

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 455 Capitol Mall, Suite 801
 Check if different than previously reported. (ACC)
Sacramento CA 95814

2. **FEC IDENTIFICATION NUMBER** C00230789
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 11 02 2010 in the State of CA
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2010 through 10 13 2010

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

Type or Print Name of Treasurer Thomas W. Hiltachk

Signature of Treasurer Electronically Filed by Thomas W. Hiltachk Date 10 18 2010

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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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Health Net, Incorporated Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		135045.60
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	143870.65									
(c) Total Receipts (from Line 19)	4431.95	97257.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	148302.60	232302.60								
7. Total Disbursements (from Line 31)	0.00	84000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	148302.60	148302.60								
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 20463

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

Write or Type Committee Name
Health Net, Incorporated Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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)	4180.07	74606.65
(ii) Unitemized	251.88	22650.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4431.95	97257.00
(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)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4431.95	97257.00
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 Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4431.95	97257.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4431.95	97257.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	0.00	84000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	84000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	84000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	4431.95	97257.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4431.95	97257.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 124
(check only one)

<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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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.

Full Name (Last, First, Middle Initial)
Charles Allen

Mailing Address 2025 Aerojet

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services Occupation Chief Technology Officer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18955
 Amount of Each Receipt this Period 48.00

B.

Full Name (Last, First, Middle Initial)
Scott Armstrong

Mailing Address 21650 Oxnard Street

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation Director, Actuarial Services

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18956
 Amount of Each Receipt this Period 20.00

C.

Full Name (Last, First, Middle Initial)
Marshall Bentley

Mailing Address 180 Grand Avenue

City Oakland State CA Zip Code 94612

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

Name of Employer Health Net, Inc. Occupation VP, Legal Affairs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18957
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 93.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18955**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18956**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18957**

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

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

FOR LINE NUMBER: PAGE 9 / 124
(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. Full Name (Last, First, Middle Initial)
Ray Nan Berry

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Chief Quality Officer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18959
 Amount of Each Receipt this Period 20.00

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

Mailing Address 222 Central Park Avenue, Suite 184

City Virginia Beach State VA Zip Code 23462

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

Name of Employer Health Net Federal Services, Inc. Occupation VP, Optimization

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18961
 Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Pamela Ann Bohall

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP, Claims Admin & Enroll Svcs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18962
 Amount of Each Receipt this Period 76.92

SUBTOTAL of Receipts This Page (optional) ► 121.92

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18959**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18961**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18962**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 124
(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.

Full Name (Last, First, Middle Initial)
Terry F. Boquet

Mailing Address 2025 Aerojet Drive

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir, Finance

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18963
 Amount of Each Receipt this Period 20.00

B.

Full Name (Last, First, Middle Initial)
Shannon Borges

Mailing Address 7755 Center Avenue, Suite 700

City Huntington Beach State CA Zip Code 92647

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

Name of Employer Health Net of California Occupation Director, Sales IV

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18964
 Amount of Each Receipt this Period 15.00

C.

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

Mailing Address 21271 Burbank Blvd.

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation Director, IT Business Consulting

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18965
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18963**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18964**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18965**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 124
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Nancy P. Bushnell

Mailing Address 100 Beard Sawmill Road

City State Zip Code
Shelton CT 06484

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

Name of Employer Health Net of the Northeast, Inc. Occupation Director Medicare Integration

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: INC.A.18967

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 2107 Wilson Blvd.

City State Zip Code
Arlington VA 22201

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

Name of Employer Health Net Federal Services, Inc. Occupation Senior Medical Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt

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

Transaction ID: INC.A.18968

Amount of Each Receipt this Period
38.00

C.

