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2004 MAR 19 A 10:52

CHARLES H. BELL, JR.  
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March 16, 2004

Public Records Office  
 Federal Election Commission  
 999 E Street, NW  
 Washington, D.C. 20463

Dear Filing Officer:

Please find enclosed for filing the original and one copy of:

Form 1\_\_\_

Form 2\_\_\_

Form 3\_\_\_

Form 3X X

for Health Net, Inc. Political Action Committee for the period 02/01/04 - 02/29/04.

Please return an endorsed filed copy in the enclosed self addressed envelope for our records.

Very truly yours,

*Thomas W. Hiltachk*

Thomas W. Hiltachk  
 Assistant Treasurer

MAR 19 A 10:52

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For Other Than An Authorized Committee

Office Use Only

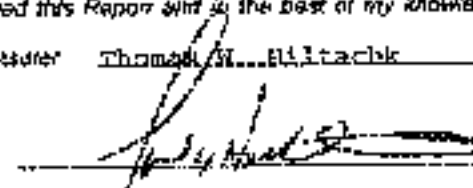
1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **12FE4ME**  
 Health Net, Incorporated Political Action Committee

ADDRESS (number and street) **21650 Oxnard Street, 25th Floor**  
 Check if different than previously reported. (ACC) **Woodland Hills CA 91367**

2. **FEC IDENTIFICATION NUMBER** **C00250709** **CITY** **STATE** **ZIP CODE**  
 3. **IS THIS REPORT**  **NEW (N)**  **OR**  **AMENDED (A)**

4. **TYPE OF REPORT (Choose One)**  
 (a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
 (b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11)   
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12)   
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)   
 (c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
 Election on: \_\_\_\_\_ in the State of \_\_\_\_\_  
 (d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
 Election on: \_\_\_\_\_ in the State of \_\_\_\_\_

5. **Covering Period** 02/01/2004 through 02/29/2004

I certify that I have examined this Report and in the best of my knowledge and belief it is true, correct and complete.  
 Type or Print Name of Treasurer **Thomas W. Blittack**  
 Signature of Treasurer  Date **03/13/2004**

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 02/2003)

Page 2

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

Report Covering the Period: From 02 01 2004 To 02 29 2004

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2004		25,628.60
	(b) Cash on Hand at Beginning of Reporting Period	28,264.60	
	(c) Total Receipts (from Line 19)	2,821.00	5,457.00
	(d) Subtract (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	31,085.60	31,085.60
7.	Total Disbursements (from Line 31)	3,500.00	3,500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27,585.60	27,585.60
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20462

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Revised 02/2003)

Page 3

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

Report Covering the Period: From: 02 01 2004 To: 02 29 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributors (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1,300.00	
(ii) Unitemized .....	1,521.00	
(i) TOTAL (add Lines 11(a)(i) and (ii)) .....	2,821.00	5,457.00
(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)(i), (b), and (c)) (Carry Totals to Line 38, page 6) .....	2,821.00	5,457.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Nonfederal 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, 17, and 18(c)) .....	2,821.00	5,457.00
20. Total Federal Receipts (Subtract Line 18(c) from Line 19) .....	2,821.00	5,457.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 02/2008)

Page 4

B. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(b) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(c) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,500.00	3,500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. 5441a(d)) (see Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(c) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. 5431(2))		
(a) Allocated Federal Election Activity (from Schedule H5)		
(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(c), and 30(c))	3,500.00	3,500.00
32. Total Federal Disbursements (subtract Line 24(a)(i) and Line 30(a)(i) From Line 31)	3,500.00	3,500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 02/2003)

Page 5

III. Net Contributions / Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
31. Total Contributions (other than loans) (from line 11 (c), page 3).....	2,621.00	5,457.00
34. Total Contribution Refunds (from line 20(d)).....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 31).....	2,621.00	5,457.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
37. Offset in Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 38 from Line 36)..... ▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 1 OF 1  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (in Full)  
Health Net, Incorporated Political Action Committee

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

Mailing Address  
2121 Burbank Blvd.  
City: Woodland Hills, CA 91367 State: CA Zip Code: 91367

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: Chief Sales Officer

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 200.00

Date of Receipt: 02 27 2004

Amount of Each Receipt this Period: 100.00

Is Weekly Payroll Deduction:

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

Mailing Address  
123 Technology Drive  
City: Irvine, CA 92618 State: CA Zip Code: 92618

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: Pres. Mgr & Managed Care

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 200.00

Date of Receipt: 02 27 2004

Amount of Each Receipt this Period: 100.00

Is Weekly Payroll Deduction:

Full Name (Last, First, Middle Initial)  
C. Jeffrey A. Cianciarelli

Mailing Address  
11571 Foundation Place C  
City: Rancho Conejo, CA 91270 State: CA Zip Code: 91270

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: Director Sales

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 200.00

Date of Receipt: 02 27 2004

Amount of Each Receipt this Period: 100.00

Is Weekly Payroll Deduction:

SUBTOTAL of Receipts This Page (optional) 300.00

TOTAL This Period (last page lists line number only) 300.00

Amount of Each Receipt this Period: 300.00

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

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

FOR LINE NUMBER: PAGE 2 OF 4  
(check only one)  
 11A  11B  11C  11D  
 12  13  14  15  16  17

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

NAME OF COMMITTEE (in Full)  
Health Net, Incorporated Political Action Committee

**A. Mark E. McNeill**

Full Name (Last, First, Middle Initial)  
 Mark E. McNeill

Mailing Address  
 2804 N. 40th Street #900  
 City: Phoenix, AZ 85008 State: AZ Zip Code: 85008

