03/28/2008 16:49

Image# 28990715117

# **FORM 3X**

FE6AN026

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

	For O	ther Than An	Authoriz	ed Comm	ittee		Office Us	e Only	
NAME OF COMMITTEE (in full)		EC MAILING LAI		Example:If typiover the lines	ing, type				
NATIONAL ASSOCIATION	N OF HEA	ALTH UNDERWF	≀ITERS PAC	(HUPAC)					Ш
		1 1 1 1 1		<u> </u>		1 1 1		1 1 1 1 1	Ш
ADDRESS (number and street)	P. C	D. Box 7135							
Check if different									Ш
than previously reported. (ACC)	Wa	shington		1 1 1		DC	20	0044   -	لـــ
2. FEC IDENTIFICATION NU	IMBER	_	CITY 🛋			STATE	:	ZIPCODE 🛕	
C00283135			3. IS THIS REPOR		NEW (N) OR	X	AMENDED (A)		
4. TYPE OF REPORT (Choose One)	(b)	) Monthly Report Due On:	Feb 20 (M	12)	May 20 (M5)		Aug 20 (M8)	Nov 20 ( (Non-Elec Year Only	/)
(a) Quarterly Reports:		Due On:	Mar 20 (M	13)	Jun 20 (M6)	X	Sep 20 (M9)	Dec 20 ( (Non-Elec Year Only	M12)
April 15			Apr 20 (M	4)	Jul 20 (M7)		Oct 20 (M10)	Jan 31 (	,
Quarterly Report(	Q1)	(c) 12-Day		Primary (1	2P)	Gen	eral (12G)	Runoff (	12R)
July 15 Quarterly Report(	Q2)	PRE-Election				=		Transm (	
October 15 Quarterly Report(	O3)	Report for t	he:	Conventio	n (12C)	Spec	ial (12G)		
January 31 Quarterly Report(			Election on					in the State of	
July 31 Mid-Year Report(Non-elect Year Only) (MY)		(d) 30-Day Post -Elec Report for t		General (3	80G)	Rund	off (30R)	Special (	30S)
Termination Repo	ort	·	Election on				•	in the State of	
5. Covering Period C	8	01 200	7	through	n 08	31	2007		
I certify that I have examined this	Report a	and to the best of i	ny knowledg	je and belief it	is true, correct	and comp	lete.		
Type or Print Name of Treasure	r <u>Je</u>	nnifer Murphy							
Signature of Treasurer Electr	ronically F	Filed by Jennife	r Murphy			Date	03 27	2008	
NOTE : Submission of false, err	oneous, c	or incomplete infor	mation may	subject the pe	erson signing th	nis Report t	o the penalties	of 2 U.S.C 437g.	
Office Use							I	FORM 3X v. 12/2004)	

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC) <sup>®</sup> D D 0.8 0 1 2007 8.0 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 41981.92 Ž007 January 1 (b) Cash on Hand at 74543.16 Begining of Reporting Period ..... 28432.18 235520.21 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 102975.34 277502.13 6(a) and 6(c) for Column B) ..... 14998.20 189524.99 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 87977.14 87977.14 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

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

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

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

0 1 3<sup>D</sup>1 M N м м 8 0 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 127862.00 18343.00 (i) Itemized (use Schedule A) .......... 10089.18 107646.21 (ii) Unitemized ..... (iii) TOTAL (add 28432.18 235508.21 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 28432.18 235508.21 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 12.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 28432.18 235520.21 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts 28432.18 235520.21 (subtract Line 18(c) from Line 19) .....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 998.20 46795.99 Expenditures..... (c) Total Operating Expenditures 998.20 46795.99 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 14000.00 141000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 1229.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 0.00 1229.00 (add Lines 28(a), (b), and (c)) ......... 0.00 500.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 14998.20 189524.99 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 14998.20 189524.99 from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	28432.18	235508.21
34.	Total Contribution Refunds (from Line 28(d))	0.00	1229.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	28432.18	234279.21
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	998.20	46795.99
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	12.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	998.20	46783.99