Full Name (Last, First, Middle Initial)
Mary T. Buster

Mailing Address 2025 Aerojet Drive

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Inc. Occupation Director Referral & Auth Ops

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt

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

Transaction ID: INC.A.18969

Amount of Each Receipt this Period
19.00

SUBTOTAL of Receipts This Page (optional) ► **77.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18967**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18968**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18969**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert Bythewood

Mailing Address PCS Box 8023

City State Zip Code
Cherry Point NC 28533

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

Name of Employer Health Net Federal Services, Inc. Occupation Director Field Optimization

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.18970

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Christopher F. Cameron

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation Enterprise Portfolio Management Office

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.18971

Amount of Each Receipt this Period
10.00

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

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP & CFO, Federal Services

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19098

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **35.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18970**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18971**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19098**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joseph Capezza

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation EVP & CFO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt

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

Transaction ID: INC.A.18973

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Sherman R. Card

Mailing Address 11971 Foundation Place, Suite C

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Health Net of California, Inc. Occupation Director, Claims

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: INC.A.18974

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Thomas Carrato

Mailing Address 2107 Wilson Blvd., Suite 900

City State Zip Code
Arlington VA 22201

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

Name of Employer Health Net Federal Services Occupation Program Officer - DoD

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: INC.A.18975

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18973**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18974**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18975**

**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 / 124
	<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 Net, Incorporated Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lauren M. Casalveri	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address One Far Mill Crossing	Transaction ID: INC.A.18976
	City State Zip Code Shelton CT 06484	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation VP Process Improvement Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 760.00	

B.	Full Name (Last, First, Middle Initial) Julia Ann Ceballos	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 13221 SW 68th Parkway	Transaction ID: INC.A.18977
	City State Zip Code Tigard OR 97223	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net of Oregon Occupation VP, Provider Network Mgt. Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Daniel C. Chick	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 1201 K Street, Suite 1815	Transaction ID: INC.A.18978
	City State Zip Code Sacramento CA 95814	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net of California, Inc. Occupation Director, Government Affairs Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 580.00	

SUBTOTAL of Receipts This Page (optional)	97.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18976**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18977**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18978**

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

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

FOR LINE NUMBER: PAGE 27 / 124
(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

A. Full Name (Last, First, Middle Initial)
Beverly A. Chinello

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Writer/ Editor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: INC.A.18979
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Jeffrey A. Cinciarelli

Mailing Address 11971 Foundation Place C

City Rancho Cordova State CA Zip Code 95670

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

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

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: INC.A.18980
 Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Patricia Clarey

Mailing Address 21650 Oxnard Street
22nd Floor

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation SVP, Chief Regulatory & External Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: INC.A.18981
 Amount of Each Receipt this Period 38.00

SUBTOTAL of Receipts This Page (optional) ► 98.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18979**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18980**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18981**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sam Cole

Mailing Address 11971 Foundation Place, Suite C

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net of California Occupation Director of Sales IV

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.18983

Amount of Each Receipt this Period
 15.00

B.

Full Name (Last, First, Middle Initial)
Kristina A Cournoyer

Mailing Address 1230 W. Washington Street

City Tempe State AZ Zip Code 85281

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

Name of Employer Health Net, Inc. Occupation VP, Medicare Operations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.18985

Amount of Each Receipt this Period
 50.00

C.

Full Name (Last, First, Middle Initial)
Robert F. Crawford, Jr.

Mailing Address 1230 West Washington Street

City Tempe State AZ Zip Code 85281

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

Name of Employer Health Net, Inc. Occupation Contracts Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.18986

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional) ► 85.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18983**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18985**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18986**

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

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

FOR LINE NUMBER: PAGE 33 / 124
(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. Full Name (Last, First, Middle Initial)
Diane Dunphy
Mailing Address 2370 Kerner Blvd.
City San Raphael State CA Zip Code 94901
FEC ID number of contributing federal political committee. **C**
Name of Employer Mental Health Network Occupation VP, Operations
Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00
Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18987
Amount of Each Receipt this Period 19.00

B. Full Name (Last, First, Middle Initial)
Joanne Dunsmore
Mailing Address 2107 Wilson Blvd.
City Arlington State VA Zip Code 22201
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services, Inc. Occupation Director, Field Optimization
Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18988
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Tim Duval
Mailing Address 12033 Foundation Place
City Rancho Cordova State CA Zip Code 95670
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services Occupation Chief Technology Officer
Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 960.00
Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18989
Amount of Each Receipt this Period 48.00

SUBTOTAL of Receipts This Page (optional) ► 87.00
TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18987**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18988**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18989**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 124
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial) Daria A. Eppley		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 2025 Aerojet Road		Transaction ID: INC.A.18992
City Rancho Cordova	State CA	Zip Code 95742
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net Federal Services, Inc.	Occupation VP, Access to Data	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) David R. Feniger		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 2025 Aerojet Road		Transaction ID: INC.A.18993
City Rancho Cordova	State CA	Zip Code 95742
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Health Net, Inc.	Occupation Executive Counsel	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

C.