Date of Receipt  
 M M D D Y Y Y Y  
 02 20 2004

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: President, AZ Arizona

Amount of Each Receipt this Period: 100.00

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 100.00

2) Weekly Payroll Deduction

**B. Carol P. Rievey**

Full Name (Last, First, Middle Initial)  
 Carol P. Rievey

Mailing Address  
 24050 Diamond Street  
 City: Woodland Hills, CA 91367 State: CA Zip Code: 91367

Date of Receipt  
 M M D D Y Y Y Y  
 02 27 2004

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: Sr. Vice President, Bookkeeper

Amount of Each Receipt this Period: 200.00

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 400.00

2) Weekly Payroll Deduction

**C. Joanne Tully Steffen**

Full Name (Last, First, Middle Initial)  
 Joanne Tully Steffen

Mailing Address  
 7320 Sandy Plains Avenue  
 City: Las Vegas, NV 89131 State: NV Zip Code: 89131

Date of Receipt  
 M M D D Y Y Y Y  
 02 27 2004

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: VP Network & Delivery Sys. Manager

Amount of Each Receipt this Period: 100.00

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 200.00

2) Weekly Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... 300.00

TOTAL This Period (last page this line number only) ..... 300.00

300.00



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

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

FOR LINE NUMBER: (check only one)				PAGE <u>3</u> OF <u>4</u>	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17
<input type="checkbox"/> 15	<input type="checkbox"/> 14	<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 Net, Incorporated Political Action Committee

**A. Franklin You**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
3480 Dana Drive  
City Rancho Cordova, CA State Zip Code 95670  
FEC ID number of contributing federal political committee: C  
Name of Employer: Health Net, Inc. Occupation: VP Legal  
Receipt For:  Primary  General  Other (specify)

Date of Receipt: 02 27 2004  
Amount of Each Receipt this Period: 100.00  
Bi-Weekly Payroll Deductions: 300.00

**B. Jennifer Barbara Vargas**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
3480 Dana Drive  
City Rancho Cordova, CA State Zip Code 95670  
FEC ID number of contributing federal political committee: C  
Name of Employer: Health Net, Inc. Occupation: SVP General Manager  
Receipt For:  Primary  General  Other (specify)

Date of Receipt: 02 27 2004  
Amount of Each Receipt this Period: 100.00  
Bi-Weekly Payroll Deductions: 200.00

**C. Curtis Weston**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
21650 Oxford Street  
City Woodland Hills, CA State Zip Code 91367  
FEC ID number of contributing federal political committee: C  
Name of Employer: Health Net, Inc. Occupation: SVP General Counsel/Secy  
Receipt For:  Primary  General  Other (specify)

Date of Receipt: 02 27 2004  
Amount of Each Receipt this Period: 100.00  
Bi-Weekly Payroll Deductions: 200.00

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

300.00

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

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

FOR LINE NUMBER: PAGE 2 OF 4  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in full)  
Health Net, Incorporated Political Action Committee

**A. Michael White**  
 Full Name (Last, First, Middle Initial)  
 Date of Receipt: 02 27 2004  
 Mailing Address: 3400 Dace Drive  
 City: Rancho Cordova, CA 95619 State: Zip Code:  
 Amount of Each Receipt this Period: 100.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Health Net, Inc. Occupation: SVP Treasurer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 400.00

**B. Christopher Z. King**  
 Full Name (Last, First, Middle Initial)  
 Date of Receipt: 02 27 2004  
 Mailing Address: 2191 Burgess Blvd.  
 City: Woodland Hills, CA 91367 State: Zip Code:  
 Amount of Each Receipt this Period: 200.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Health Net of California Occupation: Executive VP, Reg. Health Plans & Sp  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 400.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Date of Receipt:  
 Mailing Address:  
 City: State: Zip Code:  
 Amount of Each Receipt this Period:  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation:  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date:

SUBTOTAL of Receipts This Page (optional) 300.00  
 TOTAL This Period (last page this line number only) 1,300.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<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"/> 21	<input type="checkbox"/> 23a	<input type="checkbox"/> 23b	<input type="checkbox"/> 25a	<input type="checkbox"/> 25b	<input type="checkbox"/> 28	<input type="checkbox"/> 30

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

NAME OF COMMITTEE (In Full)  
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial)

A. Volunteer PAC

Date of Disbursement

Month Day Year  
02 10 2004

Mailing Address

P. O. Box 1585b2

City

State

Zip Code

Kashville, TN 37215

Purpose of Disbursement

Necessary contribution

Candidate Name

Volunteer PAC

Category/Type  
011

Amount of Each Disbursement this Period

2,500.00

Office Sought

House

Senate

President

Disbursement For: 2004

Primary

General

Other (specify) ▶

State:

District:

Full Name (Last, First, Middle Initial)

B. Johnson to Congress Committee

Date of Disbursement

Month Day Year  
02 17 2004

Mailing Address

P. O. Box 1566

City

State

Zip Code

New Britain, CT 06050

Purpose of Disbursement

Necessary contribution

Candidate Name

Bazzy Johnson

Category/Type  
011

Amount of Each Disbursement this Period

1,000.00

Office Sought

House

Senate

President

Disbursement For: 2004

Primary

General

Other (specify) ▶

State: CT

District: 05

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Month Day Year

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▶

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3,500.00  
3,500.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified/Priority/Express Mail	Postmarked (P/C)
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fedex</i>	Shipping Date <i>3-17-04</i>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>fu</i> PREPARER	<i>3-19-04</i> DATE PREPARED