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67119   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) SUZY ALBERTS			Date of Receipt
Mailing Address 20700 Civic Center	r Drive		08 01 2007
City Southfield	State MI	Zip Code 48076	Transaction ID: 2953  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10070	30.00
Name of Employer Comerica Insurance Servic- es	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) SUZY ALBERTS			Date of Receipt
Mailing Address 20700 Civic Center	r Drive		0 8 3 1 Y Y Y Y Y
City Southfield	State MI	Zip Code 48076	Transaction ID: 3023  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10070	30.00
Name of Employer Comerica Insurance Servic-	Occupation Agent	n	
es Receipt For: Primary General Other (specify)		Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) SHARON ALT			Date of Receipt
Mailing Address 6410 Southwest Bl	vd, Suite 204		08 31 2007
City Fort Worth	State TX	Zip Code 76109	Transaction ID: 3430  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70100	50.00
Name of Employer Alt Benefit Consultants, Inc	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	al)		110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 119 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KATHRYN ANDERSON Mailing Address P. O. Box 7648  City Tyler FEC ID number of contributing federal political committee.  Name of Employer Strategies In Employee Benefits, Inc. Receipt For: Primary General	State Zip Code TX 75711  C  Occupation agent  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) WILLIAM ANDERSON  Mailing Address 498 Palm Springs Dr	ive, Suite 270	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Altamonte Springs  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code FL 32701  C Occupation	Amount of Each Receipt this Period  30.00
Rogers Benefit Group  Receipt For:  Primary General  Other (specify) ▼	Marketing Representative  Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial) WILLIAM ANDERSON Mailing Address 498 Palm Springs Dr	ive, Suite 270	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Altamonte Springs  FEC ID number of contributing federal political committee.	State Zip Code FL 32701	Transaction ID: 3019 Amount of Each Receipt this Period 30.00
Name of Employer Rogers Benefit Group	Occupation  Marketing Representative	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	]
SUBTOTAL of Receipts This Page (optional)	<b>)</b>	140.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any e name and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC	)
<u>/_</u>	Full Name (Last, First, Middle Initial) ELIZABETH ASHMORE		Date of Receipt
	Mailing Address 7606 University Aven		08 01 2007
	City Lubbock	State Zip Code TX 79423	Transaction ID: 4148
	FEC ID number of contributing federal political committee.	C 79425	Amount of Each Receipt this Period  100.00
	Name of Employer Ashmore & Associates Insurance Agency Receipt For: Primary General	Occupation agent  Aggregate Year-to-Date ▼  950.00	
	Other (specify) ▼  Full Name (Last, First, Middle Initial)  ELIZABETH ASHMORE  Mailing Address 7006 University Aven		Date of Receipt
	Mailing Address 7606 University Aven	ue, Suite B	08 31 2007
	City	State Zip Code	Transaction ID: 4160
	Lubbock	TX 79423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Ashmore & Associates Insurance Agency Receipt For:  Primary  Other (specify) ▼	Occupation agent  Aggregate Year-to-Date ▼  1050.00	
	Full Name (Last, First, Middle Initial) VIRGINIA ASHTON		Date of Receipt
	Mailing Address 1900 Electric Road		08 01 2007
	City	State Zip Code	Transaction ID: 2957
	Salem FEC ID number of contributing federal political committee.	VA 24153	Amount of Each Receipt this Period  30.00
	Name of Employer Lewis-Gale Medical Center	Occupation Director of Provider Relations	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Γ	NIDTOTAL of Descints This Dave (actional)		230.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 119 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may no he name and addres	of the sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NATIONAL ASSOCIATION OF HEA	LTH UNDERWR	ITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) VIRGINIA ASHTON			Date of Receipt
Mailing Address 1900 Electric Road			08 31 2007
City	State	Zip Code	Transaction ID: 3024
<u>Salem</u>	VA	24153	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Lewis-Gale Medical Center	Occupation Director of F	Provider Relations	
Receipt For:	Aggregate Ye	ar-to-Date ▼	
Primary General Other (specify) ▼		270.00	]
Full Name (Last, First, Middle Initial) RICK BAILEY			Date of Receipt
Mailing Address 4390 Earney Road,	Suite 240		0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3025
Woodstock	GA	30188	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Rick Bailey & Company, In- c.	Occupation agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) CATHERINE BAKAMUS			Date of Receipt
Mailing Address PO Box 9			08 31 YYYY 2007
City	State	Zip Code	Transaction ID: 3123
Longview	WA	98632	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Bratrud Middleton Insuran- ce Brokers	Occupation Agent		
Receipt For:	Aggregate Ye	ar-to-Date ▼	
Primary General Other (specify) ▼		310.00	
SUBTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to ALTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David Baker Mailing Address 2646 Highway Ave City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Highland  FEC ID number of contributing federal political committee.	IN 46322	Transaction ID: 4478  Amount of Each Receipt this Period  500.00
Name of Employer Professional Claims Management, Inc. Receipt For:  Primary General Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   750.00	
Full Name (Last, First, Middle Initial)  MISTY BAKER  Mailing Address 1501 West Ave., Su	ite B	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3026
<u>Austin</u>	TX 78701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Lonestar Benefit Solutions	Occupation Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Kathryn Beals		Date of Receipt
Mailing Address 501 E Washington A	Ave	08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3183
Madison  FEC ID number of contributing federal political committee.	WI 53703	Amount of Each Receipt this Period  30.00
Name of Employer Wisconsin Manufactures & Commerce Receipt For:	Occupation Manager, Employee Benefit Sale Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	
SUBTOTAL of Receipts This Page (optional	)	560.00
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 119 (check only one)    X   11a
or for commercial purposes, other  NAME OF COMMITTEE (In F	than using the name and a ull)	ay not be sold or used by any pers ddress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle DAVID BERMAN	Initial)		Date of Receipt
Mailing Address 6510 N. S	hadeland Avenue		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3491