Full Name (Last, First, Middle Initial) Cathleen F. Fischbach		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 2025 Aerojet Drive		Transaction ID: INC.A.18994
City Rancho Cordova	State CA	Zip Code 95742
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Health Net Inc.	Occupation Dir. Claims Quality Mgmt.	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	112.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18992**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18993**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18994**

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

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

FOR LINE NUMBER: PAGE 39 / 124
(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. Full Name (Last, First, Middle Initial)
David J. Friedman

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP, State Health Programs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19093
 Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
David S. Frost

Mailing Address 222 Central Park Avenue, Suite 184

City Virginia Beach State VA Zip Code 23462

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

Name of Employer Health Net Federal Services, Inc. Occupation Medical Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18995
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Maryann Gaynor

Mailing Address One Far Mill Crossing

City Shelton State CT Zip Code 06484

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

Name of Employer Health Net, Inc. Occupation VP, Client Services - HPD

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18996
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19093**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18995**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.18996**

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

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

FOR LINE NUMBER: PAGE 42 / 124
(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. Full Name (Last, First, Middle Initial)
Jenny Geraty
Mailing Address 2025 Aerojet Drive
City Rancho Cordova State CA Zip Code 95742
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services, Inc. Occupation Director Performance Development & Sup
Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00
Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18997
Amount of Each Receipt this Period 19.00

B. Full Name (Last, First, Middle Initial)
Paul A. Gilbertson
Mailing Address 2025 Aerojet Road
City Rancho Cordova State CA Zip Code 95742
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services, Inc. Occupation Operations Officer
Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.18998
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Robert R. Green
Mailing Address 2025 Aerojet Road
City Rancho Cordova State CA Zip Code 95742
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Net Federal Services, Inc. Occupation Director, Finance
Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00
Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19000
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ▶ 129.00
TOTAL This Period (last page this line number only) ▶

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18997**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.18998**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19000**

**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 / 124
	<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 Net, Incorporated Political Action Committee

A.	Full Name (Last, First, Middle Initial) Caroline F. Hall		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 2107 Wilson Blvd.		Transaction ID: INC.A.19001		
	City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net Federal Services, Inc.		Occupation Director, Government Contacts		
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Anne Hanlon		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 180 Grand Avenue		Transaction ID: INC.A.19002		
	City Oakland	State CA	Zip Code 94612	Amount of Each Receipt this Period 38.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net of California		Occupation Director of Sales IV		
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.00			

C.	Full Name (Last, First, Middle Initial) Juanell Hefner		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 11031 Sun Center Drive		Transaction ID: INC.A.19004		
	City Rancho Cordova	State CA	Zip Code 95670	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MHN - Mental Health Network		Occupation Chief Customer Services Officer		
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	▶	88.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19001**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19002**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19004**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial) Betty Henry		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 21650 Oxnard Street		Transaction ID: INC.A.19006
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Health Net, Inc.	Occupation VP, Internal Communications	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.

Full Name (Last, First, Middle Initial) Nicolas Hiner		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 950 N. Finance Center Drive, Suite		Transaction ID: INC.A.19008
City Tucson	State AZ	Zip Code 85710
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.00
Name of Employer Health Net Pharmacy Services	Occupation Director, Pharmacy	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

C.

Full Name (Last, First, Middle Initial) Judith W. Ho		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 180 Grand Avenue		Transaction ID: INC.A.19009
City Oakland	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer Health Net, Inc.	Occupation Vice President, Actuarial Services	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	73.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19006**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19008**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19009**

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

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

FOR LINE NUMBER: PAGE 51 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Donna Hoffmeier

Mailing Address 2107 Wilson Blvd., Suite 900

City State Zip Code
Arlington VA 22201

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

Name of Employer Health Net Federal Services, Inc. Occupation Program Officer - VA Services

Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 760.00

Date of Receipt

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

Transaction ID: INC.A.19010

Amount of Each Receipt this Period

38.00

B.

