437819715730

Amount of Each Receipt this Period

75.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lupcke, Adam, , ,

Mailing Address 600 E Lafayette Blvd.

City

Detroit

State

MI

Zip Code

48226-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
?Director of Accounting Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR450744815730

Amount of Each Receipt this Period

213.00

☐ Memo Item

P/R Deduction (\$63.00 Monthly)

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

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

468.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 78

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Waltman, Jessica, Fulginiti, ,

Mailing Address 10 Doyle Road

City
Wayne

State
PA

Zip Code
19087-3903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Forward Health Consulting

Occupation (for Individual)
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2017

Transaction ID : PR470100115730

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

85.00

61149.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 78

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2211 North First Street

City
San JoseState
CAZip Code
95131Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11178221

Amount of Each Disbursement this Period

2182.08

Credit Card Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Way

City
KnoxvilleState
TNZip Code
37920Purpose of Disbursement
Credit Card Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11178222

Amount of Each Disbursement this Period

333.80

Credit Card Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2515.88

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

2515.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
2/7 Breakfast

011

Category/
Type

Candidate Name

Donnelly, Joe, Simon, Sen., Sr.

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2017

FEC Identification Number

C C00393652

Transaction ID : 11110437

Amount of Each Disbursement this Period

1000.00

2/7 Breakfast

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Carlos Curbelo Congress

Mailing Address 8724 Sw 72nd St

City
MiamiState
FLZip Code
33173Purpose of Disbursement
2/1 Lunch

011

Category/
Type

Candidate Name

Curbelo, Carlos, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2017

FEC Identification Number

C C00546846

Transaction ID : 11166130

Amount of Each Disbursement this Period

1000.00

2/1 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marsha Blackburn For Congress, Inc.

Mailing Address PO Box 3750

City
BrentwoodState
TNZip Code
37024Purpose of Disbursement
2/7 Dinner

011

Category/
Type

Candidate Name

Blackburn, Marsha, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2017

FEC Identification Number

C C00376939

Transaction ID : 11167641

Amount of Each Disbursement this Period

2000.00

2/7 Dinner

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann Wagner For Congress

Mailing Address PO Box 50

City
BallwinState
MOZip Code
63022Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Wagner, Ann, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00495846

Transaction ID : 11168129

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. All For Our Country PAC

Mailing Address 611 Pennsylvania Avenue SE, #143

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11168131

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David Schweikert For Congress

Mailing Address 15749 E El Lago Blvd

City
Fountain HillsState
AZZip Code
85268Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Schweikert, David, , Mr.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00440727

Transaction ID : 11168132

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Young For Iowa, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Mailing Address PO Box 162

FEC Identification Number

C C00545616**Transaction ID : 11168133**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo ItemCity
Van MeterState
IAZip Code
50261Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Young, David, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 03

Full Name (Last, First, Middle Initial)

B. Don Bacon For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Mailing Address PO Box 391368

FEC Identification Number

C C00575167**Transaction ID : 11168134**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo ItemCity
OmahaState
NEZip Code
68139Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Bacon, Donald, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NE

District: 02

Full Name (Last, First, Middle Initial)

C. Gregg Harper For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Mailing Address Post Office Box 54344

FEC Identification Number

C C00441295**Transaction ID : 11168136**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo ItemCity
PearlState
MSZip Code
39288Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Harper, Gregg, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MS

District: 03

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

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jim Renacci For Congress

Mailing Address 150 Smokerise Drive

City
WadsworthState
OHZip Code
44281Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Renacci, James, B., Rep.,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: OH

District: 16

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00466359**Transaction ID : 11168137**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Josh Gottheimer For Congress

Mailing Address PO Box 584

City
RidgewoodState
NJZip Code
07451Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Gottheimer, Josh, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: NJ

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00573949**Transaction ID : 11168138**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kurt Schrader For Congress

Mailing Address PO Box 3314

City
Oregon CityState
ORZip Code
97045Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Schrader, Kurt, , Rep.,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: OR

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00446906**Transaction ID : 11168139**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Walters For Congress