Indianapolis	IN	46220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer Neace Lukens Holding Comp- any, Inc.	Occupati agent	on	
Receipt For:	Aggrega	te Year-to-Date ▼	
Primary Gener Other (specify) ▼	al	480.00	
Full Name (Last, First, Middle DAVID BERMAN	Initial)		Date of Receipt
Mailing Address 6510 N. S	hadeland Avenue		0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3499
Indianapolis	IN	46220	Amount of Each Receipt this Period
FEC ID number of contributino federal political committee.	C		60.00
Name of Employer Neace Lukens Holding Comp- any, Inc.	Occupati agent	on	
Receipt For:  Primary Gener  Other (specify) ▼		te Year-to-Date ▼ 540.00	
Full Name (Last, First, Middle CLAUDETTE BISBEE	Initial)		Date of Receipt
	ashington Street		0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3122
Coldwater	MI	49036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Infinisource, Inc.	Occupati Agent	on	
Receipt For:  Primary  Gener  Other (specify) ▼		te Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Pa	ge (optional)		150.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 119 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAD	ne name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT BISHOP Mailing Address 2785 East Desert Inn	ı Rd., # 134		Date of Receipt
City	State	Zip Code	0 8 3 1 2 0 0 7  Transaction ID: 3907
Las Vegas	NV	89121	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer KIA Insurance	Occupation President		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) BRADFORD BLAIN	<u> </u>		Date of Receipt
Mailing Address P O Box 4510			08 / 31 / 2007
City	State	Zip Code	Transaction ID: 3020
Lexington  FEC ID number of contributing federal political committee.	C	40544	Amount of Each Receipt this Period  30.00
Name of Employer Al Torstrick Insurance Ag- ency, Inc.	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	_	/ear-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) WILLIAM BLAKELY			Date of Receipt
Mailing Address PO Box 11310			0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3021
Chattanooga	TN	37401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer Russ Blakely & Associates	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)			145.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pe g the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JAMES BOSIER Mailing Address P.O. Box 1230  City Waterloo	State Zip Code IA 50704	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Net Worth Advisors	Occupation Account Manager	85.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	
Full Name (Last, First, Middle Initial) JIM BOWMAN Mailing Address 2701 West 15th St	reet, # 554	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3031
Plano	TX 75075	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Bowman & Bowman Consultants, Inc. Receipt For:  Primary General Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   240.00	
Full Name (Last, First, Middle Initial) ELEANOR BROCKHURST Mailing Address 1212 East Osborn	Road, Suite 110	Date of Receipt
City	State Zip Code	0 8 3 1 2 0 0 7 Transaction ID: 3034
Phoenix	AZ 85014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Brockhurst & Associates, Inc.	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
SUBTOTAL of Receipts This Page (option)	al)	145.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 14/119   (check only one)     X   11a     11b     11c     12     13     14     15     16
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) Patty Brown			Date of Receipt
Mailing Address 3660 Guenther Roa	ad		08 31 2007
City	State	Zip Code	Transaction ID: 4386
La Grange  FEC ID number of contributing federal political committee.	C	78945	Amount of Each Receipt this Period 250.00
Name of Employer Insurance Network of Texas	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) THOMAS BRYON			Date of Receipt
Mailing Address 9820 Metcalf Ave.,	# 110		08 31 2007
City Overland Park	State KS	Zip Code	Transaction ID: 3033
FEC ID number of contributing federal political committee.	C	66212	Amount of Each Receipt this Period 30.00
Name of Employer Benefit Designs, Inc.	Occupation Senior Vi	n ice President	
Receipt For:  Primary General  Other (specify) ▼	- '	e Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) JENNIFER BUNDY-COBB			Date of Receipt
Mailing Address 3000 A Street, Suite	e 400		08 31 2007
City Anchorage	State AK	Zip Code 99501	Transaction ID: 3027
FEC ID number of contributing federal political committee.	C	99301	Amount of Each Receipt this Period 30.00
Name of Employer The Wilson Agency, LLC	Occupation Agent	n	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optional	J)		310.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 119 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee	erson for the purpose of soliciting contributions
/	ALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) RAYMOND BUZA		Date of Receipt
Mailing Address 215 South Olive Av		08 31 2007
City West Palm Beach	State Zip Code FL 33401	Transaction ID: 3493
FEC ID number of contributing federal political committee.	C 33401	Amount of Each Receipt this Period  60.00
Name of Employer Palm Beach Insurance Advisory Group, Receipt For:  Primary General Other (specify) ▼	Occupation agent  Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial) EDWARD BYRD Mailing Address PO Box 50164		Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 4159
Columbia	SC 29250	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Norris-Byrd Group Benefit- s, LLC	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) TIMOTHY BYRNE		Date of Receipt
Mailing Address 3113 West Beltline	Highway	08 31 2007
City Madison	State Zip Code WI 53713	Transaction ID: 1958  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Mortenson, Matzelle & Mel- drum	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00	
SUBTOTAL of Receipts This Page (optional	ıl)	185.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 119 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NATIONAL ASSOCIATION OF HEA	LTH UNDERV	VRITERS PAC (HUPAC)	_
Full Name (Last, First, Middle Initial) B D CALVIN			Date of Receipt
Mailing Address PO Box 101422	Chata	7'n Oada	08 01 2000
City	State	Zip Code	Transaction ID: 3860
Anchorage  FEC ID number of contributing federal political committee.	C	99510	Amount of Each Receipt this Period 85.00
Name of Employer	Occupation	n	
Calco, Inc.	Agent		
Receipt For:	_ ' <u> </u>	Year-to-Date ▼	7
Primary General Other (specify) ▼		680.00	
Full Name (Last, First, Middle Initial) B D CALVIN			Date of Receipt
Mailing Address PO Box 101422			08 31 2007
City	State	Zip Code	Transaction ID: 3909
Anchorage	AK	99510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer Calco, Inc.	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 765.00	
Full Name (Last, First, Middle Initial) MICHAEL CARMEAN			Date of Receipt
Mailing Address PO Box 7367			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 4146