Full Name (Last, First, Middle Initial)
Celeste Hornbeck

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Director, Business Intelligence

Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt

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

Transaction ID: INC.A.19012

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Geoffrey S. Inenaga

Mailing Address 10834 International Drive

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Health Net Federal Services, Inc. Occupation Director, IT Business Consulting

Receipt For: 2010
 Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt

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

Transaction ID: INC.A.19013

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

58.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19010**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19012**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19013**

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

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

FOR LINE NUMBER: PAGE 54 / 124
(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.

Full Name (Last, First, Middle Initial)
Diane C. Iverson

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net, Inc. Occupation VP, Operations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19014
Amount of Each Receipt this Period 20.00

B.

Full Name (Last, First, Middle Initial)
Philip E. Jacobson, Jr.

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir. Field Operations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19015
Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Elita Johnston

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Director, Case Management

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19016
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 55.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19014**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19015**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19016**

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

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

FOR LINE NUMBER: PAGE 57 / 124
(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. Full Name (Last, First, Middle Initial)
Scott Kelly

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net Federal Services, Inc. Occupation Chief Government Program Officer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3620.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19017

Amount of Each Receipt this Period
190.00

B. Full Name (Last, First, Middle Initial)
Randal Kirchner

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP Program Support

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19018

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Joseph K. Klinger

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation Executive Counsel

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19019

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional) ► 278.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19017**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19018**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19019**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Anthony J. Koelker

Mailing Address 2107 Wilson Blvd.

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Health Net Federal Services VP, Provider Network Management

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID: INC.A.19021

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
David Kosterman

Mailing Address 11971 Foundation Place, Suite C

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Occupation
Health Net, Inc. Dir, IT Business Consulting

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: INC.A.19022

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Arthur H. Kummer

Mailing Address 21281 Burbank Blvd.

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Occupation
Health Net Inc. VP, Medicare Programs

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: INC.A.19023

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19021**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19022**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19023**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Darryl T. Landahl

Mailing Address 1230 W. Washington Street

City State Zip Code
Tempe AZ 85281

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

Name of Employer Health Net, Inc. Occupation Executive Counsel

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: INC.A.19024

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Karen M. Ledsky

Mailing Address 222 Central Park Avenue, Suite 184

City State Zip Code
Virginia Beach VA 23462

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir. of Provider Network Mgmt.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt

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

Transaction ID: INC.A.19026

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Sharon Lewis

Mailing Address 3400 Data Drive

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation VP Org. Effectiveness

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: INC.A.19027

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **50.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19024**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19026**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19027**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 / 124
	(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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joyce Li

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Chief Healthcare Solutions Ofcr

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt

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

Transaction ID: INC.A.19028

Amount of Each Receipt this Period
80.00

B.

Full Name (Last, First, Middle Initial)
Fidel G. Ligsay

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation VP Call Centers

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: INC.A.19029

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Lori A. Long

Mailing Address 2107 Wilson Blvd.

City State Zip Code
Arlington VA 22201

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

Name of Employer Health Net Occupation Director, Public Policy & Government P

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt

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

Transaction ID: INC.A.19030

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional) ► **138.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19028**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19029**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19030**

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

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

FOR LINE NUMBER: PAGE 69 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Denise Louie

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Occupation
Health Net of California Senior Counsel

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID: INC.A.19031

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Kevin R. Low

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Occupation
Health Net, Inc. Asst. Treasurer and Director

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
200.00

Date of Receipt

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

Transaction ID: INC.A.19032

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Dorothy C. Lucas

Mailing Address One Far Mill Crossing

City State Zip Code
Shelton CT 06484

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

Name of Employer Occupation
Health Net, Inc. VP, Finance

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
600.00

Date of Receipt

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

Transaction ID: INC.A.19033

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19031**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19032**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19033**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 / 124						
	(check only one)							
	<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

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

A.	Full Name (Last, First, Middle Initial) Lisa Maher		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 2025 Aerojet Drive		Transaction ID: INC.A.19034		
	City Rancho Cordova	State CA	Zip Code 95742	Amount of Each Receipt this Period 19.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net Federal Services Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Director, Legal & Reg Compliance Aggregate Year-to-Date ▼ 380.00			

B.	Full Name (Last, First, Middle Initial) Susan Mandry		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 2107 Wilson Blvd., Suite 900		Transaction ID: INC.A.19035		
	City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net Federal Services Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation VP Beneficiary & Government Regulations Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) Karin Mayhew		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 21650 Oxnard Street		Transaction ID: INC.A.19036		
	City Woodland Hills	State CA	Zip Code 91367	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net, Inc. Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation SVP Organization Effectiveness Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	119.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19034**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19035**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19036**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Candace Maynard

Mailing Address 3131 Camino Del Rio

City State Zip Code
San Diego CA 92108

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

Name of Employer Occupation
Health Net of California Director, Case Management

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: INC.A.19037

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Peter McLaughlin

Mailing Address 2107 Wilson Blvd.

