

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Health Underwriters Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="93702.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="189578.12"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="37037.92"/>	<input type="text" value="478086.01"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="226616.04"/>	<input type="text" value="571788.41"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30534.23"/>	<input type="text" value="375706.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="196081.81"/>	<input type="text" value="196081.81"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 06/2004)

Write or Type Committee Name

Health Underwriters Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27530.92	284179.60
(ii) Unitemized	9507.00	188363.69
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	37037.92	472543.29
(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)	37037.92	472543.29
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	3792.72
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1750.00
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))..... ▶	37037.92	478086.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	37037.92	478086.01

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1234.23	16669.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1234.23	16669.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29300.00	358000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1037.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1037.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30534.23	375706.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30534.23	375706.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	37037.92	472543.29
34. Total Contribution Refunds (from Line 28(d))	0.00	1037.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37037.92	471506.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1234.23	16669.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3792.72
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1234.23	12876.88

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

Form/Schedule: F3XA

Transaction ID :

Re-designation of Himes for Congress check from Primary to Convention election. Was approved back in December but not 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 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Korina Kay Gregg
 Full Name (Last, First, Middle Initial)
 Mailing Address 6020 E Paseo Santa Teresa
 City Tucson State AZ Zip Code 85750-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HR Executive Benefits Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : 4331940
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Michael J. Schunk
 Full Name (Last, First, Middle Initial)
 Mailing Address 5281 SW 14th Street
 City Plantation State FL Zip Code 33317-5450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Employee Benefit Advisors, LLC Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : 4373497
 Amount of Each Receipt this Period
 365.00
 Memo Item

C. Brad Davis
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Wraith, Scarlett, & Randolph Insurance Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : 4376949
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	465.00
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 8 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kate Banchy
Full Name (Last, First, Middle Initial)

Mailing Address 4233 Southtowne Drive

City Eau Claire State WI Zip Code 54701-2652

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

Name of Employer Spectrum Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2015

Transaction ID : 9862564

Amount of Each Receipt this Period
 30.00

Memo Item

B. Tamela L. Southan
Full Name (Last, First, Middle Initial)

Mailing Address 101 W. Renner Rd., Ste 160

City Richardson State TX Zip Code 75082-2019

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

Name of Employer Benefit Solutions By Design Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2015

Transaction ID : 9862568

Amount of Each Receipt this Period
 42.00

Memo Item

C. Ray M. Musser
Full Name (Last, First, Middle Initial)

Mailing Address 404 North Second Avenue, Suite E

City Upland State CA Zip Code 91786-4793

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

Name of Employer Ray Musser & Associates Insurance Serv Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : 9862570

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	157.00
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 9 OF 178
(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

A. Juna M. Penney
 Full Name (Last, First, Middle Initial)
 Mailing Address 2091 Shepherdia Drive
 City Anchorage State AK Zip Code 99508-4043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Providence Health & Services Alaska Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 11 / 02 / 2015
Transaction ID : 9862571
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Chad P. Schneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 14430 Benefit St. Apt 308
 City Sherman Oaks State CA Zip Code 91423-4067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Code SixFour Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 996.00

Date of Receipt 11 / 03 / 2015
Transaction ID : 9863057
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Joshua Weinstein
 Full Name (Last, First, Middle Initial)
 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 Northrim Benefits Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 04 / 2015
Transaction ID : 9863075
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 10 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David M. Sherrill
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 Centerpointe Circle, Suite 163
 City Altamonte Springs State FL Zip Code 32701-3446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sherrill Insurance Brokerage, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 11 / 05 / 2015
Transaction ID : 9863220
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Jean Van Der Sommen
 Full Name (Last, First, Middle Initial)
 Mailing Address 4940 North River Drive
 City Cumming State GA Zip Code 30041-9495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Employer Advisors Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 366.00

Date of Receipt 11 / 05 / 2015
Transaction ID : 9863221
 Amount of Each Receipt this Period 42.00
 Memo Item

C. R Dane Rianhard
 Full Name (Last, First, Middle Initial)
 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 TriBridge Partners, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 876.00

Date of Receipt 11 / 05 / 2015
Transaction ID : 9863222
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	102.00
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 11 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kenneth Thomas Stevenson
Full Name (Last, First, Middle Initial)

Mailing Address 3131 Lonbladh Road

City Tallahassee State FL Zip Code 32308-4255

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

Name of Employer Earl Bacon Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **277.00**

Date of Receipt **11 / 05 / 2015**

Transaction ID : 9863223

Amount of Each Receipt this Period **63.00**

Memo Item

B. Mari Stasco
Full Name (Last, First, Middle Initial)

Mailing Address 310 K Street Suite 221

City Anchorage State AK Zip Code 99501-2064

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

Name of Employer Total Benefit Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **291.00**

Date of Receipt **11 / 06 / 2015**

Transaction ID : 9863272

Amount of Each Receipt this Period **30.00**

Memo Item

C. J. J. Green
Full Name (Last, First, Middle Initial)

Mailing Address 1219 W. 2nd St.

City Grand Island State NE Zip Code 68801-5709

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

Name of Employer Primark, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **11 / 06 / 2015**

Transaction ID : 9863274

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	123.00
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 12 OF 178
(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 (Last, First, Middle Initial)
A. Michael Venditto

Mailing Address 609 New Road, #D

City State Zip Code
Linwood NJ 08221-1250

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

Name of Employer Occupation
Hafetz & Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2015
Transaction ID : 9863275

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Julie A. Shepard-Hall

Mailing Address 3913 N. Post

City State Zip Code
Spokane WA 99205-1149

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

Name of Employer Occupation
Integrity Insurance Solutions, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2015
Transaction ID : 9863276

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Paul Joseph Scholz

Mailing Address 17445 Arbor St
Suite 310

City State Zip Code
Omaha NE 68130-4645

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

Name of Employer Occupation
OCI Insurance and Financial Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2015
Transaction ID : 9863277

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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 13 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Teresa F. DeBruin
 Full Name (Last, First, Middle Initial)
 Mailing Address 5441 Edgerton Drive
 City State Zip Code
 Peachtree Corners GA 30092-2185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DeBruin Benefit Services, Inc./ The La Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 667.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015
Transaction ID : 9863366
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Joanne Bikmaz
 Full Name (Last, First, Middle Initial)
 Mailing Address 1860 Shaded Wood Road
 City State Zip Code
 Diamond Bar CA 91789-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Fisher & Associates Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015
Transaction ID : 9863367
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Ashley Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 99565
 City State Zip Code
 Louisville KY 40269-0565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Van Zandt Emrich and Cary Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 384.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2015
Transaction ID : 9863368
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	122.00
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 14 OF 178
(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 (Last, First, Middle Initial)
A. Heather Ambro

Mailing Address 2157 Welsch Industrial Ct.

City State Zip Code
Saint Louis MO 63146-4220

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

Name of Employer Occupation
The ECCHIC Group VP of Administration Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **446.00**

Date of Receipt
11 / 07 / 2015
Transaction ID : 9863372

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Emily Black Bremer

Mailing Address 8000 Bonhomme Ave., # 213

City State Zip Code
Saint Louis MO 63105-3515

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

Name of Employer Occupation
Bremer Conley LLC Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
11 / 07 / 2015
Transaction ID : 9863375

Amount of Each Receipt this Period
63.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Steven H. Way

Mailing Address 204 Clyde Drive

City State Zip Code
Walnut Creek CA 94598-3425

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

Name of Employer Occupation
Way Financial Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
11 / 07 / 2015
Transaction ID : 9863381

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **648.00**

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 15 OF 178
(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

A. Donald L. Balla
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 Grant Building
 City Pittsburgh State PA Zip Code 15219-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Simpson & McCrady LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 08 / 2015
Transaction ID : 9863384
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Paul Pendorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 31666 W. Nine Dr.
 City Laguna Niguel State CA Zip Code 92677-2955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Independent Financial Group LLC Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 11 / 09 / 2015
Transaction ID : 9863390
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Anthony C Buechler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1203 Colonial Circle
 City Papillion State NE Zip Code 68046-6109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Buechler Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 09 / 2015
Transaction ID : 9863391
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 16 OF 178
(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 (Last, First, Middle Initial)
A. Alexis Weilmuenster

Mailing Address 625 Elden Street, Suite 203

City Herndon State VA Zip Code 20170-4740

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

Name of Employer Gallagher Benefit Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt **11 / 09 / 2015**

Transaction ID : 9863393

Amount of Each Receipt this Period **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Scott Maichel

Mailing Address 4180 La Jolla Village Drive Suite 450

City La Jolla State CA Zip Code 92037-1472

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

Name of Employer AmCheck Occupation Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 09 / 2015**

Transaction ID : 9863394

Amount of Each Receipt this Period **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. Scott D. Snowden

Mailing Address 812 Lyndon Lane, Suite 101

City Louisville State KY Zip Code 40222-3844

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

Name of Employer Snowden & Associates, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 09 / 2015**

Transaction ID : 9863396

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **90.00**

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 17 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. William W. Wong

Mailing Address 43 Waverly Place

City San Francisco State CA Zip Code 94108-2118

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

Name of Employer Bill Wong & Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt
11 / 09 / 2015

Transaction ID : 9863397

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Terry Singleton

Mailing Address 1773 Owasco Street

City Winter Springs State FL Zip Code 32708-5614

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

Name of Employer Sihle Insurance Group Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt
11 / 10 / 2015

Transaction ID : 9863403

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Heidi J. Sterner

Mailing Address 3402 Cinnamon Creek Ave

City N Las Vegas State NV Zip Code 89031-3520

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

Name of Employer Heidi Sterner Consulting Occupation Insurance Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
496.00

Date of Receipt
11 / 10 / 2015

Transaction ID : 9863404

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00

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 18 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Amy D. MUTTER

Mailing Address 15 South Jefferson Street

City	State	Zip Code
Roanoke	VA	24011-1303

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

Name of Employer	Occupation
Innovative Insurance Group	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2015

Transaction ID : 9863405

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Michael R. Stephens

Mailing Address 329 S Elm St
Suite 207

City	State	Zip Code
Jenks	OK	74037-3765

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

Name of Employer	Occupation
Tallgrass Benefits	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2015

Transaction ID : 9863411

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 208 N. Mill

City	State	Zip Code
Pryor	OK	74361-2422

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

Name of Employer	Occupation
Brown & Brown, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2015

Transaction ID : 9863510

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	322.00
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 19 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. John Thomas Scott

Mailing Address 11000 Milestone Drive

City Mechanicsville State VA Zip Code 23116-5846

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

Name of Employer: Experient Health-A-Farm Bureau Company Occupation: Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **11 / 12 / 2015**

Transaction ID : **9863634**

Amount of Each Receipt this Period: **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Steven T. Wisneski

Mailing Address 1050 W. Western Avenue Suite 315

City Muskegon State MI Zip Code 49441-1666

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

Name of Employer: Creative Benefit Systems, Inc. Occupation: Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **11 / 12 / 2015**

Transaction ID : **9863636**

Amount of Each Receipt this Period: **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. David S. Johnson

Mailing Address 1482 Baron Court

City Stone Mountain State GA Zip Code 30087-3037

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

Name of Employer: David S. Johnson Insurance Occupation: Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2875.00**

Date of Receipt: **11 / 12 / 2015**

Transaction ID : **9863637**

Amount of Each Receipt this Period: **250.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **310.00**

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 20 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Vickie Eileen Mayville

Mailing Address P O Box 232325

City Las Vegas State NV Zip Code 89105-2325

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

Name of Employer Mayville Incorporated Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **11 / 12 / 2015**

Transaction ID : 9863638

Amount of Each Receipt this Period **10.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Kevin W. Smith

Mailing Address 2000 RiverEdge Parkway Suite 1010

City Sandy Springs State GA Zip Code 30328-4657

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

Name of Employer KSA Insurance Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 13 / 2015**

Transaction ID : 9863927

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. Robert Gene Ramsay

Mailing Address 1836 Harrison Drive

City Gardendale State AL Zip Code 35071-3468

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

Name of Employer Your Benefits Advisor Occupation Benefits Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 13 / 2015**

Transaction ID : 9863930

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Mike R. Castleberry
Full Name (Last, First, Middle Initial)

Mailing Address 506 Holly St

City Little Rock State AR Zip Code 72205-3932

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

Name of Employer HealthSCOPE Benefits Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 13 / 2015
Transaction ID : 9863931

Amount of Each Receipt this Period 85.00

Memo Item

B. Charles E. Mayberry
Full Name (Last, First, Middle Initial)

Mailing Address 4323 Country View Dr.

City Floyds Knobs State IN Zip Code 47119-9312

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

Name of Employer C Mayberry Benefits LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 14 / 2015
Transaction ID : 9864001

Amount of Each Receipt this Period 30.00

Memo Item

C. John D. Susie
Full Name (Last, First, Middle Initial)

Mailing Address 470 Olde Worthington Rd Suite 250

City Westerville State OH Zip Code 43082-9175

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

Name of Employer Aflac Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 16 / 2015
Transaction ID : 9864013

Amount of Each Receipt this Period 15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 130.00

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 22 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Vicki Cox
Full Name (Last, First, Middle Initial)
Mailing Address 3415 Indian Lane
City Reno State NV Zip Code 89506-9752
FEC ID number of contributing federal political committee. **C**
Name of Employer Cox Insurance Services, LLC Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 270.00

Date of Receipt 11 / 17 / 2015
Transaction ID : 9864026
Amount of Each Receipt this Period 30.00
 Memo Item
monthly contribution

B. Jill L. Pedersen
Full Name (Last, First, Middle Initial)
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 Columbia Benefit Solutions, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 417.00

Date of Receipt 11 / 17 / 2015
Transaction ID : 9864027
Amount of Each Receipt this Period 42.00
 Memo Item

C. Steve Armstrong
Full Name (Last, First, Middle Initial)
Mailing Address 300 Concourse Suite 300
City Ridgeland State MS Zip Code 39157-2085
FEC ID number of contributing federal political committee. **C**
Name of Employer HUB International Gulf South Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 11 / 17 / 2015
Transaction ID : 9864028
Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 102.00
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 23 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address 1031 W 4th Ave., Ste 400

City Anchorage	State AK	Zip Code 99501-5905
-------------------	-------------	------------------------

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

Name of Employer Marsh & McLennan Agency LLC	Occupation Broker
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

Transaction ID : 9864030

Amount of Each Receipt this Period

30.00

 Memo Item

B. Amy Purcilly
Full Name (Last, First, Middle Initial)

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 Mason-McBride, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

Transaction ID : 9864031

Amount of Each Receipt this Period

30.00

 Memo Item

C. Laura Blomgren
Full Name (Last, First, Middle Initial)

Mailing Address 935 National Parkway
Suite 93550

City Schaumburg	State IL	Zip Code 60173-5150
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FEC ID number of contributing federal political committee. **C**

Name of Employer BenAxis Inc.	Occupation Broker
----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

Transaction ID : 9864033

Amount of Each Receipt this Period

30.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 24 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Marion B. Schremp
Full Name (Last, First, Middle Initial)

Mailing Address 3625 Cumberland Blvd SE
8th Floor

City Atlanta State GA Zip Code 30339-3361

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

Name of Employer CBIZ Benefits and Insurance Services, Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 17 / 2015
Transaction ID : 9864047

Amount of Each Receipt this Period 500.00

Memo Item

B. Daniel R. Tompkins
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1209

City Alpharetta State GA Zip Code 30009-1209

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

Name of Employer Admin America, Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 807.00

Date of Receipt 11 / 17 / 2015
Transaction ID : 9864060

Amount of Each Receipt this Period 85.00

Memo Item

C. Michael D. Lujan
Full Name (Last, First, Middle Initial)

Mailing Address 645 Harrison Street #200

City San Francisco State CA Zip Code 94107-3624

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

Name of Employer Limelight Health, Inc., Occupation Technology for Agents

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 11 / 17 / 2015
Transaction ID : 9864065

Amount of Each Receipt this Period 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 670.00

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 25 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Spencer A. Lehmann
Full Name (Last, First, Middle Initial)

Mailing Address 2145 E. Tahquitz Cnyn Wy.
Suite 4-506

City State Zip Code
Palm Springs CA 92262-7020

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

Name of Employer Occupation
Lehmann/Wood & Associates, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 18 / 2015

Transaction ID : 9864071

Amount of Each Receipt this Period
170.00

Memo Item

B. Mark Riley
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1635

City State Zip Code
Irmo SC 29063-1635

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

Name of Employer Occupation
American Benefit Services, LLC 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
11 / 18 / 2015

Transaction ID : 9864073

Amount of Each Receipt this Period
100.00

Memo Item

C. Robert Mark Fitzgerald
Full Name (Last, First, Middle Initial)

Mailing Address 2842 Landing Way

City State Zip Code
Marietta GA 30066-2362

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

Name of Employer Occupation
Robert Fitzgerald Insurance Agency, In Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1006.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 18 / 2015

Transaction ID : 9864075

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	355.00
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 26 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Terrie L. Trevino

Mailing Address P O Box 7408

City State Zip Code
Boise ID 83707-1408

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

Name of Employer Occupation
Blue Cross of Idaho Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2015

Transaction ID : **9864076**

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Dawn Barr

Mailing Address 1305 NE 29th St.