Columbus	GA	31908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Paragon Marketing	Occupation Vice Pres	n sident, Group Sales & Marke	ti
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1066.00	
SUBTOTAL of Receipts This Page (optional)			270.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 119 (check only one)    X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to start UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) MICHAEL CARMEAN  Mailing Address PO Box 7367  City Columbus  FEC ID number of contributing federal political committee.  Name of Employer Paragon Marketing  Receipt For: Primary General Other (specify)	State Zip Code GA 31908  C  Occupation Vice President, Group Sales & Market Aggregate Year-to-Date  1166.00	Date of Receipt  M M J J J J J J J J J J J J J J J J J
Full Name (Last, First, Middle Initial) KING CAROLYN  Mailing Address 6 Country Lane  City Sussex  FEC ID number of contributing federal political committee.  Name of Employer New England Financial  Receipt For: Primary General Other (specify)	State Zip Code NJ 07461  C  Occupation Agent  Aggregate Year-to-Date  210.00	Date of Receipt  M M J J D D J Z D O 7  Transaction ID: 3108  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) LORELIE CASTELLANI Mailing Address PO Box 905  City Branchville  FEC ID number of contributing federal political committee.  Name of Employer Benefit Guidance Systems  Receipt For: Primary General Other (specify)	State Zip Code NJ 07826  C  Occupation Agent  Aggregate Year-to-Date   695.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 3868  Amount of Each Receipt this Period  85.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	215.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any persing the name and address of any political committee to	
/	HEALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) RUSSELL CHILDERS		Date of Receipt
Mailing Address PO Box 1547  City	State Zip Code	0 8 0 1 2 0 0 7  Transaction ID: 2992
Americus	GA 31709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Russ Childers, CLU	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  340.00	
Full Name (Last, First, Middle Initial) RUSSELL CHILDERS		Date of Receipt
Mailing Address PO Box 1547		0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3120
Americus	GA 31709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Russ Childers, CLU	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	370.00	
Full Name (Last, First, Middle Initial) RICHARD COBURN		Date of Receipt
Mailing Address 19 Minor Court		0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3028
San Rafael	CA 94903	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Word & Brown	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 180.00	
CURTOTAL of Province This Province	onal)	90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 119 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	ress of any political committee to	on for the purpose of soliciting contributions
NATIONAL ASSOCIATION OF HE	ALTH UNDERW	/RITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) RICHARD COBURN			Date of Receipt
Mailing Address 19 Minor Court			08 / 31 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3029
San Rafael	CA	94903	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Word & Brown	Occupation Agent		
Receipt For:		Year-to-Date ▼	$\dashv$
Primary General Other (specify)	riggiogalo	210.00	
Full Name (Last, First, Middle Initial) DANIEL COLACIONO			Date of Receipt
Mailing Address 99 Troy Road			08 31 2007
City	State	Zip Code	Transaction ID: 3869
East Greenbush	NY	12061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer Rose and Kiernan, Inc	Occupation Vice Pres		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) GEORGE CONDOS			Date of Receipt
Mailing Address 7881 West Charles	ston Blvd. #140		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City	State	Zip Code	Transaction ID: 2993
Las Vegas	NV	89117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Leavitt Insurance Agency	Occupation Charter S	enior Financial Plann	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		240.00	
SUBTOTAL of Receipts This Page (optional			145.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 119 (check only one)    X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statement and address of any political committee to	
Full Name (Last, First, Middle Initial) GEORGE CONDOS	ALTH UNDERWRITERS PAC (HUPAC)	Date of Receipt
Mailing Address 7881 West Charlest		08 / 31 / 2007
City Las Vegas	State Zip Code NV 89117	Transaction ID: 3121  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Leavitt Insurance Agency	Occupation Charter Senior Financial Plann	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Carrie Cox		Date of Receipt
Mailing Address 6701 North Broadwa	ay, Suite 323	0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3040
Oklahoma City	OK 73112	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Oden Roberts Rohrman Insu- rance	Occupation Group Benefits Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	]
Full Name (Last, First, Middle Initial) Richard Damico		Date of Receipt
Mailing Address 50 E 42nd St		M M / D D / Y Y Y Y Y Y A D D D D D D D D D D D D D
City	State Zip Code	Transaction ID: 4443
New York  FEC ID number of contributing federal political committee.	NY 10017-5405	Amount of Each Receipt this Period  365.00
Name of Employer Corporate Benefit and Design Services	Occupation President	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00	
SURTOTAL of Receipts This Page (optional	)	425.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ar or	ny information copied from such Reports and for commercial purposes, other than using t	I Statements may not be sold or used by any pe he name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA	LTH UNDERWRITERS PAC (HUPAC)	
<u>/_</u>	Full Name (Last, First, Middle Initial) TERESA DEBRUIN		Date of Receipt
	Mailing Address 5880 Live Oak Park	•	08 01 2007
	City	State Zip Code	Transaction ID: 58
	Norcross	GA 30092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	-30.00
	Name of Employer DeBruin Benefit Services	Occupation Agent	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	
	Full Name (Last, First, Middle Initial)		
	TERESA DEBRUIN  Mailing Address 5880 Live Oak Park	way	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City	State Zip Code	Transaction ID: 3126
	Norcross	GA 30092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer DeBruin Benefit Services	Occupation Agent	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	
	Full Name (Last, First, Middle Initial) ROSEMARY DEININGER		Date of Receipt
	Mailing Address 12801 N. Central Ex	pressway, Suit	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 3037
	<u>Dallas</u>	TX 75243	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer Waldman Brothers	Occupation Account Manager	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	360.00	
			30.00