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Health Net Federal Services, Inc. VP, Program Ops & DOD Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1538.40

Date of Receipt

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

Transaction ID: INC.A.19038

Amount of Each Receipt this Period

76.92

C.

Full Name (Last, First, Middle Initial)
David M. Meadows

Mailing Address 11931 Foundation Place D

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Occupation
Health Net of California Vice President, California Health Plan

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
480.00

Date of Receipt

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

Transaction ID: INC.A.19039

Amount of Each Receipt this Period

24.00

SUBTOTAL of Receipts This Page (optional)

125.92

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19037**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19038**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19039**

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

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

FOR LINE NUMBER: PAGE 78 / 124
(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. Full Name (Last, First, Middle Initial)
Kevin Meier

Mailing Address 13221 SW 68th Parkway

City State Zip Code
Tigard OR 97223

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

Name of Employer Health Net of Oregon Occupation Director Sales II

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19040

Amount of Each Receipt this Period
20.00

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

Mailing Address 2025 Aerojet Drive

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation VP, Controller

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19041

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Suzzanne Miracle

Mailing Address 10540 White Rock Road, Suite 280

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Health Net Pharmacy Services Occupation Director, Pharmacy

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19042

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **55.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19040**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19041**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19042**

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

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

FOR LINE NUMBER: PAGE 81 / 124
(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. Full Name (Last, First, Middle Initial)
Kimberly A. Morgan

Mailing Address 2025 Aerojet Road

City Rancho Cordova State Ca Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP Healthcare Services

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt: 10 / 01 / 2010
Transaction ID: INC.A.19045
 Amount of Each Receipt this Period 19.23

B. Full Name (Last, First, Middle Initial)
Francene S. Mori

Mailing Address 21281 Burbank Blvd.

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net of California Occupation VP, Business Support

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: INC.A.19046
 Amount of Each Receipt this Period 38.00

C. Full Name (Last, First, Middle Initial)
Adrienne Biggert Morrell

Mailing Address 2107 Wilson Blvd.

City Arlington State VA Zip Code 22201

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

Name of Employer Health Net, Inc. Occupation VP Government Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: INC.A.19047
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 107.23

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19045**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19046**

Payroll Deduction.

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19047**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bret A. Morris

Mailing Address 1230 West Washington Street

City State Zip Code
Tempe AZ 85281

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

Name of Employer Occupation
Health Net, Inc. President - Health Net of Arizona

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: INC.A.19048

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Lawrence Naehr

Mailing Address 2107 Wilson Blvd.

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Health Net Federal Services, Inc. VP, Optimization

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: INC.A.19049

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Gary Neiman

Mailing Address 11031 Sun Center Drive

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Occupation
Health Net, Inc. VP, Customer Contact Centers

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
320.00

Date of Receipt

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

Transaction ID: INC.A.19050

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

166.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19048**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19049**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19050**

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

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

FOR LINE NUMBER: PAGE 87 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jennifer Nuovo

Mailing Address 11931 Foundation Place, Suite D

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net of California Occupation Senior Medical Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19051

Amount of Each Receipt this Period
 38.00

B.

Full Name (Last, First, Middle Initial)
Nathan A. Nygaard

Mailing Address 1300 Division Road, Suite 301

City West Warwick State RI Zip Code 02893

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

Name of Employer Health Net Federal Services Occupation VP Optimization

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19052

Amount of Each Receipt this Period
 25.00

C.

Full Name (Last, First, Middle Initial)
Kathy A. O'Brien

Mailing Address 2015 B Aerojet

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net, Inc. Occupation VP, Organization Effectiveness

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19053

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional) ▶

73.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19051**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19052**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19053**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 124
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Carolyn Pace

Mailing Address 1230 W. Washington Street

City State Zip Code
Tempe AZ 85281

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

Name of Employer Health Net of Arizona Occupation VP, Provider Network Mgt.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt

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

Transaction ID: INC.A.19054

Amount of Each Receipt this Period
45.00

B.