City State Zip Code
Ankeny IA 50021-6722

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

Name of Employer Occupation
Mercer Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
709.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2015

Transaction ID : **9864077**

Amount of Each Receipt this Period
63.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Barry Cogdill

Mailing Address 4710 4th Street Ste. 300

City State Zip Code
La Mesa CA 91941-5384

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

Name of Employer Occupation
Business Choice Insurance Services President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2015

Transaction ID : **9864079**

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Tiffany Stiller
Full Name (Last, First, Middle Initial)

Mailing Address 6200 Canoga Avenue
Suite 300

City Woodland Hills State CA Zip Code 91367-7778

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

Name of Employer BenefitMall Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 18 / 2015
Transaction ID : 9864080

Amount of Each Receipt this Period
25.00

Memo Item

B. Kimberley Molthen
Full Name (Last, First, Middle Initial)

Mailing Address 3975 Fair Ridge Drive
110-N

City Fairfax State VA Zip Code 22033-2911

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

Name of Employer BB&T Occupation Employee Benefits Consultant & Vice Pr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
11 / 18 / 2015
Transaction ID : 9864081

Amount of Each Receipt this Period
85.00

Memo Item

C. Alicia Ann Bishop
Full Name (Last, First, Middle Initial)

Mailing Address 9946 N. Sumter Creek Pl

City Tucson State AZ Zip Code 85742-8627

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

Name of Employer Bishop & Brown, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 18 / 2015
Transaction ID : 9864422

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	610.00
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 28 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. William M. Mulvaney
Full Name (Last, First, Middle Initial)

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 BenAxis, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
11 / 19 / 2015
Transaction ID : 9864821

Amount of Each Receipt this Period
25.00

Memo Item

B. Denise R. VanPutten
Full Name (Last, First, Middle Initial)

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 HUB International Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 19 / 2015
Transaction ID : 9864823

Amount of Each Receipt this Period
30.00

Memo Item

C. Malcolm Cutler
Full Name (Last, First, Middle Initial)

Mailing Address 15901 Hawthorne Blvd., Suite 200

City Lawndale State CA Zip Code 90260-2657

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

Name of Employer Cutler Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 19 / 2015
Transaction ID : 9865062

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	555.00
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 29 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Bruce D. BENTON
Full Name (Last, First, Middle Initial)

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 Genesis Financial & Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1866.00

Date of Receipt
11 / 19 / 2015
Transaction ID : 9865348

Amount of Each Receipt this Period
20.00

Memo Item

B. Douglas Skinner
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1277

City Bloomington State IN Zip Code 47402-1277

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

Name of Employer Hoosier Dental Plans Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 20 / 2015
Transaction ID : 9865571

Amount of Each Receipt this Period
30.00

Memo Item

c. Ingrid L. Martin
Full Name (Last, First, Middle Initial)

Mailing Address 3857 Grand Oak Drive

City Brunswick State OH Zip Code 44212-3594

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

Name of Employer Ameritas Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 20 / 2015
Transaction ID : 9866106

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 30 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Lisa Hughes
Full Name (Last, First, Middle Initial)

Mailing Address 32110 Agoura Road

City Westlake Village State CA Zip Code 91361-4026

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

Name of Employer Warner Pacific Insurance Services Occupation agent

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
 11 / 20 / 2015

Transaction ID : 9866554

Amount of Each Receipt this Period
 365.00

Memo Item

B. Kyle Miller
Full Name (Last, First, Middle Initial)

Mailing Address 9607 Scotsmoor Drive

City Caledonia State MI Zip Code 49316-7553

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

Name of Employer Strategic Employee Benefit Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2015

Transaction ID : 9866839

Amount of Each Receipt this Period
 30.00

Memo Item

C. Robert Hiram Goodman
Full Name (Last, First, Middle Initial)

Mailing Address 1901 6th Avenue North Suite 1720

City Birmingham State AL Zip Code 35203-2618

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

Name of Employer Regions Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2015

Transaction ID : 9866847

Amount of Each Receipt this Period
 30.00

Memo Item

Member Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00

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 31 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Debra Beaucoudray

Mailing Address 5515 Superior Dr. Suite A-1

City Baton Rouge State LA Zip Code 70816-8051

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

Name of Employer Beaucoudray Medica Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 22 / 2015**

Transaction ID : 9866848

Amount of Each Receipt this Period **42.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Lori Bergsma

Mailing Address Balanced Rock Insurance
643 Canyon Drive

City Twin Falls State ID Zip Code 83301-3014

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

Name of Employer Balanced Rock Insurance Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 22 / 2015**

Transaction ID : 9866849

Amount of Each Receipt this Period **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. Daniel J. Boaz

Mailing Address 5565 Roberts Drive
Suite 100

City Atlanta State GA Zip Code 30338-3350

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

Name of Employer HealthLife Group, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 22 / 2015**

Transaction ID : 9866850

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
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 32 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James C. Bosier
Full Name (Last, First, Middle Initial)

Mailing Address 602 Main Street

City Cedar Falls State IA Zip Code 50613-2949

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

Name of Employer The Accel Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt
 11 / 22 / 2015
Transaction ID : 9866851

Amount of Each Receipt this Period
 85.00

Memo Item

B. William J. Brannon
Full Name (Last, First, Middle Initial)

Mailing Address 2 Terrace Way, Suite B

City Greensboro State NC Zip Code 27403-3663

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

Name of Employer Group US, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 11 / 22 / 2015
Transaction ID : 9866853

Amount of Each Receipt this Period
 30.00

Memo Item

C. William V. Cable
Full Name (Last, First, Middle Initial)

Mailing Address 1770 Independence Court

City Vestavia State AL Zip Code 35216-1259

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

Name of Employer Alternative Insurance Resources Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 11 / 22 / 2015
Transaction ID : 9866857

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 33 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David A. Cagliola
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 Liberty Ridge Drive
 Suite 250
 City Chesterbrook State PA Zip Code 19087-5567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radnor Benefits Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **935.00**

Date of Receipt **11 / 22 / 2015**
Transaction ID : 9866858
 Amount of Each Receipt this Period **85.00**
 Memo Item

B. Richard P. Coburn
 Full Name (Last, First, Middle Initial)
 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 The Word and Brown Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **505.00**

Date of Receipt **11 / 22 / 2015**
Transaction ID : 9866860
 Amount of Each Receipt this Period **30.00**
 Memo Item

C. Craig Thomas Currier
 Full Name (Last, First, Middle Initial)
 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 Aon Risk Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **404.15**

Date of Receipt **11 / 22 / 2015**
Transaction ID : 9866861
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	165.00
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 34 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kathleen A Dibble
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 Calle Compo
 City Thousand Oaks State CA Zip Code 91360-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aetna Occupation 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
 11 / 22 / 2015
Transaction ID : 9866864
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Wesley Foster
 Full Name (Last, First, Middle Initial)
 Mailing Address 411 Copper Circle
 City Lantana State TX Zip Code 76226-7333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BenefitMall Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2015
Transaction ID : 9866867
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Bruce Frizen
 Full Name (Last, First, Middle Initial)
 Mailing Address 8058 Corporate Center Dr. Suite 200
 City Charlotte State NC Zip Code 28226-4359
 FEC ID number of contributing federal political committee. **C**
 Name of Employer L.E. Goodgame & Associates Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2015
Transaction ID : 9866868
 Amount of Each Receipt this Period
 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 35 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Joan A. Fusco
Full Name (Last, First, Middle Initial)

Mailing Address 25B Hanover Rd., Suite 220

City Florham Park State NJ Zip Code 07932-1443

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

Name of Employer Savoy Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2015

Transaction ID : 9866869

Amount of Each Receipt this Period
 50.00

Memo Item

B. Richard R. Girdler
Full Name (Last, First, Middle Initial)

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 Cowan, a Division of HUB International Occupation 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
 11 / 22 / 2015

Transaction ID : 9866870

Amount of Each Receipt this Period
 100.00

Memo Item

C. Don R. Griffey
Full Name (Last, First, Middle Initial)

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 Hailey-Campbell, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2015

Transaction ID : 9866871

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 36 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Peter L. Gualtieri
Full Name (Last, First, Middle Initial)

Mailing Address Savoy Associates
1600 JFK Boulevard, Suite 1220

City Philadelphia State PA Zip Code 19103-2810

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

Name of Employer Savoy Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866872

Amount of Each Receipt this Period
10.00

Memo Item

B. Joseph Lee Hannah
Full Name (Last, First, Middle Initial)

Mailing Address 9414 Indianfield Drive

City Mechanicsville State VA Zip Code 23116-5808

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

Name of Employer CIGNA Healthcare Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866873

Amount of Each Receipt this Period
20.00

Memo Item

C. Larry S. Harrison
Full Name (Last, First, Middle Initial)

Mailing Address 139 E. Warm Spring Rd, Suite 108

City Las Vegas State NV Zip Code 89119-4101

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

Name of Employer National Healthcare Access Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
334.62

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866874

Amount of Each Receipt this Period
30.42

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.42
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 37 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas L. Henry

Mailing Address 19310 Sonoma Highway, #A

City Sonoma State CA Zip Code 95476-5454

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

Name of Employer RealCare Insurance Marketing, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **935.00**

Date of Receipt **11 / 22 / 2015**

Transaction ID : 9866875

Amount of Each Receipt this Period **85.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Noel Hinman

Mailing Address 25 West 80th Place#280
PO Box 10070

City Merrillville State IN Zip Code 46410-5445

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

Name of Employer Professional Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 22 / 2015**

Transaction ID : 9866876

Amount of Each Receipt this Period **20.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. Deborah Jeffs

Mailing Address 3419 Via Lido #306

City Newport Beach State CA Zip Code 92663-3908

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

Name of Employer Progressive Benefit Managers Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 22 / 2015**

Transaction ID : 9866877

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Mark Kolterman
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 426
341 North 6th Street

City Seward State NE Zip Code 68434-0426

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

Name of Employer Kolterman Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866878

Amount of Each Receipt this Period
35.00

Memo Item

B. Robert Lindsay
Full Name (Last, First, Middle Initial)

Mailing Address 220 Emerson Place

City Davenport State IA Zip Code 52801-1624

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

Name of Employer Arthur J. Gallagher & Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866881

Amount of Each Receipt this Period
85.00

Memo Item

C. Betty J. Lindstrom
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4026

City Felton State CA Zip Code 95018-0349

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

Name of Employer Lindstrom Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866882

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 39 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Donald L. Mathern
Full Name (Last, First, Middle Initial)

Mailing Address 7650 Cherrywood Drive

City Boise State ID Zip Code 83704-3541

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

Name of Employer Insurance Specialists Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866886

Amount of Each Receipt this Period 30.00

Memo Item

B. Lynn E McCarter
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 710571

City Santee State CA Zip Code 92072-0571

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

Name of Employer Self-Employed Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866888

Amount of Each Receipt this Period 20.00

Memo Item

C. Glendae Tuthill
Full Name (Last, First, Middle Initial)

Mailing Address 736 Old Greenville Rd

City Fayetteville State GA Zip Code 30215-5935

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

Name of Employer Benevestco, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866889

Amount of Each Receipt this Period 25.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Ross W. Pendergraft
Full Name (Last, First, Middle Initial)

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 Leavitt Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
977.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866893

Amount of Each Receipt this Period
85.00

Memo Item

B. Joseph E. Pittman
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 24133

City Omaha State NE Zip Code 68124-0133

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

Name of Employer Creative Association Management Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866894

Amount of Each Receipt this Period
35.00

Memo Item

C. Jeff A. Ranf
Full Name (Last, First, Middle Initial)

Mailing Address 3800 Centerpoint Drive
Suite 540

City Anchorage State AK Zip Code 99503-5826

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

Name of Employer USI Insurance Services, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.00

Date of Receipt
11 / 22 / 2015
Transaction ID : 9866895

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 162.00

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 41 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Donna M. Rudner
Full Name (Last, First, Middle Initial)

Mailing Address 4665 Ivygate Circle SE

City Atlanta State GA Zip Code 30339-1332

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

Name of Employer Employer Relief, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866897

Amount of Each Receipt this Period 30.00

Memo Item

B. Raymer M. Sale
Full Name (Last, First, Middle Initial)

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 E2E Benefits Services, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866898

Amount of Each Receipt this Period 170.00

Memo Item

C. Ronald E. Seibel
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 317

City Driftwood State TX Zip Code 78619-0317

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

Name of Employer Advanced Benefits Solutions Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866899

Amount of Each Receipt this Period 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 42 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Daniel Severo
 Full Name (Last, First, Middle Initial)
 Mailing Address 231 Chestnut St. #410
 City Meadville State PA Zip Code 16335-3458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The DJB Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866900
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Trei Wild
 Full Name (Last, First, Middle Initial)
 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 Protect Plans Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866901
 Amount of Each Receipt this Period 85.00
 Memo Item

C. DianaLou Wolff
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Maiden Lane 2nd Floor
 City Kingston State NY Zip Code 12401-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Counseling Associates Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 22 / 2015
Transaction ID : 9866902
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 43 OF 178
(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

A. Randy H. Klein
 Full Name (Last, First, Middle Initial)
 Mailing Address 3555 Reserve Commons Dr
 City State Zip Code
 Medina OH 44256-5900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DS Benefits Group Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2015
Transaction ID : 9866903
 Amount of Each Receipt this Period
 30.00
 Memo Item

B. Thomas R. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 Lamar
 City State Zip Code
 Wichita Falls TX 76301-6824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Boley Featherston Insurance Agency Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 945.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9866905
 Amount of Each Receipt this Period
 55.00
 Memo Item

C. Ronald David Knight
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 507
 City State Zip Code
 Carrollton GA 30112-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 J. Smith Lanier & Co., Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9866906
 Amount of Each Receipt this Period
 85.00
 Memo Item
 Monthly Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 44 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Eric Kohlsdorf
Full Name (Last, First, Middle Initial)

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 Prisma Strategies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1361.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866907