SCHEDULE A (FEC FOR ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Page	ie (crieck drilly drie)
NAME OF COMMITTEE (In Fu	•	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	N OF HEALTH UNDERWRITERS PAC (HUPA	AC)
Full Name (Last, First, Middle I DAVID DEITCH	,	Date of Receipt
Mailing Address 2785 East	·	08 31 2007
City Las Vegas	State Zip Code NV 89121	Transaction ID: 3038  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer KIA Insurance	Occupation Agent	
Receipt For:  Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
Full Name (Last, First, Middle I STEPHANIE DENZ	<u>,                                      </u>	Date of Receipt
Mailing Address 5000 US F	lwy 17, 18#314	08 01 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2959
<u>Jacksonville</u>	FL 32003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Gallagher Benefit Service-	Occupation Senior Benefit Consultant	
s, Inc. Receipt For:	Aggregate Year-to-Date ▼	
Primary Genera Other (specify) ▼	320	.00
Full Name (Last, First, Middle I STEPHANIE DENZ	nitial)	Date of Receipt
Mailing Address 5000 US F	lwy 17, 18#314	08 31 2007
City	State Zip Code	Transaction ID: 3039
<u>Jacksonville</u>	FL 32003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Gallagher Benefit Service- s, Inc.	Occupation Senior Benefit Consultant	
Receipt For:  Primary Genera  Other (specify) ▼	Aggregate Year-to-Date ▼ 350	.00
CURTOTAL of Descints This De	ge (optional)	90.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per ng the name and address of any political committee  EALTH UNDERWRITERS PAC (HUPAC)	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) LISA DERYCKE  Mailing Address 2805 East Skelly	Drive Suite 808	Date of Receipt
City	State Zip Code	0 8 3 1 2 0 0 7  Transaction ID: 3127
Tulsa  FEC ID number of contributing federal political committee.	OK 74105	Amount of Each Receipt this Period 30.00
Name of Employer Benefit Designs of Oklaho- ma, Inc. Receipt For:  Primary General Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   210.00	
Full Name (Last, First, Middle Initial) RUSH DIXON Mailing Address 1375 Piccard Driv	re	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 4189
Rockville  FEC ID number of contributing federal political committee.	MD 20850	Amount of Each Receipt this Period  120.00
Name of Employer Early Cassidy and Schilli- ng	Occupation VP of Employee Benefits	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 940.00	
Full Name (Last, First, Middle Initial) STEVEN DODDER  Mailing Address PO Box 2069		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3498
Monument  FEC ID number of contributing federal political committee.	CO 80132	Amount of Each Receipt this Period  60.00
Name of Employer Assurant Health	Occupation Regional Sales Director	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  220.00	
SUBTOTAL of Receipts This Page (option	nal)	210.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per of the name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)	ALTH GIVELTWITTERGY AG (NOT AG)	
CLAUDIA DODGE		Date of Receipt
Mailing Address 2108 W. Laburnum	<u> </u>	08 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3036
Richmond	VA 23226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer BB&T Benefit Consultants	Occupation Sales Consultant	
of Virginia Receipt For:	Aggregate Year-to-Date ▼	<del> </del>
Primary General Other (specify) ▼	340.00	
Full Name (Last, First, Middle Initial) CYNTHIA DOUCET	<b>L</b>	Date of Receipt
Mailing Address P. O. Box 91180		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2962
Lafayette	LA 70509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Global Financial Resource- s, Inc.	Occupation Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) CYNTHIA DOUCET	<b>L</b>	Date of Receipt
Mailing Address P. O. Box 91180		0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3084
<u>Lafayette</u>	LA 70509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Global Financial Resource- s. Inc.	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	270.00	
		90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 119 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persithe name and address of any political committee to	
Full Name (Last, First, Middle Initial) EUGENE EBERSOLE Mailing Address PO Box 2886	ALTH UNDERWRITERS FAC (HUFAC)	Date of Receipt  0 8 0 1 2 0 0 7
City Gretna FEC ID number of contributing	State Zip Code LA 70054	Transaction ID: 3857  Amount of Each Receipt this Period
federal political committee.  Name of Employer Ebersole & Associates, In- c. Receipt For:  Primary  General  Other (specify) ▼	C Occupation Agent Aggregate Year-to-Date ▼ 780.00	85.00
Full Name (Last, First, Middle Initial) EUGENE EBERSOLE Mailing Address PO Box 2886		Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3912
Gretna	LA 70054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Ebersole & Associates, In-	Occupation Agent	
c. Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  865.00	
Full Name (Last, First, Middle Initial) MICHAEL EMBRY		Date of Receipt
Mailing Address 20700 Civic Center	Drive, Suite 2	08 02 2007
City	State Zip Code	Transaction ID: 3866
Southfield  FEC ID number of contributing federal political committee.	MI 48076	Amount of Each Receipt this Period  85.00
Name of Employer Comerica Insurance Servic- es, Inc.	Occupation VP - Group Benefits Division	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	
SUBTOTAL of Receipts This Page (optional	)	255.00