Mailing Address 9070 Irvine Center Drive, #150

City
IrvineState
CAZip Code
92618Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Walters, Mimi, , ,

Office Sought:

☒

House

☐ Senate☐ President

Disbursement For: 2018

☒

Primary

☐

General

☐ Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00546853**Transaction ID : 11168141**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Morgan Griffith For Congress

Mailing Address PO Box 361

City

Christiansburg

State
VAZip Code
24068Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Griffith, Morgan, H., Rep.,

Office Sought:

☒

House

☐ Senate☐ President

Disbursement For: 2018

☒

Primary

☐

General

☐ Other (specify) ▼

State: VA

District: 09

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00477240**Transaction ID : 11168142**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Neal Dunn

Mailing Address 2640a Mitcham Drive

City

Tallahassee

State
FLZip Code
32308Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Dunn, Neal, , , MD FACS

Office Sought:

☒

House

☐ Senate☐ President

Disbursement For: 2018

☒

Primary

☐

General

☐ Other (specify) ▼

State: FL

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	7		

FEC Identification Number

C C00582304**Transaction ID : 11168143**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Olson For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Mailing Address PO Box 16381

City
Sugar LandState
TXZip Code
77496Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Olson, Pete, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 22

FEC Identification Number

C C00437913

Transaction ID : 11168145

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hudson For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Mailing Address PO Box 5053

City
ConcordState
NCZip Code
28027Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Hudson, Richard, L., Rep., Jr.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NC

District: 08

FEC Identification Number

C C00504522

Transaction ID : 11168146

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Walorski For Congress Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Mailing Address PO Box 954

City
MishawakaState
INZip Code
46546Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Walorski, Jackie, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 02

FEC Identification Number

C C00468579

Transaction ID : 11168147

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. PROJECT WEST POLITICAL ACTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2017

Mailing Address 9227 EAST LINCOLN AVENUE #200-435

City
LONE TREEState
COZip Code
80124Purpose of Disbursement
2017 Capitol Club Lunch

011

FEC Identification Number

C C00525543

Transaction ID : 11168149

Amount of Each Disbursement this Period

5000.00

2017 Capitol Club Lunch

☐ Memo Item

Candidate Name

PROJECT WEST POLITICAL ACTION COMMITTEECategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Joe Kennedy For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2017

Mailing Address PO Box 590464

City
NewtonState
MAZip Code
02459Purpose of Disbursement
2/15 Dinner

011

FEC Identification Number

C C00512970

Transaction ID : 11168150

Amount of Each Disbursement this Period

2000.00

2/15 Dinner

☐ Memo Item

Candidate Name

Kennedy, Joseph, P., Rep., IIICategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA

District: 04

Full Name (Last, First, Middle Initial)

C. Cathy McMorris Rodgers For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2017

Mailing Address Box 137

City
SpokaneState
WAZip Code
99210Purpose of Disbursement
2017 CC Reception

011

FEC Identification Number

C C00390476

Transaction ID : 11168175

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Candidate Name

McMorris Rodgers, Cathy, , Rep.,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 05

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

9000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Heidi For Senate

Mailing Address PO Box 1577

City
BismarckState
NDZip Code
58502Purpose of Disbursement
2/16 Lunch

011

Category/
Type

Candidate Name

Heitkamp, Heidi, , Sen.,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	2				1	0					2	0	1	7

FEC Identification Number

C C00505552**Transaction ID : 11168181**

Amount of Each Disbursement this Period

2000.00

2/16 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Dennis Ross

Mailing Address Post Office Box 7310

City
LakelandState
FLZip Code
33807Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Ross, Dennis, A., Rep.,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: FL

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	2				1	6					2	0	1	7

FEC Identification Number

C C00459461**Transaction ID : 11171401**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tony Cardenas For Congress

Mailing Address 249 E. Ocean Blvd. Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Cardenas, Tony, , Rep.,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: CA

District: 29

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	2				1	6					2	0	1	7

FEC Identification Number

C C00498873**Transaction ID : 11171402**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Drew Ferguson For Congress Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2017