Amount of Each Receipt this Period
85.00

Memo Item

B. Paul McLeod
Full Name (Last, First, Middle Initial)

Mailing Address 2801 Slater Rd Suite 200

City Morrisville State NC Zip Code 27560-8477

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

Name of Employer Coventry/Aetna Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866909

Amount of Each Receipt this Period
30.00

Memo Item

C. Keith Wallace
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Broadway

City Bellingham State WA Zip Code 98225-3036

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

Name of Employer Wallace-Rice Benefits, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866910

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 45 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. G. Wayne Pettigrew
Full Name (Last, First, Middle Initial)

Mailing Address 3325 French Park Drive, Suite One

City	State	Zip Code
Edmond	OK	73034-7265

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

Name of Employer	Occupation
Vanguard Benefits Group, LLC	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

Transaction ID : 9866911

Amount of Each Receipt this Period
85.00

Memo Item

Monthly Contribution

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

Mailing Address 1512 Highway 138

City	State	Zip Code
Wall	NJ	07719-3706

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

Name of Employer	Occupation
HUB International	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
372.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

Transaction ID : 9866912

Amount of Each Receipt this Period
30.00

Memo Item

C. Jo L. Middleton
Full Name (Last, First, Middle Initial)

Mailing Address 9525 Katy Freeway, Suite 125

City	State	Zip Code
Houston	TX	77024-1430

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

Name of Employer	Occupation
TradeMark Insurance Agency LLC	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

Transaction ID : 9866914

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
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 46 OF 178
(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 (Last, First, Middle Initial)
A. Steven Selinsky

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 Health Alliance Plan Occupation Director of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.00**

Date of Receipt
11 / 23 / 2015

Transaction ID : 9866915

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Carey H. Brown

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 The Benefit Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt
11 / 23 / 2015

Transaction ID : 9866916

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. William D. Robinson

Mailing Address 739 East Jackson Street

City Martinsville State IN Zip Code 46151-2033

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

Name of Employer NewDay! Marketing Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **463.00**

Date of Receipt
11 / 23 / 2015

Transaction ID : 9866917

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **134.00**

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 47 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jean M. Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 15433 E 480 Rd
 City Claremore State OK Zip Code 74017-1826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rogers Benefit Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : 9866918
 Amount of Each Receipt this Period 30.00
 Memo Item

B. David R. Gwin
 Full Name (Last, First, Middle Initial)
 Mailing Address I-20 At Alpine Rd. AX-400
 City Columbia State SC Zip Code 29219-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BlueChoice HealthPlan Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 806.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : 9866923
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Mark K. Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 St. Julian Place
 City Columbia State SC Zip Code 29204-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Management Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : 9866924
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 48 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Catherine M. Antonie

Mailing Address P.O. Box 510925

City State Zip Code
New Berlin WI 53151-0925

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

Name of Employer Occupation
Planned Futures LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866927

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Lynn Atkinson

Mailing Address 3800 Electric Road, # 406

City State Zip Code
Roanoke VA 24018-4568

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

Name of Employer Occupation
Humana Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
372.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866929

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. John Baskett

Mailing Address 2601C Blanding Ave #222

City State Zip Code
Alameda CA 94501-1507

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

Name of Employer Occupation
John Baskett Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866932

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 49 OF 178
(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 (Last, First, Middle Initial)
A. Stephanie Berger

Mailing Address 79 Daily Dr. #276

City Camarillo State CA Zip Code 93010-5807

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

Name of Employer Occupation
HLS Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9866937

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Bradford H. Blain

Mailing Address AI Torstrick Insurance Agency, Inc
343 Waller Av

City Lexington State KY Zip Code 40504-2912

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

Name of Employer Occupation
AI Torstrick Insurance Agency, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9866941

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Deborah R. Boop

Mailing Address 8046 Richard Rd.

City Broadview Heights State OH Zip Code 44147-1241

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

Name of Employer Occupation
Kaczmarek Insurance Services 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
 11 / 23 / 2015

Transaction ID : 9866942

Amount of Each Receipt this Period
 20.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 50 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jodie E. Braner
Full Name (Last, First, Middle Initial)

Mailing Address 5 Concourse Parkway
18th Floor

City Atlanta State GA Zip Code 30328-5350

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

Name of Employer Willis Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866943

Amount of Each Receipt this Period
30.00

Memo Item

B. Sydney K. Briley
Full Name (Last, First, Middle Initial)

Mailing Address 605 E. Van Buren St.

City Broken Arrow State OK Zip Code 74011-7261

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

Name of Employer Employee Benefit Solutions, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866944

Amount of Each Receipt this Period
30.00

Memo Item

C. Mark Brooks
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 10876

City Lynchburg State VA Zip Code 24506-0876

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

Name of Employer Personal Design Financial Services, In Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866945

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 51 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Raymond F. Buza
Full Name (Last, First, Middle Initial)

Mailing Address 214 East Lakewood Road

City West Palm Beach	State FL	Zip Code 33405-3316
-------------------------	-------------	------------------------

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

Name of Employer Palm Beach Insurance Advisory Group, I	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866950

Amount of Each Receipt this Period
30.00

Memo Item

B. Loretta L. Camp
Full Name (Last, First, Middle Initial)

Mailing Address 10101 Reunion Place, Ste 300

City San Antonio	State TX	Zip Code 78216-4157
---------------------	-------------	------------------------

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

Name of Employer Davidson Camp Insurance Services	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866951

Amount of Each Receipt this Period
30.00

Memo Item

C. Bob Copeland
Full Name (Last, First, Middle Initial)

Mailing Address 700 Larkspur Landing Circle, Suite

City Larkspur	State CA	Zip Code 94939-1755
------------------	-------------	------------------------

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

Name of Employer Copeland Insurance Services	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866955

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 52 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Claudia S. Robertson

Mailing Address 2108 W Laburnum Ave., # 300

City	State	Zip Code
Richmond	VA	23227-4300

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

Name of Employer	Occupation
BB&T Insurance Services	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

Transaction ID : 9866959

Amount of Each Receipt this Period

30.00

 Memo Item

Full Name (Last, First, Middle Initial)
B. David H. Eblen

Mailing Address 112 South Liberty, # 221

City	State	Zip Code
Jackson	TN	38301-6367

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

Name of Employer	Occupation
The Eblen Agency/A Divison of IPSEO	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

Transaction ID : 9866961

Amount of Each Receipt this Period

30.00

 Memo Item

Full Name (Last, First, Middle Initial)
C. Gregory Engle

Mailing Address 1151 Red Mile Road

City	State	Zip Code
Lexington	KY	40504-2649

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

Name of Employer	Occupation
Benefit Insurance Marketing	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

Transaction ID : 9866962

Amount of Each Receipt this Period

42.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
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 53 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Albert Fogle
Full Name (Last, First, Middle Initial)

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 Northrim Benefits Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
451.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9866970

Amount of Each Receipt this Period
 30.00

Memo Item

B. Jeffrey Wm. Gennaro
Full Name (Last, First, Middle Initial)

Mailing Address 3820 W Happy Valley Rd Ste 141, PMB 606

City Glendale State AZ Zip Code 85310-3292

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

Name of Employer Capitol Insurance Brokers, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9866973

Amount of Each Receipt this Period
 85.00

Memo Item

C. Ryan P. Gordon
Full Name (Last, First, Middle Initial)

Mailing Address 1813 Sweetbay Dr Ste 10

City Salisbury State MD Zip Code 21804-1663

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

Name of Employer WorkforceTactix, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9866976

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 54 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Beverly Gossage
 Full Name (Last, First, Middle Initial)
 Mailing Address 9325 Evening Star Terr
 City Eudora State KS Zip Code 66025-8334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HSA Benefits Consulting Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **462.00**

Date of Receipt **11 / 23 / 2015**
Transaction ID : 9866977
 Amount of Each Receipt this Period **42.00**
 Memo Item

B. Patricia A. Griffey
 Full Name (Last, First, Middle Initial)
 Mailing Address 17535 Generations Dr
 City South Bend State IN Zip Code 46635-1589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Healy Group Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1267.00**

Date of Receipt **11 / 23 / 2015**
Transaction ID : 9866978
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. Daniel R Hart
 Full Name (Last, First, Middle Initial)
 Mailing Address 2237 E. 32nd Street
 City Tulsa State OK Zip Code 74105-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 23 / 2015**
Transaction ID : 9866980
 Amount of Each Receipt this Period **30.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	172.00
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 55 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Hedy S. Hebert
Full Name (Last, First, Middle Initial)

Mailing Address 550 Boardwalk Blvd.

City Bossier City State LA Zip Code 71111-4384

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

Name of Employer Benefit Consulting Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **890.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9866981

Amount of Each Receipt this Period
85.00

Memo Item

B. John S. Helms
Full Name (Last, First, Middle Initial)

Mailing Address 2940 Camino Diablo # 205

City Walnut Creek State CA Zip Code 94597-3992

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

Name of Employer John Helms Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9866983

Amount of Each Receipt this Period
30.00

Memo Item

C. Donna D. Hill
Full Name (Last, First, Middle Initial)

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 E2E Benefit Services Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **483.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9866985

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	157.00
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 56 OF 178
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Crystal Hoffman

Mailing Address P.O. Box 709

City State Zip Code
Sugar Land TX 77487-0709

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

Name of Employer Occupation
Benefit Concepts, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
516.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866986

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Al Hombroek

Mailing Address 30 Lumpkin St, Suite D

City State Zip Code
Lawrenceville GA 30046-8410

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

Name of Employer Occupation
Multiple Benefits Corporation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866988

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Michelle S. Howard

Mailing Address 2850 West Grand Boulevard

City State Zip Code
Detroit MI 48202-2643

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

Name of Employer Occupation
Health Alliance Plan Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1281.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9866990

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 57 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Karen K. Irwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 S Main St
 City Swanton State OH Zip Code 43558-1345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9866991
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Alan L. Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 3420 Pump Road, #144
 City Richmond State VA Zip Code 23233-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9866992
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Charles Jurkus
 Full Name (Last, First, Middle Initial)
 Mailing Address 823 Commerce Drive, Suite 350
 City Oak Brook State IL Zip Code 60523-8855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9866994
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
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 58 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Carolyn J. King

Mailing Address 6 Country Lane

City State Zip Code
Sussex NJ 07461-4630

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

Name of Employer Occupation
Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9866996

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Stacey S. LaFay

Mailing Address 2444 East Hill Rd.

City State Zip Code
Grand Blanc MI 48439-5098

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

Name of Employer Occupation
Franklin Benefit Solutions Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
478.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9866997

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Michael Ledgerwood

Mailing Address 12022 Forest Moon Dr

City State Zip Code
Cypress TX 77433-3834

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

Name of Employer Occupation
Humana Market Point Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9867002

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	110.00
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 59 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Maurice Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 301 Madison Avenue, 4th Floor

City	State	Zip Code
New York	NY	10017-8103

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

Name of Employer	Occupation
The Medical Link, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867004

Amount of Each Receipt this Period
 250.00

Memo Item

B. Kelly A. Madison
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 370

City	State	Zip Code
Meridian	ID	83680-0370

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

Name of Employer	Occupation
Myriad Benefits	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867006

Amount of Each Receipt this Period
 30.00

Memo Item

C. Barbara A. McClaskey
Full Name (Last, First, Middle Initial)

Mailing Address 1965 Pine Street

City	State	Zip Code
Redding	CA	96001-1921

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

Name of Employer	Occupation
Barbara McClaskey Insurance Services	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867008

Amount of Each Receipt this Period
 42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	322.00
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 60 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Leslie E. McGerr
 Full Name (Last, First, Middle Initial)
 Mailing Address 6510 Mesaverde Dr
 City Lincoln State NE Zip Code 68510-5153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Les McGerr & Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9867010
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Toby MEASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 S. Polk Suite 600
 City Amarillo State TX Zip Code 79101-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DFB Insurance Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9867011
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Griffin Meredith
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 S 5th St Unit 303
 City Louisville State KY Zip Code 40202-4309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Insurance Partners Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9867012
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James Ming
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 621

City Union State MO Zip Code 63084-0621

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

Name of Employer Ming Senior Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **695.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9867017

Amount of Each Receipt this Period
30.00

Memo Item

B. William H. Pennington
Full Name (Last, First, Middle Initial)

Mailing Address 4640 Woodbridge Drive

City Kernersville State NC Zip Code 27284-8850

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

Name of Employer Pennington Associates Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9867023

Amount of Each Receipt this Period
40.00

Memo Item

C. Jeff Pery
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 51019

City Idaho Falls State ID Zip Code 83405-1019

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

Name of Employer The Hartwell Corporation Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9867025

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

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 62 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Susan Maley Rash
Full Name (Last, First, Middle Initial)

Mailing Address 2108 West Laburnum Avenue, Suite 3

City	State	Zip Code
Richmond	VA	23227-4300

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

Name of Employer	Occupation
BB&T Benefit Consultants of Virginia,	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1670.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : 9867028

Amount of Each Receipt this Period
 120.00

Memo Item

B. Valerie Reeves
Full Name (Last, First, Middle Initial)

Mailing Address 3702 Brownsboro Rd

City	State	Zip Code
Louisville	KY	40207-1820

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

Name of Employer	Occupation
Preferred Benefits, LLC	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : 9867030

Amount of Each Receipt this Period
 42.00

Memo Item

C. Russell Lee Rice
Full Name (Last, First, Middle Initial)

Mailing Address 8000 IH-10 West, # 715

City	State	Zip Code
San Antonio	TX	78230-3880

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

Name of Employer	Occupation
AVESIS, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
956.00

Date of Receipt
 11 / 23 / 2015
Transaction ID : 9867032

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	247.00
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 63 OF 178
(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 (Last, First, Middle Initial)
A. Michael P. Ripley

Mailing Address 200 East Main St.
Suite 800

City Fort Wayne State IN Zip Code 46802-1900

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

Name of Employer Gibson Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867033

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Michael A. Rivera

Mailing Address 12200 Northwest Frwy, Suite 662

City Houston State TX Zip Code 77092-4927

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

Name of Employer Northwest General Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867034

Amount of Each Receipt this Period
 85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Kenneth N Scopp

Mailing Address 12121 Wilshire Blvd Ste 1100

City Los Angeles State CA Zip Code 90025-1166

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

Name of Employer First Financial Resources Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867041

Amount of Each Receipt this Period
 25.00

Memo Item

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

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 64 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Nicole Scott
Full Name (Last, First, Middle Initial)

Mailing Address 6200 Northwest Pkwy

City San Antonio State TX Zip Code 78249-3348

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

Name of Employer United Healthcare Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9867042

Amount of Each Receipt this Period
 30.00

Memo Item

B. Kevin Shively
Full Name (Last, First, Middle Initial)

Mailing Address 3800 Paluxy Dr Ste 540

City Tyler State TX Zip Code 75703-1664

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

Name of Employer Blue Cross Blue Shield Occupation Carrier Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9867043

Amount of Each Receipt this Period
 30.00

Memo Item

C. Sean G. Shoemake
Full Name (Last, First, Middle Initial)

Mailing Address 169A Lameuse St

City Biloxi State MS Zip Code 39530-3810

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

Name of Employer Employee Benefit Specialists, P.A. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : 9867044

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 66 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Anne P. Sperling

Mailing Address 805 St. Michael's Drive

City State Zip Code
Santa Fe NM 87505-7625

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

Name of Employer Occupation
Daniels Insurance Agency, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9867049

Amount of Each Receipt this Period
60.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Dustin Stacy

Mailing Address 1151 Red Mile Road

City State Zip Code
Lexington KY 40504-2649

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

Name of Employer Occupation
Benefit Insurance Marketing Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : 9867050

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
c. Mary Stephens

Mailing Address 2133 Luray Avenue

City State Zip Code
Cincinnati OH 45206-2604

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

Name of Employer Occupation
Alliance Benefit Group of Ohio 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
11 / 23 / 2015

Transaction ID : 9867052

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 67 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Julia Beckie Stockstill
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 E. San Augustine
 City State Zip Code
 Deer Park TX 77536-4160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Stockstill & Associates Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 372.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867053
 Amount of Each Receipt this Period
 30.00
 Memo Item

B. Marsha Tellesbo-Kembel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 4th Avenue, Suite 3200
 City State Zip Code
 Seattle WA 98154-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tellesbo & Company Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1602.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867058
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Helen M. Todd
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 56166
 City State Zip Code
 Little Rock AR 72215-6166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Todd Agency, Inc. 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
 11 / 23 / 2015
Transaction ID : 9867060
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 68 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Ward

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: Emerging Benefits Consultants, LLC
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9867063

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. John L. Warwick

Mailing Address 1907 B Mangrove Ave.