SCHEDULE A (FEC FOI ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other the	ports and Statements may not be sold or used by any p an using the name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION	OF HEALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Init LINDA ERLENCACH	<u> </u>	Date of Receipt
Mailing Address 151 Belcour		08 01 2007
City Aurora	State Zip Code OH 44202	Transaction ID: 2994  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer L.M. Erlenbach, Inc.	Occupation Benefits Consultant	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Init LINDA ERLENCACH	·	Date of Receipt
Mailing Address 151 Belcour	Lane	08 31 2007
City	State Zip Code	Transaction ID: 3124
Aurora	OH 44202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer L.M. Erlenbach, Inc.	Occupation Benefits Consultant	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	
Full Name (Last, First, Middle Init THOMAS EVANS	al)	Date of Receipt
Mailing Address 7261 Mercy	Rd.	08
City	State Zip Code	Transaction ID: 3858
Omaha  FEC ID number of contributing federal political committee.	NE 68164	Amount of Each Receipt this Period 85.00
Name of Employer BlueCross Blue Shield of Nebraska	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00	•
SURTOTAL of Receipts This Page	(optional)	145.00

SCHEDULE A (FEC Forr ITEMIZED RECEIPTS	use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Repror for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any persusing the name and address of any political committee t	
· · · · · ·	F HEALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial THOMAS EVANS	,	Date of Receipt
Mailing Address 7261 Mercy R City	d. State Zip Code	08 31 2007
Omaha	NE 68164	Transaction ID: 3911 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer BlueCross Blue Shield of Nebraska	Occupation Agent	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	675.00	
Full Name (Last, First, Middle Initial NICOLE FAIRBAIRN WONNELL	)	Date of Receipt
Mailing Address 14701 Cumbe	rland Road, Suite 180	08 31 YYYY 2007
City	State Zip Code	Transaction ID: 3125
Noblesville	IN 46060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Creative Insurance Concep- ts. Inc.	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial DEIRDRE FALLON	)	Date of Receipt
Mailing Address PO Box 256		08 31 YYYYY 2007
City	State Zip Code	Transaction ID: 3884
Spring Lake	NJ 07762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer John J. Slattery Associat- es, Inc.	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	680.00	
	optional)	200.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to LTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHERYL FARMER Mailing Address 1755 East Bristol Str City Elkhart FEC ID number of contributing federal political committee.  Name of Employer Health Resources Inc.	State Zip Code IN 46514  C  Occupation Agent	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date  320.00	
DAVID FEAR  Mailing Address 11160 Sun Center D	rive, Suite A	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 3859
Rancho Cordova  FEC ID number of contributing federal political committee.	CA 95670	Amount of Each Receipt this Period  85.00
Name of Employer CIMS Strategic Distributi- on Division Receipt For:  Primary General Other (specify) ▼	Occupation Director of Strategic Distribution  Aggregate Year-to-Date   1040.00	
Full Name (Last, First, Middle Initial) DAVID FEAR		Date of Receipt
Mailing Address 11160 Sun Center D	rive, Suite A	08 31 Y Y Y Y Y
City	State Zip Code	Transaction ID: 3910
Rancho Cordova	CA 95670	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	85.00
Name of Employer CIMS Strategic Distributi- on Division Receipt For:	Occupation Director of Strategic Distribution  Aggregate Year-to-Date	
Primary General Other (specify) ▼	1125.00	
SUBTOTAL of Receipts This Page (optional)		190.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 119 (check only one)    X   11a
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to LTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David Ferguson  Mailing Address 143 East Austin  City Giddings  FEC ID number of contributing federal political committee.  Name of Employer Insurance Network of Texas  Receipt For: Primary General Other (specify)	State Zip Code TX 78942  C  Occupation Agent  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) CATHERINE FICARA  Mailing Address 26999 Central Park E  City Southfield  FEC ID number of contributing federal political committee.  Name of Employer Austin Financial Group, LLC  Receipt For: Primary General Other (specify)	State Zip Code MI 48076  C  Occupation agent  Aggregate Year-to-Date  240.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) CATHERINE FICARA  Mailing Address 26999 Central Park E  City Southfield  FEC ID number of contributing federal political committee.  Name of Employer Austin Financial Group, LLC  Receipt For: Primary General Other (specify)	State Zip Code MI 48076  C  Occupation agent  Aggregate Year-to-Date  270.00	Date of Receipt  M M J J J J J J J J J J J J J J J J J
SUBTOTAL of Receipts This Page (optional)		310.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 119 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	the name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) BRENDA FRANKLIN Mailing Address 7915 North Hale Av	vonuo. Suito D		Date of Receipt
City Peoria	State IL	Zip Code 61615	Transaction ID: 3041  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	01013	30.00
Name of Employer OSF HealthPlans  Receipt For:  Primary General Other (specify) ▼	<del></del>	espresentative Year-to-Date   210.00	
Full Name (Last, First, Middle Initial) LINDA FRIEDRICH Mailing Address PO Box 30275			Date of Receipt  0 8 0 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3425
Lincoln	NE	68503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer UNICO Financial Services, Inc.	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) LINDA FRIEDRICH			Date of Receipt
Mailing Address PO Box 30275			08 31 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3429
Lincoln  FEC ID number of contributing federal political committee.	C	68503	Amount of Each Receipt this Period 50.00
Name of Employer UNICO Financial Services, Inc.	Occupation Agent	1	
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional	al)		130.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 119 (check only one)    X   11a
or for commercia	copied from such Reports and Sal purposes, other than using the OMMITTEE (In Full)  ASSOCIATION OF HEAL	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (L KELLY FRIST Mailing Addre		300		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	lle.	State	Zip Code	Transaction ID: 2971
	oer of contributing al committee.	C	76308	Amount of Each Receipt this Period  30.00
Name of Emprinancial Pair Receipt For: Primary Other (		Occupatio Agent Aggregate	e Year-to-Date ▼ 340.00	
Full Name (L JAMES GARE Mailing Addre		ı		Date of Receipt  0 8 0 1 2 0 0 7
City		State	Zip Code	Transaction ID: 3853
<u>Omaha</u>		NE	68137	Amount of Each Receipt this Period
	per of contributing al committee.	C		85.00
Name of Emp Harry A. Koc	ployer h Co.	Occupatio Agent	n	
Receipt For: Primary Other (	/ General specify) ▼	,	e Year-to-Date ▼ 680.00	
Full Name (L JAMES GARE Mailing Addre				Date of Receipt
	ess 11949 Q Street			08 / 31 / 2007
City Omaha		State NE	Zip Code	Transaction ID: 3877
FEC ID numl	per of contributing al committee.	C	68137	Amount of Each Receipt this Period  85.00
Name of Emp Harry A. Koc	ployer h Co.	Occupatio Agent	n	
Receipt For: Primary Other (	/ General specify) ▼	, ı	e Year-to-Date ▼ 765.00	
SUBTOTAL of	Receipts This Page (optional)	1		200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedu for each category of to Detailed Summary Pa	he (check drily che)
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by a the name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.  AC)
Full Name (Last, First, Middle Initial) BRUCE GARDNER Mailing Address 1502 West Avenue  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Austin  FEC ID number of contributing federal political committee.	TX 78701	Amount of Each Receipt this Period  80.00
Name of Employer Bruce Gardner Insurance & Investments Receipt For:  Primary  General  Other (specify) ▼	Occupation Registered Representative  Aggregate Year-to-Date   640	0.00
Full Name (Last, First, Middle Initial) BRUCE GARDNER Mailing Address 1502 West Avenue		Date of Receipt
City	State Zip Code	0 8 3 1 2 0 0 7  Transaction ID: 3553
Austin	TX 78701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer Bruce Gardrier Insurance  & Investments Receipt For:  Primary General  Other (specify) ▼	Occupation Registered Representative  Aggregate Year-to-Date  720	0.00
Full Name (Last, First, Middle Initial) G. GARNER	•	Date of Receipt
Mailing Address 1308 Murraywood	Drive	08 31 2007
City	State Zip Code	Transaction ID: 3086
Columbia  FEC ID number of contributing federal political committee.	SC 29212	Amount of Each Receipt this Period  30.00
Name of Employer Self Employed	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