Full Name (Last, First, Middle Initial)
Dawn Parker

Mailing Address 1500 N. Priest Drive, Suite 114

City State Zip Code
Tempe AZ 85281

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

Name of Employer Health Net, Inc. Occupation Dir., Sales II

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt

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

Transaction ID: INC.A.19055

Amount of Each Receipt this Period
38.00

C.

Full Name (Last, First, Middle Initial)
Lynn Pettitt

Mailing Address 13221 SW 68th Parkway

City State Zip Code
Tigard OR 97223

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

Name of Employer Health Net Inc. Occupation Director Pharmacy

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt

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

Transaction ID: INC.A.19056

Amount of Each Receipt this Period
19.00

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

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19054**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19055**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19056**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kathleen Richard

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Business Planning Officer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt

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

Transaction ID: INC.A.19057

Amount of Each Receipt this Period
38.00

B.

Full Name (Last, First, Middle Initial)
Jeff W. Robertson

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Manager, Data Analysis

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

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

Transaction ID: INC.A.19058

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Charles Rose

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP & Asst. General Counsel

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt

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

Transaction ID: INC.A.19059

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **78.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19057**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19058**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19059**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 / 124
	(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 Net, Incorporated Political Action Committee

A.	Full Name (Last, First, Middle Initial) David A. Sandkuhl		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 1230 West Washington Street		Transaction ID: INC.A.19061
	City	State	Zip Code
	Tempe	AZ	85281
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Health Net of Arizona		Occupation VP, Medicare Programs	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Kelly Ann Sarabia		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 11971 Foundation Place		Transaction ID: INC.A.19062
	City	State	Zip Code
	Rancho Cordova	CA	95670
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Health Net, Inc.		Occupation Director Payroll	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) Jill C. Sax		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 21281 Burbank Blvd.		Transaction ID: INC.A.19064
	City	State	Zip Code
	Woodland Hills	CA	91367
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Health Net of California		Occupation Director Sales Ops	
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19061**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19062**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19064**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 99 / 124	
	(check only one)			
	<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 Net, Incorporated Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lori R. Scott		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 21281 Burbank Blvd.		Transaction ID: INC.A.19065		
	City Woodland Hills	State CA	Zip Code 91367	Amount of Each Receipt this Period 38.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net of California		Occupation VP, Sales Integration & Ops		
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 760.00			

B.	Full Name (Last, First, Middle Initial) Steven J. Sell		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 2370 Kerner Blvd.		Transaction ID: INC.A.19066		
	City San Rafael	State CA	Zip Code 94901	Amount of Each Receipt this Period 38.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Health Net, Inc.		Occupation President, West Region Health Plan		
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 760.00			

C.	Full Name (Last, First, Middle Initial) Ian Shaffer		Date of Receipt MM / DD / YYYY 10 / 01 / 2010		
	Mailing Address 2107 Wilson Blvd., Suite 900		Transaction ID: INC.A.19067		
	City Arlington	State VA	Zip Code 22201	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Mental Health Network		Occupation Chief Medical Officer		
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

SUBTOTAL of Receipts This Page (optional)	106.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19065**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19066**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19067**

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

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

FOR LINE NUMBER: PAGE 102 / 124
(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. Full Name (Last, First, Middle Initial)
Jeffrey Lee Shelton

Mailing Address 1201 K Street, Suite 1815

City State Zip Code
Sacramento CA 95814

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

Name of Employer Health Net, Inc. Occupation VP State Leg & Reg Compliance

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19068

Amount of Each Receipt this Period 40.00

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

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Director, Communications

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19069

Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Anju Sikka

Mailing Address 150 East 42nd Street, 26th Floor

City State Zip Code
New York NY 10165

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

Name of Employer Health Net of the North East Occupation Chief Medical Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19070

Amount of Each Receipt this Period 38.00

SUBTOTAL of Receipts This Page (optional) ► **88.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19068**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19069**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19070**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 124
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Michael P. Sobetzko

Mailing Address 21271 Burbank Blvd.