City Chico State CA Zip Code 95926-2381

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

Name of Employer: John Warwick Insurance Services
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9867064

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mitchell West

Mailing Address Health Choice One, Attn: Mitch Wes
6436 S Racine Cir

City Centennial State CO Zip Code 80111-6479

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

Name of Employer: MW Family Services
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 23 / 2015
Transaction ID : 9867065

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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 69 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Chris Otto Wickizer
 Full Name (Last, First, Middle Initial)
 Mailing Address 16619 74th Ave NE
 City Kenmore State WA Zip Code 98028-4261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chris Wickizer Insurance Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 23 / 2015**
Transaction ID : 9867067
 Amount of Each Receipt this Period **30.00**
 Memo Item

B. Steven L. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1151 Red Mile Road
 City Lexington State KY Zip Code 40504-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Insurance Marketing Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **935.00**

Date of Receipt **11 / 23 / 2015**
Transaction ID : 9867068
 Amount of Each Receipt this Period **85.00**
 Memo Item

C. Owen W. Wingate
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 Professional Dr
 City Ponte Vedra Beach State FL Zip Code 32082-6217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wingate Insurance Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **462.00**

Date of Receipt **11 / 23 / 2015**
Transaction ID : 9867069
 Amount of Each Receipt this Period **42.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	157.00
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 70 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Rosanne Wolfe
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 17236

City Tucson State AZ Zip Code 85731-7236

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

Name of Employer Wolfe Insurance & Consultants, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **626.00**

Date of Receipt **11 / 23 / 2015**

Transaction ID : 9867070

Amount of Each Receipt this Period **30.00**

Memo Item

B. Dennis E. Wright
Full Name (Last, First, Middle Initial)

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 Employee Plans, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **935.00**

Date of Receipt **11 / 23 / 2015**

Transaction ID : 9867072

Amount of Each Receipt this Period **85.00**

Memo Item

C. Ashley Wynkoop Kapostins
Full Name (Last, First, Middle Initial)

Mailing Address 255 Primera Blvd, Suite 264

City Lake Mary State FL Zip Code 32746-2148

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

Name of Employer CIGNA Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 23 / 2015**

Transaction ID : 9867073

Amount of Each Receipt this Period **42.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **157.00**

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 71 OF 178
(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 (Last, First, Middle Initial)
A. Julia T. Moore

Mailing Address 9208 Clinton Anderson Drive NW

City State Zip Code
Albuquerque NM 87114-5317

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

Name of Employer Occupation
J. Moore Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867076

Amount of Each Receipt this Period
 10.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Matthew Graves

Mailing Address 4808 Broadmoor SE

City State Zip Code
Grand Rapids MI 49512-5306

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

Name of Employer Occupation
Lighthouse Insurance Group Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867077

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Charles L. Westmoreland

Mailing Address 532 Cloifview Drive

City State Zip Code
Brandon MS 39047-9183

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

Name of Employer Occupation
Allstate Benefits Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : 9867080

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 72 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David C. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 915 Englewood Avenue

City Durham State NC Zip Code 27701-1105

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

Name of Employer Ebenconcepts Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1296.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9867081

Amount of Each Receipt this Period 170.00

Memo Item

B. John R. McConnaughey
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 805

City West Chester State OH Zip Code 45071-0805

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

Name of Employer JRM & Associates Agency, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9867085

Amount of Each Receipt this Period 42.00

Memo Item

C. Carolyn L. Goodwin
Full Name (Last, First, Middle Initial)

Mailing Address 12740 Hillcrest Road Suite 275

City Dallas State TX Zip Code 75230-7129

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

Name of Employer Goodwin Benefits Group, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 23 / 2015
Transaction ID : 9867096

Amount of Each Receipt this Period 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 242.00

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 73 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Karla Torres

Mailing Address PO Box 61010

City State Zip Code
Santa Barbara CA 93160-1010

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

Name of Employer Occupation
Brown & Brown, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
11 / 24 / 2015
Transaction ID : 9867145

Amount of Each Receipt this Period
42.00

Memo Item

Contribution

Full Name (Last, First, Middle Initial)
B. Erica R. Hain

Mailing Address 1995 Point Township Drive

City State Zip Code
Northumberland PA 17857-8856

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

Name of Employer Occupation
Keystone Insurers Group, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 24 / 2015
Transaction ID : 9867146

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
c. Christine M. Bogott

Mailing Address 125 Grand Avenue, Unit B

City State Zip Code
Grand Junction CO 81501-2251

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

Name of Employer Occupation
MHIB Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 24 / 2015
Transaction ID : 9867148

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 172.00

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 74 OF 178
(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

A. Carolyn Beck
 Full Name (Last, First, Middle Initial)
 Mailing Address 7321 Eagle Crest Blvd.
 City State Zip Code
 Evansville IN 47715-8157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SIHO Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 483.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 9867152
 Amount of Each Receipt this Period
 42.00
 Memo Item

B. Brett Michelle Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 6398
 City State Zip Code
 Charleston WV 25362-0398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Black Horse Financial Advisors Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2015
Transaction ID : 9867153
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Philip W. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 935 Moraga Road
 Suite 240
 City State Zip Code
 Lafayette CA 94549-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BLIS Corp. dba Lee Health Insurance Se President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 517.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2015
Transaction ID : 9867168
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00
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 75 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Erika Sklar
Full Name (Last, First, Middle Initial)

Mailing Address 1415 Walton Blvd

City Rochester Hills State MI Zip Code 48309-1775

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

Name of Employer Tim Crawford Insurance Agency, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **616.00**

Date of Receipt **11 / 25 / 2015**

Transaction ID : 9867169

Amount of Each Receipt this Period **42.00**

Memo Item

B. Jason Gootee
Full Name (Last, First, Middle Initial)

Mailing Address 510 L Street Suite 270

City Anchorage State AK Zip Code 99501-1949

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

Name of Employer Moda Health Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 25 / 2015**

Transaction ID : 9867170

Amount of Each Receipt this Period **30.00**

Memo Item

C. Cynthia Whaley
Full Name (Last, First, Middle Initial)

Mailing Address 408 N. Washington Street Suite A

City Easton State MD Zip Code 21601-3704

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

Name of Employer Avery Hall Benefit Solutions, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 25 / 2015**

Transaction ID : 9867171

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **102.00**

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 76 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David R. Kross
 Full Name (Last, First, Middle Initial)
 Mailing Address 5556-B Cheviot Rd.
 City Cincinnati State OH Zip Code 45247-5202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Benefits Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 25 / 2015
Transaction ID : 9867172
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Joni Robin Reents
 Full Name (Last, First, Middle Initial)
 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 Reents Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 11 / 25 / 2015
Transaction ID : 9867198
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Karen T. Kane
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 20185
 City Portland State OR Zip Code 97294-0185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Solutions NW, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 26 / 2015
Transaction ID : 9867199
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
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 77 OF 178
(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 (Last, First, Middle Initial)
A. Gene Ruecker
 Mailing Address 7700 East Doheny Court
 Suite 200
 City Anaheim State CA Zip Code 92808-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ruecker & Ruecker Insurance Occupation 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
 11 / 26 / 2015
Transaction ID : 9867200
 Amount of Each Receipt this Period
 25.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. Lori Carter
 Mailing Address 2316 Atherholt Rd
 City Lynchburg State VA Zip Code 24501-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Piedmont Community Heath Plan, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2015
Transaction ID : 9867201
 Amount of Each Receipt this Period
 42.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Matthew F. Hatfield
 Mailing Address 2207 Springfield Avenue
 City Fort Wayne State IN Zip Code 46805-1541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer M Hatfield Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2015
Transaction ID : 9867202
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 117.00
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 78 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John H. Hinck
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 McLaws Circle, Ste2
 City Williamsburg State VA Zip Code 23185-5871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hinck Financial Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 11 / 26 / 2015
Transaction ID : 9867203
 Amount of Each Receipt this Period
 30.00
 Memo Item

B. Michael S. Reddy
 Full Name (Last, First, Middle Initial)
 Mailing Address 13800 Jackson Road
 City Mishawaka State IN Zip Code 46544-9195
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Keystone Insurers Group Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 850.00

Date of Receipt
 11 / 27 / 2015
Transaction ID : 9867207
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Neil R. Crosby
 Full Name (Last, First, Middle Initial)
 Mailing Address 32110 Agoura Road
 City Westlake Village State CA Zip Code 91361-4026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Warner Pacific Insurance Services Director of Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 875.00

Date of Receipt
 11 / 27 / 2015
Transaction ID : 9867209
 Amount of Each Receipt this Period
 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 79 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Margaret Evelyn Stedt
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 74325

City San Clemente State CA Zip Code 92673-0145

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

Name of Employer Stedt Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **871.00**

Date of Receipt **11 / 27 / 2015**

Transaction ID : 9867210

Amount of Each Receipt this Period **85.00**

Memo Item

B. Fred Cartier
Full Name (Last, First, Middle Initial)

Mailing Address 11555 Sorrento Valley Road Suite 203

City San Diego State CA Zip Code 92121-1331

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

Name of Employer Rogers Benefit Group, Inc. Occupation Employee Benefits Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **441.00**

Date of Receipt **11 / 27 / 2015**

Transaction ID : 9867214

Amount of Each Receipt this Period **42.00**

Memo Item

C. Charles E. Underhill
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 626

City Woodland Hills State CA Zip Code 91365-0626

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

Name of Employer Underhill Insurance Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt **11 / 27 / 2015**

Transaction ID : 9867222

Amount of Each Receipt this Period **85.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **212.00**

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 80 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address 3950 Chain Bridge Road
Suite 8

City State Zip Code
Fairfax VA 22030-3935

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

Name of Employer Occupation
Blue Kamen Benefits, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2015

Transaction ID : 9867225

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Justin Lord

Mailing Address 935 East 36th Place

City State Zip Code
Tulsa OK 74105-3001

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

Name of Employer Occupation
Wilcox & McGrath, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2015

Transaction ID : 9867226

Amount of Each Receipt this Period
10.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Annette Bechtold

Mailing Address 400 Galleria Pkwy, #300

City State Zip Code
Atlanta GA 30339-3182

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

Name of Employer Occupation
Digital Insurance, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2015

Transaction ID : 9867229

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 81 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Russell B. Childers

Mailing Address PO Box 1547

City State Zip Code
Americus GA 31709-1547

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

Name of Employer Occupation
Russ Childers, CLU Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1115.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2015

Transaction ID : 9867231

Amount of Each Receipt this Period
90.00

Memo Item

Full Name (Last, First, Middle Initial)
B. William Hepscher

Mailing Address 38176 Medical Center Avenue

City State Zip Code
Zephyrhills FL 33540-1380

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

Name of Employer Occupation
The Canadian Drugstore Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2015

Transaction ID : 9867232

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Jerry D. Jackson

Mailing Address 5113 N. Executive Drive
Suite 102

City State Zip Code
Peoria IL 61614-4893

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

Name of Employer Occupation
Jackson Financial Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2015

Transaction ID : 9867233

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 217.00

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 82 OF 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Roger J. Kelley

Mailing Address P O Box 221649

City State Zip Code
Louisville KY 40252-1649

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

Name of Employer Occupation
Epic Insurance Solutions Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 27 / 2015
Transaction ID : 9867235

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Douglas Lubenow

Mailing Address 214 West Main Street Suite 203

City State Zip Code
Moorestown NJ 08057-2345

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

Name of Employer Occupation
Lubenow Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 27 / 2015
Transaction ID : 9867236

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. David Mordo

Mailing Address 26 Kennedy Court

City State Zip Code
North Middletown NJ 07748-3532

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

Name of Employer Occupation
Slattery GA Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt
11 / 27 / 2015
Transaction ID : 9867237

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.00

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 83 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Peter L. Rowe
 Full Name (Last, First, Middle Initial)
 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 Sunwest Benefits Consulting, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1100.00

Date of Receipt 11 / 27 / 2015
Transaction ID : 9867238
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Timothy N. Barhorst
 Full Name (Last, First, Middle Initial)
 Mailing Address 5222 Double Eagle Drive
 City Westerville State OH Zip Code 43081-4821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Business Partners, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 420.00

Date of Receipt 11 / 27 / 2015
Transaction ID : 9867241
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Douglas F. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 Ohio River Blvd
 City Pittsburgh State PA Zip Code 15202-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Seubert & Associates, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 330.00

Date of Receipt 11 / 27 / 2015
Transaction ID : 9867242
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 172.00
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 84 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Shelly K. Winson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1914

City Chandler State AZ Zip Code 85244-1914

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

Name of Employer True Choice Benefits LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 526.00

Date of Receipt 11 / 28 / 2015
Transaction ID : 9867247

Amount of Each Receipt this Period 30.00

Memo Item

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

Mailing Address 11325 Pegasus St., Suite W-102

City Dallas State TX Zip Code 75238-5214

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

Name of Employer Benefits Dallas Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 11 / 28 / 2015
Transaction ID : 9867248

Amount of Each Receipt this Period 85.00

Memo Item

C. Terry Allard
Full Name (Last, First, Middle Initial)

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 The Wilson Agency, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1646.00

Date of Receipt 11 / 28 / 2015
Transaction ID : 9867251

Amount of Each Receipt this Period 150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 85 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial) A. Paul E. Smith		Date of Receipt MM / DD / YYYY 11 / 28 / 2015 Transaction ID : 9867253
Mailing Address 100 Queen Street		Amount of Each Receipt this Period 175.00
City Southington	State CT	Zip Code 06489-2052
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Paul E Smith Insurance, LLC	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1950.00	

Full Name (Last, First, Middle Initial) B. Audra I. Sullivan		Date of Receipt MM / DD / YYYY 11 / 28 / 2015 Transaction ID : 9867254
Mailing Address 1201 N Watson Rd Ste 287		Amount of Each Receipt this Period 30.00
City Arlington	State TX	Zip Code 76006-6222
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Vogue Insurance Agency, LLC	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.00	

Full Name (Last, First, Middle Initial) C. Robert L. Moore		Date of Receipt MM / DD / YYYY 11 / 28 / 2015 Transaction ID : 9867259
Mailing Address 1644 Plank Rd		Amount of Each Receipt this Period 42.00
City Duncansville	State PA	Zip Code 16635-8376
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer L.R. Webber Associates, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.00	

SUBTOTAL of Receipts This Page (optional).....▶	247.00
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 86 OF 178
(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 (Last, First, Middle Initial)
A. Kevin Trokey