SUBTOTAL of Receipts This Page (option	al)	190.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 119 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	he name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) JOHN GARVEN Mailing Address 11715 East Main Str  City Huntley FEC ID number of contributing federal political committee.  Name of Employer	eet - PO Box 8 State IL C	Zip Code 60142	Date of Receipt  M M M / D D / Y Y Y Y Y  0 8 3 1 2 0 0 7  Transaction ID: 3140  Amount of Each Receipt this Period  30.00
Name of Employer Benico, LTD  Receipt For:  Primary General  Other (specify) ▼	Agent	e Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) WILLIS GLAROS  Mailing Address PO Box 184  City  Dyer  FEC ID number of contributing federal political committee.  Name of Employer Employer Benefit Systems  Receipt For:  Primary General Other (specify)	State IN  C  Occupation Agent  Aggregate	Zip Code 46311  n e Year-to-Date ▼ 270.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 1501  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) WILLIS GLAROS Mailing Address PO Box 184  City Dyer  FEC ID number of contributing federal political committee.  Name of Employer Employer Benefit Systems  Receipt For: Primary General Other (specify)	State IN  C  Occupation Agent  Aggregate	Zip Code 46311 n e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3893  Amount of Each Receipt this Period  85.00
SUBTOTAL of Receipts This Page (optional)		••••••••••••••••••••••••••••••••••••••	130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 119 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	
Full Name (Last, First, Middle Initial) PATRICE GOLDFARB Mailing Address 442 Teaneck Rd.  City Ridgefield Park  FEC ID number of contributing federal political committee.  Name of Employer The Employee Benefits Advisors Group Receipt For: Primary General Other (specify)	State Zip Code NJ 07660  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) PATRICIA GRIFFEY Mailing Address 227 Dixie Way North  City South Bend  FEC ID number of contributing federal political committee.  Name of Employer Page 1 Benefits, Inc.  Receipt For: Primary General Other (specify)	Suite 210  State Zip Code IN 46637  C  Occupation Agent  Aggregate Year-to-Date   480.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3494  Amount of Each Receipt this Period  60.00
Full Name (Last, First, Middle Initial) ROBERT GRUNDMAN Mailing Address 7412 Karl Drive  City Lincoln  FEC ID number of contributing federal political committee.  Name of Employer Senior Benefit Strategies  Receipt For: Primary General Other (specify)	State Zip Code NE 68516  C  Occupation Agent  Aggregate Year-to-Date ▼  340.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 8 0 1 2 0 0 7  Transaction ID: 2995  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (optional)		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 119 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) ROBERT GRUNDMAN Mailing Address 7412 Karl Drive  City Lincoln FEC ID number of contributing	State NE	Zip Code 68516	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify) ▼	Occupation Agent	n e Year-to-Date ▼ 370.00	]
Full Name (Last, First, Middle Initial) VINCENT GUERRA  Mailing Address 514 Pettigru Street	<u> </u>		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3092
Greenville	SC	29602	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer The Cason Group, Inc.	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) TERESA GUTIERREZ Mailing Address P O Box 638			Date of Receipt  0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3079
Cary	NC	27512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Integrated Benefit Solutions, Inc. Receipt For: Primary General	Occupation Agent Aggregate	n e Year-to-Date ▼	
Other (specify) ▼	0 0	220.00	
SUBTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 119 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAD	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) WILLIAM HAFF Mailing Address 131 Interpark			Date of Receipt
City San Antonio	State TX	Zip Code 78216	Transaction ID: 3080  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer EDWW  Receipt For:	Occupation Agent Aggregate	n Year-to-Date <b>▼</b>	
Primary General Other (specify) ▼	1 1	220.00	
Full Name (Last, First, Middle Initial) WALTER HALE Mailing Address 211 East Church Str	reet		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3081
<u>Morrilton</u>	AR	72110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Hawkins Insurance Agency	Occupation Agent	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) DWIGHT HALL	•		Date of Receipt
Mailing Address 11555 North Meridia	an Street, Suit		08 31 2007
City	State	Zip Code	Transaction ID: 3143
Carmel FEC ID number of contributing federal political committee.	C	46032	Amount of Each Receipt this Period  30.00
Name of Employer Midwest Insurance Markete- rs of America Receipt For:	<del>_ , ' _                                </del>	Sales Director	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional	)		90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 37 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personante name and address of any political committee to ALTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOSEPH HANNAH Mailing Address 3130 Chaparral Driv		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Roanoke  FEC ID number of contributing federal political committee.	State Zip Code VA 24018	Transaction ID: 3433  Amount of Each Receipt this Period  50.00
Name of Employer CIGNA Healthcare  Receipt For:  Primary General Other (specify) ▼	Occupation Account Executive  Aggregate Year-to-Date   400.00	1
Full Name (Last, First, Middle Initial) CHRISTOPHER HARRISON Mailing Address 921-C South McPhe	erson Church Road	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 4383
<u>Fayetteville</u>	NC 28303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ebenconcepts Company	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.00	
Full Name (Last, First, Middle Initial) GERALD HARTMAN		Date of Receipt
Mailing Address PO Box 5716		08 / 31 / Y Y Y Y Y Y Y
City	State Zip Code ID 83705	Transaction ID: 3440
Boise  FEC ID number of contributing federal political committee.	ID 83705	Amount of Each Receipt this Period 50.00
Name of Employer Insurance Network America Inc Receipt For:	Occupation Agent Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	]
SUBTOTAL of Receipts This Page (optional	)	350.00
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form STEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee the HEALTH UNDERWRITERS PAC (HUPAC)	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) LORI HEADLEY Mailing Address PO Box 14725  City Portland  FEC ID number of contributing federal political committee.  Name of Employer Healthwise Insurance Planning Receipt For: Primary General Other (specify)	State Zip Code OR 97293  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt    M   M   D   D   D   2 0 0 7    Transaction ID: 3144    Amount of Each Receipt this Period   30.00
Full Name (Last, First, Middle Initial) Timothy Hendricks Mailing Address 1605 S Eucalypte City Broken Arrow FEC ID number of contributing federal political committee.  Name of Employer Business Planning Group	State Zip Code OK 74012  C Occupation	Date of Receipt  M M M O D D O Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Of OK Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Timothy Hendricks Mailing Address 1605 S Eucalypti	Agent Aggregate Year-to-Date ▼  800.00	Date of Receipt
City  Broken Arrow  FEC ID number of contributing federal political committee.  Name of Employer Business Planning Group Of OK Receipt For:  Primary General Other (specify)	State Zip Code OK 74012  C  Occupation Agent  Aggregate Year-to-Date  900.00	Transaction ID: 4163 Amount of Each Receipt this Period  100.00
SUBTOTAL of Receipts This Page (option	onal)	230.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 119 (check only one)    X
or for comn	nercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	OF COMMITTEE (In Full) ONAL ASSOCIATION OF HEAL'	TH UNDERV	WRITERS PAC (HUPAC)	
. JAIME H	ne (Last, First, Middle Initial)			Date of Receipt
	Address 804 S. Bel Aire Drive			08 31 2007
City Burbar	nk	State CA	Zip Code 91501	Transaction ID: 3439 Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		50.00
Name o Jardez I nce Inc.	f Employer Financial & Insura-	Occupatio Agent	n	
	For: rimary General ther (specify) ♥	Aggregate	e Year-to-Date ▼ 400.00	
Full Nar	ne (Last, First, Middle Initial) HILL			Date of Receipt
Mailing /	Address PO Box 724			0 8 0 1 2 0 0 7
City		State	Zip Code	Transaction ID: 4223
<u>Snellvi</u>		GA	30078	Amount of Each Receipt this Period
federal p	number of contributing political committee.	C		125.00
Name of DDH As	f Employer ssociates, LLC	Occupatio Presiden		
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Nar	ne (Last, First, Middle Initial) HILL	1		Date of Receipt
Mailing /	Address PO Box 724			08 31 2007
City		State	Zip Code	Transaction ID: 4224
	number of contributing political committee.	GA C	30078	Amount of Each Receipt this Period  125.00
Name of DDH As	f Employer ssociates, LLC	Occupatio Presiden		
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 875.00	
SUBTOTA	<b>AL</b> of Receipts This Page (optional)			300.00