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation VP, Business Plan, Ops, Qual & Trng

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: INC.A.19071

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Gerald L. Spokes

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Dir, Strategic Sourcing

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt

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

Transaction ID: INC.A.19072

Amount of Each Receipt this Period
19.00

C.

Full Name (Last, First, Middle Initial)
Gina Stassi

Mailing Address 21281 Burbank Blvd.

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation VP Marketing & Product Development

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: INC.A.19073

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ **64.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19071**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19072**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19073**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 124

(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
W. Randall Stewart

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Occupation
Health Net, Inc. Internal Audit Officer

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1800.00

Date of Receipt

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

Transaction ID: INC.A.19074

Amount of Each Receipt this Period

90.00

B.

Full Name (Last, First, Middle Initial)
Debra Taylor

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Occupation
Health Net Federal Services, Inc. VP, Organization Effectiveness

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: INC.A.19076

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Jacqueline B. Thames

Mailing Address 950 N. Finance Center, Drive, Suit

City State Zip Code
Tucson AZ 85710

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

Name of Employer Occupation
Health Net Inc. Director, Contracts

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID: INC.A.19077

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19074**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19076**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19077**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Linda Tiano

Mailing Address One Far Mill Crossing

City State Zip Code
Shelton CT 06484

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

Name of Employer Health Net, Inc. Occupation President - Health Plan HNNE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: INC.A.19079

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Steven D. Tough

Mailing Address 2025 Aerojet Drive

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation President - Government Programs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: INC.A.19080

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Molly Tuttle

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net, Inc. Occupation Dir, Communications

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.00

Date of Receipt

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

Transaction ID: INC.A.19081

Amount of Each Receipt this Period
7.00

SUBTOTAL of Receipts This Page (optional) ► **107.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19079**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19080**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19081**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 124
(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. Full Name (Last, First, Middle Initial)
Richard A. Weirich

Mailing Address 11971 Foundation Place, Suite C

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation Director Real Estate Admin.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19083
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Kory M. Wells

Mailing Address 3458 Neeley Road

City McGuire AFB State NJ Zip Code 08641

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

Name of Employer Health Net Federal Services, Inc. Occupation Director, Field Optimization

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19084
 Amount of Each Receipt this Period 19.00

C. Full Name (Last, First, Middle Initial)
Scott M. Wert

Mailing Address 950 N Finance Center Drive, # 255/

City Tuscon State AZ Zip Code 85710

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

Name of Employer Health Net Inc. Occupation VP, Pharmacy Services

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19085
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 59.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19083**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19084**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19085**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 124
(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.

Full Name (Last, First, Middle Initial)
Robert, S. Westbrook

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP, Government Contracts

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19086
 Amount of Each Receipt this Period 20.00

B.

Full Name (Last, First, Middle Initial)
Marie Wheeler

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Director Facilities FHFS

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19087
 Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Virginia E. White

Mailing Address 10540 White Rock Road, Suite 280

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP, Operations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 01 / 2010
Transaction ID: INC.A.19088
 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 260.00

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19086**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19087**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19088**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Gay Ann Williams

Mailing Address 21650 Oxnard Street

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation VP State Leg & Reg Compliance

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt

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

Transaction ID: INC.A.19089

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Robert Willig

Mailing Address One Far Mill Crossing

City State Zip Code
Shelton CT 06484

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

Name of Employer Health Net of the North East Occupation Medical Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: INC.A.19090

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
James E. Woys

Mailing Address 2025 Aerojet Road

City State Zip Code
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation EVP & COO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4100.00

Date of Receipt

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

Transaction ID: INC.A.19091

Amount of Each Receipt this Period
205.00

SUBTOTAL of Receipts This Page (optional) ► **320.00**

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

A. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19089**

Payroll Deduction

B. Form/Schedule : **SA11AI**
Transaction ID : **INC.A.19090**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19091**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 124
(check only one)

<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 Net, Incorporated Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathryn M. Zalinsky

Mailing Address 100 Beard Sawmill road

City State Zip Code
Shelton CT 06484

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

Name of Employer Health Net of the North East
Occupation VP, Medicare/ Medicaid Programs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: INC.A.19092

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)	▶	20.00
TOTAL This Period (last page this line number only)	▶	4180.07

A. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.19092**