Mailing Address 215 S. Kirkwood Rd
 Ste 210

City State Zip Code
 Saint Louis MO 63122-4359

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

Name of Employer Occupation
 Q4intelligence Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : 9867260

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Korina Kay Gregg

Mailing Address 6020 E Paseo Santa Teresa

City State Zip Code
 Tucson AZ 85750-1723

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

Name of Employer Occupation
 HR Executive Benefits Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 452.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : 9867265

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Ruppert Reinstadler

Mailing Address 6443 SW Beaverton-Hillsdale Hwy
 Suite 200

City State Zip Code
 Portland OR 97221-4230

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

Name of Employer Occupation
 Coordinated Resources Group, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2015

Transaction ID : 9867273

Amount of Each Receipt this Period
 42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 114.00

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 87 OF 178
(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 (Last, First, Middle Initial)
A. Anya Y. Simpson

Mailing Address 700 Newtown Road, Suite 104

City Norfolk State VA Zip Code 23502-3925

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

Name of Employer Benefit Plans, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : 9871696

Amount of Each Receipt this Period **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Heather Lee MCDOUGALL

Mailing Address 1312 W Kiva Ave

City Mesa State AZ Zip Code 85202-6633

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

Name of Employer Affiliated Insurance Solutions Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR433059212667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Denise S. VILLAGRAN

Mailing Address 1016 Santa Fe, #205

City Corpus Christi State TX Zip Code 78404-2343

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

Name of Employer Entrust, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR433061212667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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 88 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Tiffany Stock
Full Name (Last, First, Middle Initial)
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 Northrim Benefits Group	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Date of Receipt
11 / 30 / 2015
Transaction ID : PR433079012667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Carla ADAMS
Full Name (Last, First, Middle Initial)
Mailing Address 2229 Mesa Brook

City Schertz	State TX	Zip Code 78154-1975
FEC ID number of contributing federal political committee. C		
Name of Employer Total Administrative Services Corporat	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
11 / 30 / 2015
Transaction ID : PR433095012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Melissa Davies
Full Name (Last, First, Middle Initial)
Mailing Address 9425 Double R Blvd
Ste F

City Reno	State NV	Zip Code 89521-5928
FEC ID number of contributing federal political committee. C		
Name of Employer Clark and Associates	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
11 / 30 / 2015
Transaction ID : PR433115412667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 89 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Madeleine Brown

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 Fisher Brown Bottrell Insurance, Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1110.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR433118912667

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Joseph H. DEACON

Mailing Address 221 1/2 Hale Street PO Box 2831

City Charleston State WV Zip Code 25301-2207

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

Name of Employer Deacon & Deacon Insurance Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR433129312667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Dwane C. MCFERRIN

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 Senior Market Sales, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **865.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR433168112667

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **200.00**

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 90 OF 178
(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

A. William J. Barrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 7400 West Campus Road
 City State Zip Code
 New Albany OH 43054-8725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aetna Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR433180612667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. H Elizabeth Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3013 Sonora Canyon Rd
 City State Zip Code
 Weatherford TX 76087-8215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Senior Services of Texas Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 351.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR433187712667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Robert L. Rifkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Stonewall Lane
 City State Zip Code
 Mamaroneck NY 10543-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Insurance & Financial Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR433196812667
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 102.00
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 91 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Scott W. LONG
Full Name (Last, First, Middle Initial)
Mailing Address 1715 Greenway Village Dr.
City State Zip Code
Katy TX 77494-2175
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Transamerica Employee Benefits Sales Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR433206812667
Amount of Each Receipt this Period
30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

B. Barbara Ann GERKEN
Full Name (Last, First, Middle Initial)
Mailing Address 1775 Indian Wood Circle
City State Zip Code
Maumee OH 43537-4010
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
First Insurance Group Director
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
231.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR433268312667
Amount of Each Receipt this Period
30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

C. Amanda Potter
Full Name (Last, First, Middle Initial)
Mailing Address 2101 W Wadley #33C
City State Zip Code
Midland TX 79705-6439
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Aflac Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR433277612667
Amount of Each Receipt this Period
30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 92 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Lynn Charles Wentworth
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Executive Drive
 Suite E
 City Madison State MS Zip Code 39110-8456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFLAC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR433282012667
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Michael SPLEET
 Full Name (Last, First, Middle Initial)
 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 Franklin Benefit Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **599.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR433316612667
 Amount of Each Receipt this Period **63.00**
 Memo Item
 P/R Deduction (\$75.00 Monthly)

C. Stacey Quance
 Full Name (Last, First, Middle Initial)
 Mailing Address 380 Interstate North Parkway
 Ste 480
 City Atlanta State GA Zip Code 30339-2222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Combined Worksite Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR433459312667
 Amount of Each Receipt this Period **25.00**
 Memo Item
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	118.00
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 93 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Laura DRAKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 Gooding St N #106
 City Twin Falls State ID Zip Code 83301-6177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Laura Drake Insurance Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR433504412667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Mindy Payne Farnsley
 Full Name (Last, First, Middle Initial)
 Mailing Address 3702 Brownsboro Rd
 City Louisville State KY Zip Code 40207-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Preferred Benefits Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR433519212667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Roger W. SKINNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4010 State Street
 City Tampa State FL Zip Code 33609-1264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Argus Dental and Vision Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.50

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436789412667
 Amount of Each Receipt this Period 30.50
 Memo Item
 P/R Deduction (\$30.50 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	90.50
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 94 OF 178
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John P. Garven
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 8
 11715 East Main Street -
 City State Zip Code
 Huntley IL 60142-0008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Benico, LTD Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 462.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436791112667
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. John F. RIPPINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 East Woodfield Rd. #110 E
 City State Zip Code
 Schaumburg IL 60173-4945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rippinger Financial Group, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436793512667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Michael B. DOLLINS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 12120
 City State Zip Code
 Oklahoma City OK 73157-2120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dollins & Company, Inc. 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
 11 / 30 / 2015
Transaction ID : PR436800412667
 Amount of Each Receipt this Period
 20.00
 Memo Item
 P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	92.00
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 95 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Catherine VANCANT
Full Name (Last, First, Middle Initial)

Mailing Address 5500 Euper Lane
P.O. Box 3529

City Fort Smith State AR Zip Code 72903-3234

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

Name of Employer Brown-Hiller-Clark & Associates, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436801912667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Roy W. Kern
Full Name (Last, First, Middle Initial)

Mailing Address 3015 South Fort Avenue, Suite B

City Springfield State MO Zip Code 65807-4311

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

Name of Employer Kern Insurance Services, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436804512667

Amount of Each Receipt this Period 25.00

Memo Item

P/R Deduction (\$25.00 Monthly)

C. Gerald G Hartman
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5716

City Boise State ID Zip Code 83705-0716

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

Name of Employer Insurance Network America Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436808012667

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 96 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Eugene L. ROWE
Full Name (Last, First, Middle Initial)

Mailing Address 16000 Ventura Blvd

City Encino State CA Zip Code 91436-2744

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

Name of Employer R & R Retirement and Insurance Service Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436817912667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Jeffrey Sherrod
Full Name (Last, First, Middle Initial)

Mailing Address 3810 Holly Ridge Drive

City Longview State TX Zip Code 75605-2500

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

Name of Employer United Healthcare Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436818312667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Brad L CHRISTIAN
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 188

City Clatonia State NE Zip Code 68328-0188

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

Name of Employer Insurance & Investments Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436821012667

Amount of Each Receipt this Period **10.00**

Memo Item

P/R Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **70.00**

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 97 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Janet TRAUTWEIN
 Full Name (Last, First, Middle Initial)
 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 NAHU Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436821412667
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

B. William L. Sutherland
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 795008
 131 Interpark Blvd.
 City San Antonio State TX Zip Code 78279-5008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wortham Insurance & Risk Management Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436823412667
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

C. Elizabeth E. RIOS-CARL
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 North Campbell
 City El Paso State TX Zip Code 79901-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Houghton Financial Partners LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436824512667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	320.00
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 98 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas Besselman

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

City	State	Zip Code
Baton Rouge	LA	70808-6200

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

Name of Employer	Occupation
Gallagher Benefit Services	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR436824612667

Amount of Each Receipt this Period
250.00

Memo Item

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Patti SMITH

Mailing Address 525 Kirkland Way

City	State	Zip Code
Kirkland	WA	98033-6219

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

Name of Employer	Occupation
P Smith Insurance Services	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
11	/	30	/	2015

Transaction ID : PR436829312667

Amount of Each Receipt this Period
20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Jesse A. Patton

Mailing Address 1112 Maple Street

City	State	Zip Code
West Des Moines	IA	50265-4420

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

Name of Employer	Occupation
Associations Marketing Group, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR436829512667

Amount of Each Receipt this Period
350.00

Memo Item

P/R Deduction (\$350.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	620.00
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 99 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David A BERMAN
Full Name (Last, First, Middle Initial)

Mailing Address 6510 N. Shadeland Avenue

City Indianapolis State IN Zip Code 46220-4369

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

Name of Employer Neace Lukens Holding Company, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1081.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436829712667

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Elizabeth ASHMORE
Full Name (Last, First, Middle Initial)

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 Ashmore & Associates Insurance Agency, Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436830312667

Amount of Each Receipt this Period 170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

C. Mary B. KRAMER
Full Name (Last, First, Middle Initial)

Mailing Address 2637 S. 158th Plaza #200

City Omaha State NE Zip Code 68130-1769

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

Name of Employer Holmes Murphy & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436836212667

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 297.00

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 100 OF 178
(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

A. Robert A. GRUNDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7412 Karl Drive
 City Lincoln State NE Zip Code 68516-4368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Benefit Strategies Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436838912667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

B. Michael E. Matznick
 Full Name (Last, First, Middle Initial)
 Mailing Address 3150 N. Elm Street Suite 201
 City Greensboro State NC Zip Code 27408-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EbenConcepts Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436839812667
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

C. Dorothy M. Cocin
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 6677
 City Fullerton State CA Zip Code 92834-6677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advanced Benefit Consulting & Insuranc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436844612667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 101 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Harry P. Thal
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2137

City Kernville State CA Zip Code 93238-2137

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

Name of Employer Harry P. Thal Insurance Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **935.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436847212667

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Keith L. WRIGHT
Full Name (Last, First, Middle Initial)

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 Wright Insurance Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436848512667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. H. Larry FORTENBERRY
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 16566

City Jackson State MS Zip Code 39236-6566

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

Name of Employer Executive Planning Group, P.A. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436852612667

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **157.00**

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 102 OF 178
(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 (Last, First, Middle Initial)
A. Ann C. BELL

Mailing Address 2171 So. Pebblecreek Lane

City State Zip Code
Boise ID 83706-6123

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

Name of Employer Occupation
Retired Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436853212667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Darrald T. Bean

Mailing Address 3922 Rampart ST

City State Zip Code
Boise ID 83704-4557

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

Name of Employer Occupation
Bean Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436853312667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Tom Swayne

Mailing Address PO Box 31029

City State Zip Code
Charleston SC 29417-1029

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

Name of Employer Occupation
David M. Gilston Insurance Agency, Inc Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436853712667

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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 103 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael J. FREEMAN

Mailing Address 3511 Camino Del Rio South
Suite 303

City San Diego State CA Zip Code 92108-4043

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

Name of Employer Countywide Health Ins. Services, Inc. Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436861812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Phyllis Martinsen

Mailing Address 1108 West Boise Avenue, Suite 100

City Boise State ID Zip Code 83706-3527

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

Name of Employer Byron Hyatt Erstad & Co Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436864012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Caroline HESSELTINE

Mailing Address 7272 Wurzbach Road, Suite 104

City San Antonio State TX Zip Code 78240-4802

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

Name of Employer ABC / Associated Benefit Consultants, Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436864912667

Amount of Each Receipt this Period
20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 104 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. George R. KEELING

Mailing Address P.O. Drawer K-1630
507 Avenue G

City Levelland State TX Zip Code 79336-3720

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

Name of Employer George R. Keeling Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436865512667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Sandra V. MOBLEY

Mailing Address 137 Executive Dr. Suite D

City Madison State MS Zip Code 39110-8456

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

Name of Employer Mobley Insurance Agency LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436869312667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Paula L. WILSON

Mailing Address 31930 Daniel Way

City Temecula State CA Zip Code 92591-2129

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

Name of Employer Paula Wilson, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436873512667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 105 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kathy M. RAINWATER
Full Name (Last, First, Middle Initial)

Mailing Address 515 West Southwest Loop 323

City Tyler	State TX	Zip Code 75701-9455
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FEC ID number of contributing federal political committee. **C**

Name of Employer Threlkeld & Company Insurance	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436873712667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Rodney STUART
Full Name (Last, First, Middle Initial)

Mailing Address 600 E Carmel Dr Suite 100

City Carmel	State IN	Zip Code 46032-2805
----------------	-------------	------------------------

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

Name of Employer Strategic Insurance Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436883312667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

C. David Adams
Full Name (Last, First, Middle Initial)

Mailing Address 736 Johnson Ferry Road Building C, Suite 200

City Marietta	State GA	Zip Code 30068-4379
------------------	-------------	------------------------

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

Name of Employer Purchasing Alliance Solutions, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436891512667

Amount of Each Receipt this Period
20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 106 OF 178
(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

A. David W. VARISCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 Paris St.
 City Lafayette State LA Zip Code 70506-5249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Oxford Asset Management,LLC Occupation Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436894612667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Jackie L. SPRAGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 2073
 City Wichita Falls State TX Zip Code 76307-2073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 571.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436895312667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

C. John G. Fagen
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 19
 City Demotte State IN Zip Code 46310-0019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Financial Arts Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR436896512667
 Amount of Each Receipt this Period 25.00
 Memo Item
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 107 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Leah-Anne JANWAY
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 20626

City Oklahoma City State OK Zip Code 73156-0626

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

Name of Employer Bigbie, Hensley & Janway Insurance Age Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436901512667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Douglas W Sheffer
Full Name (Last, First, Middle Initial)

Mailing Address 110 International Way

City Springfield State OR Zip Code 97477-1034

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

Name of Employer PacificSource Health Plans Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436902912667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Todd Morrow
Full Name (Last, First, Middle Initial)

Mailing Address 1173 Brittmore

City Houston State TX Zip Code 77043-5003

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

Name of Employer Benefit Concepts, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436903712667

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **102.00**

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 108 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Tonya S. BOOTH
Full Name (Last, First, Middle Initial)

Mailing Address 1801 Gateway Blvd.
Suite 200

City Richardson State TX Zip Code 75080-3646

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

Name of Employer Upshaw Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436911012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Michael A. EMBRY
Full Name (Last, First, Middle Initial)

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 Comprehensive Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3037.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436914112667

Amount of Each Receipt this Period
170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

C. Dwight Hall
Full Name (Last, First, Middle Initial)

Mailing Address 6107 Hazelwood Ave.

City Indianapolis State IN Zip Code 46228-1316

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

Name of Employer D Hall & Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
526.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436914812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	230.00
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 109 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Annette SHAFFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 418 South Main Street
 City Findlay State OH Zip Code 45840-3273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Group Benefit Consultants Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR436917212667
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Dennis J. RECKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 971 North Perry Street P.O. Box 276
 City Ottawa State OH Zip Code 45875-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fawcett, Lammon, Recker & Associates Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR436919012667
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Lawrence KACZMAREK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2633 State Route 59, Suite B
 City Ravenna State OH Zip Code 44266-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaczmarek Ins. Services Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **341.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR436923412667
 Amount of Each Receipt this Period **31.00**
 Memo Item
 P/R Deduction (\$31.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **91.00**
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 110 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jeffrey S. BENSMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 510938
 City Milwaukee State WI Zip Code 53203-0161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Security Financial Group Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR436931712667
 Amount of Each Receipt this Period **20.00**
 Memo Item
 P/R Deduction (\$20.00 Monthly)

B. Peter F. Stehr
 Full Name (Last, First, Middle Initial)
 Mailing Address 13636 Seward Street
 City Omaha State NE Zip Code 68154-3823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peter Stehr Insurance Services, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR436932412667
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Louie L. Cason
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 11229
 City Columbia State SC Zip Code 29211-1229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Cason Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **935.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR436934812667
 Amount of Each Receipt this Period **85.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **135.00**
TOTAL This Period (last page this line number only).....