Mailing Address PO Box 387

FEC Identification Number

C C00607838**Transaction ID : 11171404**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo ItemCity
West PointState
GAZip Code
31833Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Ferguson, Anderson, , , IV

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: GA

District: 03

Full Name (Last, First, Middle Initial)

B. Brian Fitzpatrick For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2017

Mailing Address PO Box 939

FEC Identification Number

C C00607416**Transaction ID : 11171405**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo ItemCity
LanghorneState
PAZip Code
19047Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Fitzpatrick, Brian, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 08

Full Name (Last, First, Middle Initial)

C. Guthrie For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2017

Mailing Address PO Box 9639

FEC Identification Number

C C00445023**Transaction ID : 11171406**

Amount of Each Disbursement this Period

2000.00

2017 CC Reception

☐ Memo ItemCity
Bowling GreenState
KYZip Code
42102Purpose of Disbursement
2017 CC Reception

011

Category/
Type

Candidate Name

Guthrie, Brett, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY

District: 02

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

6000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Kelly For Congress

Mailing Address PO Box 476

City
LyndoraState
PAZip Code
16045Purpose of Disbursement
2/28 Lunch

011

Category/
Type

Candidate Name

Kelly, Mike, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2017

FEC Identification Number

C C00474189

Transaction ID : 11175613

Amount of Each Disbursement this Period

1000.00

2/28 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Collins For Congress

Mailing Address PO Box 386

City
ClarenceState
NYZip Code
14031Purpose of Disbursement
2/27 Lunch

011

Category/
Type

Candidate Name

Collins, Christopher, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2017

FEC Identification Number

C C00520379

Transaction ID : 11175614

Amount of Each Disbursement this Period

1000.00

2/27 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scott Peters For Congress

Mailing Address PO Box 22074

City
San DiegoState
CAZip Code
92192Purpose of Disbursement
2/28 Lunch

011

Category/
Type

Candidate Name

Peters, Scott, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2017

FEC Identification Number

C C00503110

Transaction ID : 11175615

Amount of Each Disbursement this Period

1000.00

2/28 Lunch

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Delbene For Congress

Mailing Address PO Box 487

City
BothellState
WAZip Code
98041Purpose of Disbursement
3/2 Lunch

011

Category/
Type

Candidate Name

DelBene, Suzan, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2017

FEC Identification Number

C C00459099

Transaction ID : 11175616

Amount of Each Disbursement this Period

1000.00

3/2 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Thom Tillis Committee

Mailing Address PO Box 97396

City
RaleighState
NCZip Code
27624Purpose of Disbursement
3/2 Lunch

011

Category/
Type

Candidate Name

Tillis, Thom, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2017

FEC Identification Number

C C00545772

Transaction ID : 11175617

Amount of Each Disbursement this Period

1000.00

3/2 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
2017 Membership Dues

011

Category/
Type

Candidate Name

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2017

FEC Identification Number

C C0000935

Transaction ID : 11175618

Amount of Each Disbursement this Period

15000.00

2017 Membership Dues

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2017

Mailing Address 120 MARYLAND AVENUE NE

FEC Identification Number

C C00042366**Transaction ID : 11175619**

Amount of Each Disbursement this Period

15000.00

2017 Membership Dues

☐ Memo ItemCity
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
2017 Membership Dues

011

Category/
Type

Candidate Name

DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. MCCARTHY VICTORY FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2017

Mailing Address PO BOX 13307

FEC Identification Number

C**Transaction ID : 11175620**

Amount of Each Disbursement this Period

1000.00

☐ Memo ItemCity
BAKERSFIELDState
CAZip Code
93389

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Mike Johnson For Louisiana

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2017

Mailing Address 2900 Clearview Pkwy
Suite 206

FEC Identification Number

C C00608695**Transaction ID : 11177728**

Amount of Each Disbursement this Period

1000.00

Local Chapter Meeting

☐ Memo ItemCity
MetairieState
LAZip Code
70006Purpose of Disbursement
Local Chapter Meeting

011

Category/
Type

Candidate Name

Johnson, Mike, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA

District: 04

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

17000.00

92000.00