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

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

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(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

A. Jimmie WHITMIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 Eighth Street
 City State Zip Code
 Wichita Falls TX 76301-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Whitmire & Whitmire, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436939112667
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. James R. STENGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8926 Crown Colony Boulevard
 City State Zip Code
 Fort Myers FL 33908-5627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MVS Consulting Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2087.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436939912667
 Amount of Each Receipt this Period
 220.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

C. Gregory J. SEIFERT
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 189
 916 Main Street
 City State Zip Code
 Vancouver WA 98666-0189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Biggs Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR436941612667
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 347.00
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 112 OF 178
(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 (Last, First, Middle Initial)
A. Sandra Johnson

Mailing Address 12500 Network Blvd, # 403

City San Antonio State TX Zip Code 78249-3310

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

Name of Employer Occupation
Hairston, Johnson & Associates, PLLC Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436946312667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. John WOODS

Mailing Address 458 High Street

City Warren State OH Zip Code 44481-1200

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

Name of Employer Occupation
INSURANCE NAVIGATORS AGENCY Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436950012667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Nicole Fairbairn

Mailing Address 8069 Little Circle Road

City Noblesville State IN Zip Code 46060-1071

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

Name of Employer Occupation
Creative Insurance Concepts Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **351.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436957112667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**

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 113 OF 178
(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 (Last, First, Middle Initial)
A. Scott A. DELISI

Mailing Address 5900 O Street

City Lincoln State NE Zip Code 68510-2234

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

Name of Employer Ameritas Life Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR436958812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$10.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Robert V. HOLLAND

Mailing Address PO Box 698

City Centralia State WA Zip Code 98531-0698

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

Name of Employer Centralia General Agencies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR436961712667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. John E SCHNEIDER

Mailing Address 4300 Sidco Drive, Suite 200

City Nashville State TN Zip Code 37204-4537

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

Name of Employer Colonial Life Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR436963512667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► **90.00**

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 114 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. William L. BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 2909 Four Corners Dr.

City	State	Zip Code
Grand Junction	CO	81503-2977

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

Name of Employer	Occupation
William L. Brown Ins. Services, LLC	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
11	/	30	/	2015

Transaction ID : PR436971612667

Amount of Each Receipt this Period
20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

B. John C. PARKER
Full Name (Last, First, Middle Initial)

Mailing Address 47 Laurel Hill Drive

City	State	Zip Code
Niantic	CT	06357-1536

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

Name of Employer	Occupation
Parker Agency	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1246.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR436986812667

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. Bob Bentley
Full Name (Last, First, Middle Initial)

Mailing Address 9557 Silverdale Loop Road, NW

City	State	Zip Code
Silverdale	WA	98383-9132

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

Name of Employer	Occupation
Albers Company	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR436990412667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 115 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Rand R. Wall
Full Name (Last, First, Middle Initial)

Mailing Address 12603 Southwest Freeway, Suite 620

City Stafford	State TX	Zip Code 77477-3864
------------------	-------------	------------------------

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

Name of Employer Lone Star Health Plans, Ltd.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
926.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436992612667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. William Craig SPLAWN
Full Name (Last, First, Middle Initial)

Mailing Address 800 Avenue C

City Katy	State TX	Zip Code 77493-2302
--------------	-------------	------------------------

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

Name of Employer Splawn & Associates	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436992812667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

C. Paige W. PHILLIPS
Full Name (Last, First, Middle Initial)

Mailing Address 1434 Hwy 301

City Calera	State AL	Zip Code 35040-5466
----------------	-------------	------------------------

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

Name of Employer AWM, Inc	Occupation Broker
------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1083.50

Date of Receipt
11 / 30 / 2015
Transaction ID : PR436993012667

Amount of Each Receipt this Period
98.50

Memo Item

P/R Deduction (\$98.50 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	190.50
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 116 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Charla S. Rose
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1299

City Amarillo State TX Zip Code 79105-0299

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

Name of Employer Upshaw Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR436999112667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Kelly Don FRISTOE
Full Name (Last, First, Middle Initial)

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 Financial Partners Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **476.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437002312667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Ryan P. THORN
Full Name (Last, First, Middle Initial)

Mailing Address 10342 South Springcrest Lane

City South Jordan State UT Zip Code 84095-4538

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

Name of Employer Ryan P. Thorn Insurance Planning, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437004012667

Amount of Each Receipt this Period **40.00**

Memo Item

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **100.00**

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 117 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Betty R. DOYLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 SE 3rd, Suite A
 City Moore State OK Zip Code 73160-5234
 Name of Employer Doyle-Crow & Associates Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437006912667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Julie A. Jennings
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 Faunce Corner Rd Bldg 100, Suite 120
 City Dartmouth State MA Zip Code 02747-1255
 Name of Employer Sylvia & Co. Ins. Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437009212667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Scott T. BUIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6440 South Wasatch Blvd., #150
 City Salt Lake City State UT Zip Code 84121-3513
 Name of Employer Buie Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437010512667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 118 OF 178
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James P Better
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Summer Street, Suite 6
 City Chelmsford State MA Zip Code 01824-3064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New England Medical Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437011512667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Michael D. GRAY
 Full Name (Last, First, Middle Initial)
 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 The Harry A. Koch Co Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437016712667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Dee Forshee
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 E Main #B
 City Union State MO Zip Code 63084-1645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ming Senior Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437017012667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 119 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Keith M. DUHON
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 80158

City Lafayette State LA Zip Code 70598-0158

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

Name of Employer The Family Insurance Center, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437017112667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Lorelei G. Castellani
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 905

City Branchville State NJ Zip Code 07826-0905

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

Name of Employer Benefit Guidance Systems Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437019212667

Amount of Each Receipt this Period 25.00

Memo Item

P/R Deduction (\$25.00 Monthly)

C. Tammy WINN
Full Name (Last, First, Middle Initial)

Mailing Address 9811 S IH 35, Building 1 Suite 100

City Austin State TX Zip Code 78744-7901

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

Name of Employer SWBC Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437022712667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 120 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. T. Darlene KACZMAREK
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 345
 City State Zip Code
 Ravenna OH 44266-0345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kaczmarek Ins. Services Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 341.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : PR437026312667
 Amount of Each Receipt this Period
 31.00
 Memo Item
 P/R Deduction (\$31.00 Monthly)

B. Donna J. BLIZMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1939 Racimo Dr
 City State Zip Code
 Sarasota FL 34240-9426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Employee Benefits Marketing Group Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : PR437031512667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Stuart SHAPIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 587
 City State Zip Code
 Wheeling IL 60090-0587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Healthcare/SecureHorizons Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : PR437033312667
 Amount of Each Receipt this Period
 20.00
 Memo Item
 P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	81.00
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 121 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Carol MATZNICK
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 38905

City Greensboro State NC Zip Code 27438-8905

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

Name of Employer North Carolina AHU Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR437035312667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$12.00 Monthly)

B. Matt B. Schwartz
Full Name (Last, First, Middle Initial)

Mailing Address 2950 Breckenridge Lane, Suite 8

City Louisville State KY Zip Code 40220-1462

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

Name of Employer Schwartz Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **935.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR437037812667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Wesley P. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 604

City Darlington State SC Zip Code 29540-0604

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

Name of Employer Moore Insurance Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR437039412667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 122 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Ronald S. Buffum
Full Name (Last, First, Middle Initial)

Mailing Address 106 South Harris Street
237

City Round Rock State TX Zip Code 78664-6081

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

Name of Employer The Buffum Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
658.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437042312667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Leesa Kay HAYES
Full Name (Last, First, Middle Initial)

Mailing Address 812 Lyndon Lane Suite 101

City Louisville State KY Zip Code 40222-3844

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

Name of Employer Snowden & Associates, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437043312667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Delvin L. STAHL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 388
807 S. Maltby Ave.

City Sutton State NE Zip Code 68979-0388

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

Name of Employer Insurance Plus, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437046612667

Amount of Each Receipt this Period
10.00

Memo Item

P/R Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.00

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 123 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jonathan S. Clark
Full Name (Last, First, Middle Initial)

Mailing Address 6084 South 900 East, Suite 102

City	State	Zip Code
Salt Lake City	UT	84121-1743

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

Name of Employer	Occupation
Fringe Benefits Analysts	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437051512667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Tim BRYNE
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 8950

City	State	Zip Code
Madison	WI	53708-8950

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

Name of Employer	Occupation
M3 Insurance	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437051612667

Amount of Each Receipt this Period
25.00

Memo Item

P/R Deduction (\$25.00 Monthly)

C. Eleanor M. Brockhurst
Full Name (Last, First, Middle Initial)

Mailing Address 1212 East Osborn Road, Suite 110

City	State	Zip Code
Phoenix	AZ	85014-5537

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

Name of Employer	Occupation
Brockhurst & Associates, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437052812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 124 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kimberly C. MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1027 S Pendleton Street
 Suite B-217
 City Easley State SC Zip Code 29642-1046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437058212667
 Amount of Each Receipt this Period 40.00
 Memo Item
 P/R Deduction (\$40.00 Monthly)

B. Kris BIZJACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 6075 Poplar Avenue, Suite 122
 City Memphis State TN Zip Code 38119-0109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Humana Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437061612667
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Monthly)

C. Terri M. OLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 21479
 City Keizer State OR Zip Code 97307-1479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Olson Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437070212667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$65.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 125 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Suzetta E. ALBERTS

Mailing Address 26555t Evergreen Drive
Ste 535

City Southfield State MI Zip Code 48076-4201

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

Name of Employer Comprehensive Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1070.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437076112667

Amount of Each Receipt this Period
84.00

Memo Item

P/R Deduction (\$84.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Juan R. Lopez

Mailing Address 22431 Antonio Pkwy
Suite B160-420

City Rancho Santa Margarita State CA Zip Code 92688-2804

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

Name of Employer Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437079012667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Shelley A Chornak

Mailing Address 7251 Engle Rd. Suite 103

City Cleveland State OH Zip Code 44130-3400

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

Name of Employer Sage Partners, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437080812667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	211.00
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 126 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Lori R. Rice
Full Name (Last, First, Middle Initial)

Mailing Address 8830 Buckskin Drive

City Boerne State TX Zip Code 78006-5554

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

Name of Employer Occupation
Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437086412667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Linda Rose KOEHLER
Full Name (Last, First, Middle Initial)

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 Occupation
Herzog Insurance Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1081.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437090112667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Dierdre Kennedy-Smith
Full Name (Last, First, Middle Initial)

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 Occupation
Genesis Financial & Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
657.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437094112667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 157.00

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 127 OF 178
(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

A. Joseph E. HENEHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 Carnegie Dr., Ste. #205
 City San Bernardino State CA Zip Code 92408-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Henehan Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437097912667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Mario Roiz
 Full Name (Last, First, Middle Initial)
 Mailing Address 10446 NW 31st Terrace
 City Doral State FL Zip Code 33172-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HR Benefit Services, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437104912667
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. Robert P. Poli
 Full Name (Last, First, Middle Initial)
 Mailing Address 6101 Executive Boulevard, Suite 12
 City Rockville State MD Zip Code 20852-3907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Marketing Center, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437105912667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	212.00
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 128 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James R. STEPHENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Mansell Ct East
 Suite 400
 City Roswell State GA Zip Code 30076-4859
 Name of Employer Humana Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437110712667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Joseph W. Buyalos
 Full Name (Last, First, Middle Initial)
 Mailing Address 9713 Key West Ave, Suite 401
 City Rockville State MD Zip Code 20850-4082
 Name of Employer The Insurance Exchange, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437111612667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. G. Russell Garner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1308 Murraywood Drive
 City Columbia State SC Zip Code 29212-1159
 Name of Employer G. Russell Garner LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437113212667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 145.00
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 129 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Cynthia H. DOUCET

Mailing Address 104 Mondrian Way

City Lafayette State LA Zip Code 70501-7730

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

Name of Employer Global Financial Resources, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015

Transaction ID : PR437116412667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Brian Joseph MCEVILLY

Mailing Address 4455 S. Pecos Rd.

City Las Vegas State NV Zip Code 89121-5029

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

Name of Employer GLB Insurance Group of Nevada Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt 11 / 30 / 2015

Transaction ID : PR437117712667

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Angela HOGAN

Mailing Address 2300 S. 16th Street

City Lincoln State NE Zip Code 68502-3704

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

Name of Employer Bryan Medical Center Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015

Transaction ID : PR437117812667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 130 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address 1128 Lincoln Mall, Ste 200

City Lincoln State NE Zip Code 68508-2878

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

Name of Employer Midlands Financial Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1912.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437118012667

Amount of Each Receipt this Period
170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

B. Lonnie Klene
Full Name (Last, First, Middle Initial)

Mailing Address 14339 Torrey Chase Blvd., Ste F

City Houston State TX Zip Code 77014-1631

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

Name of Employer Core Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437119612667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Wendy Vanderwater
Full Name (Last, First, Middle Initial)

Mailing Address 515 West Southwest Loop 323

City Tyler State TX Zip Code 75701-9455

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

Name of Employer Threlkeld & Company Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437122412667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	242.00
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 131 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Bruce D. BENTON
 Full Name (Last, First, Middle Initial)
 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 Genesis Financial & Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2036.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437123012667
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

B. Joanna ANTONGIOVANNI
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 795008
 City San Antonio State TX Zip Code 78279-5008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wortham Insurance & Risk Management Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437128012667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Linda K. FRIEDRICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4435 O Street
 City Lincoln State NE Zip Code 68510-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNICO Financial Services, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437129112667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	250.00
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 132 OF 178
(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 (Last, First, Middle Initial)
A. Patricia A. Griffey

Mailing Address 17535 Generations Dr

City State Zip Code
South Bend IN 46635-1589

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

Name of Employer Occupation
The Healy Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1317.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437135312667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jeffrey Papenfus

Mailing Address 32110 Agoura Road

City State Zip Code
Westlake Village CA 91361-4026

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

Name of Employer Occupation
Warner Pacific Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437137812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Timothy P. WALSH

Mailing Address PO Box 417

City State Zip Code
Hampstead NC 28443-0417

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

Name of Employer Occupation
Advanced Insurance Systems Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437149412667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► 110.00

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 133 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Laura L. Hebert
Full Name (Last, First, Middle Initial)

Mailing Address 935 Graham Road
PO BOX 18508

City Corpus Christi State TX Zip Code 78418-5123

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

Name of Employer Hebert Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437154812667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Tina DURAND
Full Name (Last, First, Middle Initial)

Mailing Address P.O.Box 61157

City Corpus Christi State TX Zip Code 78466-1157

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

Name of Employer Heavin & Associates Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437154912667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

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

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 Health Alliance Plan Occupation Director of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
808.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437156212667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	134.00
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 134 OF 178
(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

A. Robert H. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6724 S 29th W Place
 City State Zip Code
 Tulsa OK 74132-1766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Plan Benefit Analysts of Tulsa, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437174112667
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Robert J. Tierney
 Full Name (Last, First, Middle Initial)
 Mailing Address 2113 West Parkstone Ct
 City State Zip Code
 Meridian ID 83646-8200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tierney Consulting, Inc Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 372.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437175212667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Terry Allard
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 A Street, Suite 400
 City State Zip Code
 Anchorage AK 99503-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Wilson Agency, LLC Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1696.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437182312667
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► 122.00
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 135 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Neal Murray

Mailing Address 1314 East Atlantic Boulevard

City Pompano Beach State FL Zip Code 33060-6745

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

Name of Employer Frank H. Furman, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437183412667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Dale DUCOTE

Mailing Address 7922 Summa Avenue, Suite B-1

City Baton Rouge State LA Zip Code 70809-3475

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

Name of Employer Health Plus Consulting Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437184612667

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Alan R. SCHULMAN

Mailing Address 6500 Rock Spring Drive Suite 410

City Bethesda State MD Zip Code 20817-1199

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

Name of Employer The Meltzer Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437194612667

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	157.00
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 136 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John B. Crable
Full Name (Last, First, Middle Initial)

Mailing Address 5000 Dearborn Cir. Ste 100

City	State	Zip Code
Mount Laurel	NJ	08054-4108

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

Name of Employer	Occupation
Corporate Synergies Group, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437199712667

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Victoria J. BRADEN
Full Name (Last, First, Middle Initial)

Mailing Address 3875 Johns Creek Parkway, Suite C

City	State	Zip Code
Suwanee	GA	30024-1294

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

Name of Employer	Occupation
Braden Benefit Strategies, Inc	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437201912667

Amount of Each Receipt this Period
250.00

Memo Item

P/R Deduction (\$250.00 Monthly)

C. Joshua D. NACE
Full Name (Last, First, Middle Initial)

Mailing Address 100 W. Harrison Street, Suite S440

City	State	Zip Code
Seattle	WA	98119-4116

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

Name of Employer	Occupation
Dental Health Services	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437203312667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	330.00
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 137 OF 178
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Lon G. WILSON
Full Name (Last, First, Middle Initial)

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 The Wilson Agency, LLC	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437204312667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Jennifer BUNDY-COBB
Full Name (Last, First, Middle Initial)

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 The Wilson Agency, LLC	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437204412667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Marilyn A. STENGER
Full Name (Last, First, Middle Initial)

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 MVS Consulting	Occupation Broker
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR437206412667

Amount of Each Receipt this Period
135.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	250.00
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 138 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James S. GARBINA
Full Name (Last, First, Middle Initial)

Mailing Address 14010 FNB Pkwy Ste 300

City Omaha State NE Zip Code 68154-5235

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

Name of Employer The Harry A. Koch Co Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437212212667

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Michelle S. Howard
Full Name (Last, First, Middle Initial)

Mailing Address 2850 West Grand Boulevard

City Detroit State MI Zip Code 48202-2643

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

Name of Employer Health Alliance Plan Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1331.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437215212667

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Catherine L. Cooper
Full Name (Last, First, Middle Initial)

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 Health Alliance Administrators Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1131.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437218312667

Amount of Each Receipt this Period 135.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	270.00
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

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(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 (Last, First, Middle Initial)
A. Thomas E. Shores

Mailing Address 8596 W Bolsa Ct.

City State Zip Code
Boise ID 83709-5196

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

Name of Employer Occupation
T.A. Shores Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437221412667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Rita A. MUSSER

Mailing Address 3330 Thames Drive

City State Zip Code
Fort Wayne IN 46815-5994

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

Name of Employer Occupation
Senior Insurance Solutions Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437229112667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Joy K. GARDNER

Mailing Address 9424 Double R Blvd

City State Zip Code
Reno NV 89521-5977

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

Name of Employer Occupation
Comstock Insurance Agencies, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
699.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437231212667

Amount of Each Receipt this Period
47.00

Memo Item

P/R Deduction (\$47.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 119.00

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 140 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David Mordo
Full Name (Last, First, Middle Initial)

Mailing Address 26 Kennedy Court

City North Middletown State NJ Zip Code 07748-3532

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

Name of Employer Slattery GA Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437249612667

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$35.00 Monthly)

B. Michael A. NORRIS
Full Name (Last, First, Middle Initial)

Mailing Address 295 E Palmer Street

City Franklin State NC Zip Code 28734-3049

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

Name of Employer Wayah Employee Benefits / EbenConcepts Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437250012667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Diane L. BARTON
Full Name (Last, First, Middle Initial)

Mailing Address Arthur J Gallagher & Co
615 E. Britton Road

City Oklahoma City State OK Zip Code 73114-7710

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

Name of Employer Gallagher Benefit Services, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437254112667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 141 OF 178
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Sandra Lee POWERS-BOOTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4817 S. 175th Street
 City Seatac State WA Zip Code 98188-3710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Benefits Northwest Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 483.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437264312667
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Allen D. HARDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 802 Kosciusko Road P.O. Box 89
 City Philadelphia State MS Zip Code 39350-3555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Philadelphia Security Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437264912667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Jennifer L. TOUPS
 Full Name (Last, First, Middle Initial)
 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 Humana Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437270512667
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 157.00
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 142 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Bill EASTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1504 Hackberry Street

City Metairie State LA Zip Code 70001-3318

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

Name of Employer Dardis Couvillion & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **351.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437271712667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Margaret S. Tolbert
Full Name (Last, First, Middle Initial)

Mailing Address 6501 Peake Rd Bld 950

City Macon State GA Zip Code 31210-8063

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

Name of Employer Tolbert & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437280512667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. James F. SUMMERS
Full Name (Last, First, Middle Initial)

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 Senior Market Sales, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1375.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437281012667

Amount of Each Receipt this Period **125.00**

Memo Item

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 143 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Tom Hayes
Full Name (Last, First, Middle Initial)
Mailing Address P O Box 3198

City Little Rock	State AR	Zip Code 72203-3198
FEC ID number of contributing federal political committee. C		
Name of Employer Rebsamen Insurance	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437300712667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Luann S. Yarberry
Full Name (Last, First, Middle Initial)
Mailing Address 1300 10th Street

City Wichita Falls	State TX	Zip Code 76301-3227
FEC ID number of contributing federal political committee. C		
Name of Employer Higginbotham Ins Agency, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437301012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

c. Angela POTTS
Full Name (Last, First, Middle Initial)
Mailing Address 1323 Highway 2, Ste. 300

City Sandpoint	State ID	Zip Code 83864-2741
FEC ID number of contributing federal political committee. C		
Name of Employer Summit Insurance Resource Group	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437309012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	90.00
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 144 OF 178
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Russ Blakley
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11310

City State Zip Code
Chattanooga TN 37401-2310

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

Name of Employer Occupation
Russ Blakely & Associates, LLC Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437317312667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Shannon J. ENDERS
Full Name (Last, First, Middle Initial)

Mailing Address 5797 Harvey Street - Suite A

City State Zip Code
Norton Shores MI 49444-6727

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

Name of Employer Occupation
Lakeshore Employee Benefits Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437322412667

Amount of Each Receipt this Period
25.00

Memo Item

P/R Deduction (\$25.00 Monthly)

C. Marie D. BELL
Full Name (Last, First, Middle Initial)

Mailing Address 701 4th Ave S. #1500

City State Zip Code
Minneapolis MN 55415-1637

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

Name of Employer Occupation
DeRuyter-Bell, LLC Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437323312667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 145 OF 178
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address 155 N. Riverview Drive

City Anaheim State CA Zip Code 92808-1225

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

Name of Employer Options in Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437326112667

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Patricia A. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 13815 Starhill Ct.

City Houston State TX Zip Code 77077-1117

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

Name of Employer King Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437329712667

Amount of Each Receipt this Period 20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

C. Susan R. Pittman
Full Name (Last, First, Middle Initial)

Mailing Address 32418 51st Avenue, SW

City Federal Way State WA Zip Code 98023-1936

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

Name of Employer Insure NW Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437343512667

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	112.00
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 146 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jim Lawless
Full Name (Last, First, Middle Initial)

Mailing Address Epic Insurance Solutions, LLC
710 East Main Street

City Lexington State KY Zip Code 40502-1602

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

Name of Employer Epic Insurance Solutions, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437348012667

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

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

Mailing Address 8516 East 101st, Suite H

City Tulsa State OK Zip Code 74133-7035

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

Name of Employer BenEx Insurance Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437359312667

Amount of Each Receipt this Period 15.00

Memo Item

P/R Deduction (\$15.00 Monthly)

C. Catherine A. BAJKOWSKI
Full Name (Last, First, Middle Initial)

Mailing Address 188 Industrial Drive, Suite 226

City Elmhurst State IL Zip Code 60126-1610

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

Name of Employer CB Health Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437361112667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	87.00
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 147 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David M. BLOCK
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 1809

City Candler State NC Zip Code 28715-1809

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

Name of Employer Insurance Specialties, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437364412667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Rina Tikia
Full Name (Last, First, Middle Initial)

Mailing Address 3525 N. Causeway Blvd., Suite 815

City Metairie State LA Zip Code 70002-3655

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

Name of Employer Tikia Consulting Group, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **483.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437375312667

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Jeffery C. THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 6200 Reynolds Road

City Jackson State MI Zip Code 49201-9386

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

Name of Employer Small Business Association of Michigan Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437385412667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	102.00
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 148 OF 178
(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 (Last, First, Middle Initial)
A. Andrea J. BOGARD

Mailing Address 100 W. Court Ave.
Suite 207

City Jeffersonville State IN Zip Code 47130-3502

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

Name of Employer: A. Bogard Insurance Group Occupation: Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: **11 / 30 / 2015**
Transaction ID : **PR437400012667**

Amount of Each Receipt this Period: **20.00**

Memo Item

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Antonio Gutierrez

Mailing Address 12833 Riverdance Dr.

City Raleigh State NC Zip Code 27613-7093

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

Name of Employer: ACA Dudes, Inc. Occupation: Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt: **11 / 30 / 2015**
Transaction ID : **PR437402012667**

Amount of Each Receipt this Period: **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Valerie Lynn CRAMER

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: Grotenhuis Occupation: Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **571.00**

Date of Receipt: **11 / 30 / 2015**
Transaction ID : **PR437416412667**

Amount of Each Receipt this Period: **50.00**

Memo Item

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **100.00**

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 149 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Monique E. HAHN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2081 Columbiana Road
 Suite 18
 City Birmingham State AL Zip Code 35216-2139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Synergy Benefits & Risk Mgt Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437417012667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Hollie GANDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2920 Duniven Circle, #2
 City Amarillo State TX Zip Code 79109-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Solutions Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437425012667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Robert S. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 7548 Preston Road
 City Frisco State TX Zip Code 75034-5683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clark Insurance Associates, PLLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437427212667
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	102.00
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 150 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Joel Rosenblum
Full Name (Last, First, Middle Initial)

Mailing Address 230 Lipan Way

City Boulder State CO Zip Code 80303-3635

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

Name of Employer Insurance for Asset Protection
Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437427412667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Victoria A. BELL
Full Name (Last, First, Middle Initial)

Mailing Address 3602 Harwich Ct

City Greenacres State FL Zip Code 33467-1532

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

Name of Employer VMB Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
451.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437432012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Rebecca L. Purdy
Full Name (Last, First, Middle Initial)

Mailing Address 9153 Whitekirk Place

City Las Vegas State NV Zip Code 89145-8720

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

Name of Employer Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437450412667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	114.00
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 151 OF 178
(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 (Last, First, Middle Initial)
A. Reed Damron

Mailing Address 5880 Live Oak Parkway, Suite 250

City Norcross State GA Zip Code 30093-1740

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

Name of Employer Occupation
 HIRE Benefits, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 935.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : PR437468912667

Amount of Each Receipt this Period
 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Melinda S. Anderson

Mailing Address 950 N. Meridian St. Suite 200

City Indianapolis State IN Zip Code 46204-1202

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

Name of Employer Occupation
 IU Health Plans Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : PR437470812667

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Marcus CREASY

Mailing Address P. O. Box 220

City Heber Springs State AR Zip Code 72543-0220

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

Name of Employer Occupation
 Adams & Creasy Insurance Agency, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 11 / 30 / 2015
Transaction ID : PR437474912667

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 152 OF 178
(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 (Last, First, Middle Initial)
A. Thomas Siino

Mailing Address 1126 Clifton Avenue

City Clifton State NJ Zip Code 07013-3622

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

Name of Employer Executive Benefits Group, LLC Occupation Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437477512667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Carol C. Pennington

Mailing Address 4640 Woodbridge Drive

City Kernersville State NC Zip Code 27284-8850

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

Name of Employer Pennington Associates Occupation Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437485412667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Randy L. MCDANIEL

Mailing Address 575 Chambers Road

City McDonough State GA Zip Code 30253-6447

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

Name of Employer McDaniel Insurance Occupation Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437485712667

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► **102.00**

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 153 OF 178
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Colleen J. GRANSEE
Full Name (Last, First, Middle Initial)

Mailing Address 1277 Deming Way

City Madison State WI Zip Code 53717-1971

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

Name of Employer Dean Health Plan Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437490412667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Barry S. Cohn
Full Name (Last, First, Middle Initial)

Mailing Address 21515 Vanowen St Ste 200

City Canoga Park State CA Zip Code 91303-2715

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

Name of Employer RGEB Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437497312667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Susan M. RIDER
Full Name (Last, First, Middle Initial)

Mailing Address 1402 N Capital #400

City Indianapolis State IN Zip Code 46202-2375

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

Name of Employer Gregory & Appel Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 547.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437510712667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$63.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 90.00

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 154 OF 178
(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

A. Jeanne A. EMBRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 26240 Wacker Drive
 City Chesterfield State MI Zip Code 48051-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Comprehensive Benefits Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437533412667
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Maggie COLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 Olde Gate Court
 City Pooler State GA Zip Code 31322-8281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coley Benefit Services, Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437534012667
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. David L. FEAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2140 Professional Drive, Suite 150
 City Roseville State CA Zip Code 95661-3781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shepler and Fear General Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.50

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437535412667
 Amount of Each Receipt this Period 12.50
 Memo Item
 P/R Deduction (\$12.50 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.50
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 155 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Cynthia SWANSON
Full Name (Last, First, Middle Initial)
Mailing Address 515 WSW Loop 323

City Tyler	State TX	Zip Code 75701-9455
---------------	-------------	------------------------

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

Name of Employer Threlkeld & Company Insurance	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437544912667

Amount of Each Receipt this Period
20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

B. Charles J. GIARDINA
Full Name (Last, First, Middle Initial)
Mailing Address 5440 Mounes Street, Suite 112

City New Orleans	State LA	Zip Code 70123-3296
---------------------	-------------	------------------------

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

Name of Employer MetLife	Occupation Broker
-----------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437562812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. David Contorno
Full Name (Last, First, Middle Initial)
Mailing Address 109 Professional Park Dr Ste 103

City Mooresville	State NC	Zip Code 28117-5538
---------------------	-------------	------------------------

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

Name of Employer Lake Norman Benefits, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437566612667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 156 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jon Katz
Full Name (Last, First, Middle Initial)

Mailing Address 1404 Northpoint Glen Ct.

City Herndon State VA Zip Code 20170-2707

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

Name of Employer Virginia Medical Plans Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437580912667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Daniel ALM
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3248

City Omaha State NE Zip Code 68103-0248

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

Name of Employer Blue Cross and Blue Shield of Nebraska Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437585512667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Dennis F. MOBLEY
Full Name (Last, First, Middle Initial)

Mailing Address 137 Executive Drive Suite D

City Madison State MS Zip Code 39110-8456

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

Name of Employer Mobley Insurance Agency, LLC, a Divisi Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437587512667

Amount of Each Receipt this Period **50.00**

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► **110.00**

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 157 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Daniel C. Labroad
 Full Name (Last, First, Middle Initial)
 Mailing Address 17304 Preston Road
 Suite 800
 City Dallas State TX Zip Code 75252-5645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ovation Health & Life Services, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **956.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR437588912667
 Amount of Each Receipt this Period **85.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Doris WALLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1778 N. Plano Rd.
 Suite 310
 City Richardson State TX Zip Code 75081-1958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan-American Benefits Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **462.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR437591512667
 Amount of Each Receipt this Period **42.00**
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. Judith L. ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 10071
 City Tyler State TX Zip Code 75711-0071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CFG Insurance Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **495.00**

Date of Receipt **11 / 30 / 2015**
Transaction ID : PR437594112667
 Amount of Each Receipt this Period **63.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	190.00
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 158 OF 178
(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 (Last, First, Middle Initial)
A. Ryan R. Swinton

Mailing Address 7101 S. 82 St.

City Lincoln State NE Zip Code 68516-6584

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

Name of Employer Midlands Financial Benefits Occupation Broker

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
 11 / 30 / 2015
Transaction ID : PR437594912667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Andrea M. BLOCK

Mailing Address PO Box 1809

City Candler State NC Zip Code 28715-1809

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

Name of Employer Insurance Specialties, Inc. Occupation 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
 11 / 30 / 2015
Transaction ID : PR437596212667

Amount of Each Receipt this Period
20.00

Memo Item

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Patrick Burns

Mailing Address 5653 Maxwellton Road

City Oakland State CA Zip Code 94618-2654

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

Name of Employer Burns Employee Benefits Insurance Serv Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437600512667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 159 OF 178
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Eugene STARKS
Full Name (Last, First, Middle Initial)

Mailing Address 613 Crescent Circle
Suite 201

City State Zip Code
Ridgeland MS 39157-8686

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

Name of Employer Occupation
Benefit Administration Services, Ltd. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2129.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437603112667

Amount of Each Receipt this Period
220.00

Memo Item

P/R Deduction (\$170.00 Monthly)

B. George WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 4109 Woodway Dr.

City State Zip Code
Monroe LA 71201-2218

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

Name of Employer Occupation
Financial Planning Resources Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437605712667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Brian HANBY
Full Name (Last, First, Middle Initial)

Mailing Address 662 East 700 North

City State Zip Code
Payson UT 84651-1500

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

Name of Employer Occupation
Hanby&Associates Insurance Agency, Inc Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437606512667

Amount of Each Receipt this Period
25.00

Memo Item

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 160 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Andrew M. LaRocco
Full Name (Last, First, Middle Initial)

Mailing Address 5880 Live Oak Parkway, # 230

City Norcross State GA Zip Code 30093-1740

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

Name of Employer The LaRocco Companies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437640912667

Amount of Each Receipt this Period 40.00

Memo Item

P/R Deduction (\$40.00 Monthly)

B. Steven ISRAEL
Full Name (Last, First, Middle Initial)

Mailing Address 4204 Manor Forest Trail

City Boynton Beach State FL Zip Code 33436-8851

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

Name of Employer S. Florida Affiliated Health Insurers, Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 459.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437654412667

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

C. Blake Izatt
Full Name (Last, First, Middle Initial)

Mailing Address 655 East Medical Drive Suite 102

City Bountiful State UT Zip Code 84010-5170

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

Name of Employer RBI Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437655512667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 112.00

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 161 OF 178
(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 (Last, First, Middle Initial)
A. Mark Rose

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 The Partners Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437657712667

Amount of Each Receipt this Period
170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Dominic SICILIANO

Mailing Address 4500 Cascade Road SE Suite 106

City Grand Rapids State MI Zip Code 49546-3665

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

Name of Employer Benefit Profiles, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437669512667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Marcie STROUSE

Mailing Address 1501 Ingersoll Ave
Ste 200

City Des Moines State IA Zip Code 50309-3102

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

Name of Employer Prisma Strategies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437683112667

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 242.00

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 162 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Dianne M. KELLEY
Full Name (Last, First, Middle Initial)

Mailing Address 7320 N La Cholla Blvd.
Suite 154-219

City Tucson State AZ Zip Code 85741-2309

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

Name of Employer Sandbrook Benefits Group, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437684512667

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Arthur GRANADO
Full Name (Last, First, Middle Initial)

Mailing Address 418 Peoples, # 505

City Corpus Christi State TX Zip Code 78401-2350

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

Name of Employer The Granado Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437693212667

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Heidi Michaels MICHAELS
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Wayzata Blvd., # 700

City Minneapolis State MN Zip Code 55426-1751

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

Name of Employer Dyste Williams Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437693512667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	165.00
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 163 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jeff Cloer
Full Name (Last, First, Middle Initial)

Mailing Address 295 East Palmer Street

City State Zip Code
Franklin NC 28734-3049

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

Name of Employer Occupation
Wayah Insurance Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437699012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

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

Mailing Address 901 Via Piemonte

City State Zip Code
Ontario CA 91710

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

Name of Employer Occupation
Trinity Financial Partners Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
999.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437705612667

Amount of Each Receipt this Period
112.00

Memo Item

P/R Deduction (\$112.00 Monthly)

C. Penny E. NIKEL
Full Name (Last, First, Middle Initial)

Mailing Address 917 S Main St., Ste 200

City State Zip Code
Longmont CO 80501-6400

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

Name of Employer Occupation
Nikel Insurance Associates LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437728912667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	172.00
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 164 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Ernest BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 5121 69th St., A9A

City Lubbock State TX Zip Code 79424-1631

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

Name of Employer Berry Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437737412667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Teresa CONTO
Full Name (Last, First, Middle Initial)

Mailing Address 15800 Crabbs Branch Way #350

City Rockville State MD Zip Code 20855-2697

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

Name of Employer Gallagher Benefit Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1995.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437740812667

Amount of Each Receipt this Period 170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

C. Leslie A. WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 2295 Hilltop Drive Suite 5

City Redding State CA Zip Code 96002-0515

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

Name of Employer Leslie A. Williams Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437742912667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 165 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Mike Osborne
Full Name (Last, First, Middle Initial)

Mailing Address 1308 Woodmanor Dr,

City Raleigh State NC Zip Code 27614-9055

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

Name of Employer Osborne Insurance Services, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437743712667

Amount of Each Receipt this Period 25.00

Memo Item

P/R Deduction (\$25.00 Monthly)

B. Tommy ABNEY
Full Name (Last, First, Middle Initial)

Mailing Address 113 Hereford Drive

City Tupelo State MS Zip Code 38804-9104

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

Name of Employer The Bottrell Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437745812667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Les Perlson
Full Name (Last, First, Middle Initial)

Mailing Address 250 Crossways Park Dr

City Woodbury State NY Zip Code 11797-2015

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

Name of Employer CB Planning Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437767512667

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 166 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John P. Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 8414 N. Wall Street
Ste C

City Spokane State WA Zip Code 99208-6161

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

Name of Employer IFS Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437775812667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Kareim R. CADE
Full Name (Last, First, Middle Initial)

Mailing Address 28411 Northwestern Hwy., Ste 950

City Southfield State MI Zip Code 48034-5515

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

Name of Employer Great Lakes Benefit Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437778612667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Julie HULSEY
Full Name (Last, First, Middle Initial)

Mailing Address 6601 I-40 West, Ste. 1
PO Box 32015

City Amarillo State TX Zip Code 79120-2015

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

Name of Employer Insurance Professionals Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt
11 / 30 / 2015
Transaction ID : PR437785812667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 167 OF 178
(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 (Last, First, Middle Initial)
A. Gregory J. SCHELL

Mailing Address 545 South Third Street

City Louisville State KY Zip Code 40202-1935

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

Name of Employer Greater Louisville Association of Heal Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437797612667

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Michele Gasparre

Mailing Address 2A Hardscrabble Road

City North Salem State NY Zip Code 10560-1014

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

Name of Employer Meridian Benefits Consulting Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437807412667

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Liz TAGGART

Mailing Address 8530 Belnor Dr.

City Cicero State NY Zip Code 13039-8845

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

Name of Employer United Healthcare Medicare Solutions Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt **11 / 30 / 2015**

Transaction ID : PR437825112667

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **157.00**

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 168 OF 178
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Debbie R. HEDIGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 N Tampa St
 Suite 1900
 City Tampa State FL Zip Code 33602-4776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lykes Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437852412667
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Suzanne KOLTERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 344 Main Street
 PO Box 426
 City Seward State NE Zip Code 68434-2117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kolterman Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437855212667
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

C. Cathy LITTLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1145 2nd Street
 #A-269
 City Brentwood State CA Zip Code 94513-2292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Essential Exchange Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 11 / 30 / 2015
Transaction ID : PR437855612667
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 112.00
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 169 OF 178
(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

A. Sher Sparano
 Full Name (Last, First, Middle Initial)
 Mailing Address 70-20 108th St, #5-0
 City State Zip Code
 Forest Hills NY 11375-4449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Benefits Advisory Service Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437859412667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Mike EMIDY
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 2021
 City State Zip Code
 Ridgeland MS 39158-2021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Colonial Life Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR437878312667
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. LYNDA L. BERRYHILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12600 Arrowhead Dr
 City State Zip Code
 Oklahoma City OK 73120-8825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired 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
 11 / 30 / 2015
Transaction ID : PR437987412667
 Amount of Each Receipt this Period
 20.00
 Memo Item
 P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 170 OF 178
(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 (Last, First, Middle Initial)
A. Kenneth G. Penn

Mailing Address 500 East Main Street
Suite 700-CS

City Norfolk State VA Zip Code 23510-2205

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

Name of Employer ChamberSolutions Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR438401512667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. JAMES H HISSONG

Mailing Address 8401 Widmer Rd

City Lenexa State KS Zip Code 66215-5416

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

Name of Employer Jim Hissong Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR439660012667

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Jessica Fulginiti WALTMAN

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 Forward Health Consulting Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : PR470100112667

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	27530.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

Transaction ID : 9872306

Amount of Each Disbursement this Period

111.56

Memo Item
Credit Card Fees

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Way

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2015			

Transaction ID : 9872307

Amount of Each Disbursement this Period

391.80

Memo Item
Credit Card Fees

Full Name (Last, First, Middle Initial)

C. PayPal

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

Transaction ID : 9872308

Amount of Each Disbursement this Period

730.87

Memo Item
Credit Card Fees

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

1234.23

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

1234.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Austin Scott For Congress Inc

Mailing Address PO Box 2530

City Tifton State GA Zip Code 31793

Purpose of Disbursement
11/2 Lunch

011

Category/
Type

Candidate Name

James Scott

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

Transaction ID : 9862998

Amount of Each Disbursement this Period

1000.00

Memo Item
11/2 Lunch

Full Name (Last, First, Middle Initial)

B. Joe Wilson For Congress Committee

Mailing Address PO Box 2145

City West Columbia State SC Zip Code 29171

Purpose of Disbursement
11/3 Lunch

011

Category/
Type

Candidate Name

Rep. Joe Wilson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

Transaction ID : 9863026

Amount of Each Disbursement this Period

1000.00

Memo Item
11/3 Lunch

Full Name (Last, First, Middle Initial)

C. Mccaul For Congress, Inc

Mailing Address 815-A Brazos St
Pmb 230

City Austin State TX Zip Code 78701

Purpose of Disbursement
11/12 Local Event

011

Category/
Type

Candidate Name

Rep. Michael McCaul

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2015			

Transaction ID : 9863037

Amount of Each Disbursement this Period

500.00

Memo Item
11/12 Local Event

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

2500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
12/4 Weekend Retreat

Category/
Type

Candidate Name

Rep. Richard Neal

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

/ /

Transaction ID : 9863309

Amount of Each Disbursement this Period

Memo Item
12/4 Weekend Retreat

Full Name (Last, First, Middle Initial)

B. Luke Messer For Congress

Mailing Address P.O. Box 917

City Shelbyville State IN Zip Code 46176

Purpose of Disbursement
Local 11/20 Breakfast

Category/
Type

Candidate Name

Allen Messer

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 06

Date of Disbursement

/ /

Transaction ID : 9863413

Amount of Each Disbursement this Period

Memo Item
Local 11/20 Breakfast

Full Name (Last, First, Middle Initial)

C. Cathy McMorris Rodgers For Congress

Mailing Address Box 137

City Spokane State WA Zip Code 99210

Purpose of Disbursement
11/17 Dinner

Category/
Type

Candidate Name

McMorris Rodgers Cathy

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

/ /

Transaction ID : 9863973

Amount of Each Disbursement this Period

Memo Item
11/17 Dinner

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ami Bera For Congress

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement
11/18 Breakfast

011
Category/
Type

Candidate Name

Amerish Bera

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2015

Transaction ID : 9863974

Amount of Each Disbursement this Period

3000.00

Memo Item
11/18 Breakfast

Full Name (Last, First, Middle Initial)

B. Mckinley For Congress

Mailing Address PO Box 642

City Morgantown State WV Zip Code 26507

Purpose of Disbursement
10/22 Lunch

011
Category/
Type

Candidate Name

David McKinley

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WV District: 01

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2015

Transaction ID : 9863998

Amount of Each Disbursement this Period

1000.00

Memo Item
10/22 Lunch

Full Name (Last, First, Middle Initial)

C. Kevin Mccarthy For Congress

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement
11/20-11/21 Weekend

011
Category/
Type

Candidate Name

Kevin McCarthy

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 22

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2015

Transaction ID : 9863999

Amount of Each Disbursement this Period

4800.00

Memo Item
11/20-11/21 Weekend

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

8800.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Katko For Congress

Mailing Address PO Box 133

City State Zip Code
Camillus NY 13031

Purpose of Disbursement
11/16 Dinner

Category/
Type

Candidate Name
Rep. John Katko

Office Sought: House
 Senate
 President
State: NY District: 24

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 9864050

Amount of Each Disbursement this Period

Memo Item
11/16 Dinner

Full Name (Last, First, Middle Initial)

B. Tony Cardenas For Congress

Mailing Address 3700 Wilshire Blvd Suite 1050-B

City State Zip Code
Los Angeles CA 90010

Purpose of Disbursement
12/1 Lunch

Category/
Type

Candidate Name
Rep. Tony Cardenas

Office Sought: House
 Senate
 President
State: CA District: 29

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 9864051

Amount of Each Disbursement this Period

Memo Item
12/1 Lunch

Full Name (Last, First, Middle Initial)

C. Castor For Congress

Mailing Address 301 W Platt Street, #385

City State Zip Code
Tampa FL 33606

Purpose of Disbursement
12/1 Dinner

Category/
Type

Candidate Name
Kathy Castor

Office Sought: House
 Senate
 President
State: FL District: 11

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 9866222

Amount of Each Disbursement this Period

Memo Item
12/1 Dinner

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bill Nelson For U S Senate

Mailing Address 972 W Whitmire Drive

City Melbourne State FL Zip Code 32935

Purpose of Disbursement
12/3 Breakfast

011

Candidate Name
Bill Nelson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 20 / 2015

Transaction ID : 9866223

Amount of Each Disbursement this Period

1000.00

Memo Item
12/3 Breakfast

Full Name (Last, First, Middle Initial)

B. Himes For Congress

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement
11/30 Dinner

011

Candidate Name
Rep. Jim Himes

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Convention2016

State: CT District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 20 / 2015

Transaction ID : 9866555

Amount of Each Disbursement this Period

1500.00

Memo Item
11/30 Dinner

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

2500.00

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

29300.00