NAME OF COMMITTEE (In Full)   NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)	SCHEDULE A (FEC Form ITEMIZED RECEIPTS  Any information copied from such Report	for each category of the  Detailed Summary Page  s and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 40 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  In for the purpose of soliciting contributions
A. RICHARD HILL  Mailing Address 4435 O Street  City  City  State Zip Code Lincoln  NE 88510  FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc.  Primary General Other (specify) ▼  City  State Zip Code NE 88510  Date of Receipt this Period  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  City  State Zip Code NE 88510  Date of Receipt this Period  Date of Receipt  Aggregate Year-to-Date ▼  Transaction ID: 3496  Amount of Each Receipt this Period  Agent  Agent  Agent  Aggregate Year-to-Date ▼  Date of Receipt  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID: 3496  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Date of Receipt  Transaction ID: 3496  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 3496  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID: 3496  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID: 3145  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Date of Receipt  Transaction ID: 3145  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Date of Receipt  Date of Receipt  Transaction ID: 3145  Amount of Each Receipt this Period  Date of Receipt  Date of	or for commercial purposes, other than use NAME OF COMMITTEE (In Full)	sing the name and address of any political committee to	solicit contributions from such committee.
City   State   Zip Code   NE   68510	RICHARD HILL		<b>-</b>
Lincoln  FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc. Receipt For:   Primary   General   Aggregate Year-to-Date ▼		Old To Old	08 01 2007
FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc.    Name of Employer UNICO Financial Services, Inc.		•	
Inc.   Aggregate Year-to-Date ▼   Aggregate Year-to-Date Year-to-Date Year	FEC ID number of contributing		
Primary General Other (specify) ▼ 480.00  Full Name (Last, First, Middle Initial) RICHARD HILL  Mailing Address 4435 O Street  City State Zip Code Lincoln NE 68510  FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc.  Receipt For: Primary General Other (specify) ▼ 540.00  Full Name (Last, First, Middle Initial)  Date of Receipt Torical Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Date of Receipt Torical Aggregate Year-to-Date ▼  Valuesha W23 N608 Saratoga Dr  City State Zip Code Waukesha W1 53186  FEC ID number of contributing federal political committee.  Name of Employer Diversified insurance Services, Inc.  Receipt For: Primary General Occupation Agent  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼	Inc.	Agent	
Agent   Date of Receipt   Mailing Address   A	Primary General		
City Lincoln NE 68510  FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc. Receipt For: Primary General Other (specify) ▼  City State Zip Code Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) DEAN M HOFFMAN Mailing Address W223 N608 Saratoga Dr  City Waukesha FEC ID number of contributing federal political committee.  Date of Receipt  M M M S 31 / 2 0 0 7  Transaction ID: 3496  Amount of Each Receipt this Period  Full Name (Last, First, Middle Initial) DEAN M HOFFMAN Mailing Address W223 N608 Saratoga Dr  City Waukesha FEC ID number of contributing federal political committee.  Name of Employer Diversified Insurance Ser- Nices, Inc. Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼	, , , , , , , , , , , , , , , , , , , ,		Date of Receipt
Lincoln  NE 68510  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc.  Receipt For:  Primary General Other (specify) ▼  Name of Employer Diversified Insurance Services, Inc.  Name of Employer Diversified Insurance Services, Inc.  Receipt For:  Primary General Occupation  Aggregate Year-to-Date ▼  State Zip Code  Waukesha  WI 53186   Date of Receipt  Transaction ID: 3145  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 3145  Amount of Each Receipt this Period  Date of Receipt  Aggregate Year-to-Date ▼  Occupation  Agent  Aggregate Year-to-Date ▼  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼	· ————————————————————————————————————		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer UNICO Financial Services, Inc. Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) DEAN M HOFFMAN Mailing Address W223 N608 Saratoga Dr  City State Zip Code W1 53186  FEC ID number of contributing federal political committee.  Name of Employer Diversified insurance Services, Inc. Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Cuty State Zip Code W1 53186  FEC ID number of contributing federal political committee.  Agent Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼	City	•	Transaction ID: 3496
Name of Employer UNICO Financial Services, Inc.   Agent	Lincoln	NE 68510	Amount of Each Receipt this Period
UNICO Financial Services, Inc.  Receipt For:    Primary   General   Aggregate Year-to-Date ▼     Other (specify) ▼		С	60.00
Receipt For:    Primary   General   S40.00	UNICO Financial Services,	_ ·	
DEAN M HÖFFMAN  Mailing Address W223 N608 Saratoga Dr  City State Zip Code  Waukesha WI 53186  FEC ID number of contributing federal political committee.  Name of Employer Diversified Insurance Services, Inc.  Receipt For:  Primary General Other (specify) ▼  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Receipt For: Primary General	riggiogale roll to Dale	
Mailing Address W223 N608 Saratoga Dr  City State Zip Code Waukesha WI 53186  FEC ID number of contributing federal political committee.  Name of Employer Diversified Insurance Services, Inc. Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  150.00		I	Date of Receipt
Waukesha  FEC ID number of contributing federal political committee.  Name of Employer Diversified Insurance Services, Inc.  Receipt For:  Primary General Other (specify) ▼  Amount of Each Receipt this Period  30.00  C  Agent  Aggregate Year-to-Date ▼  240.00		atoga Dr	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Diversified Insurance Services, Inc.  Receipt For:  Primary General Other (specify)   Occupation Agent  Aggregate Year-to-Date   240.00	•	ı	
Name of Employer Diversified Insurance Ser- vices, Inc. Receipt For:  Primary General Other (specify) ▼  Occupation Agent  Aggregate Year-to-Date ▼  240.00	•	WI 53186	Amount of Each Receipt this Period
Diversified Insurance Services, Inc.  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  240.00		C	30.00
Receipt For:  Primary  Other (specify)   Aggregate Year-to-Date  240.00	Diversified Insurance Ser-	·	
Other (specify) ▼ 240.00	Receipt For:	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		240.00	
	SUBTOTAL of Receipts This Page (ont	ional)	150.00

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

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pe ng the name and address of any political committee EALTH UNDERWRITERS PAC (HUPAC)	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) GLORIA HOPPER Mailing Address 6400 Fairview Ro	ad	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charlotte	State Zip Code NC 28210	Transaction ID: 3265  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Wachovia Insurance Services, Inc. Receipt For:  Primary General Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date ▼  320.00	
Full Name (Last, First, Middle Initial) GLORIA HOPPER Mailing Address 6400 Fairview Ro	ad	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3273
Charlotte  FEC ID number of contributing federal political committee.	NC 28210	Amount of Each Receipt this Period 40.00
Name of Employer Wachovia Insurance Servic- es, Inc.	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) KYM HOPWOOD	<b>I</b>	Date of Receipt
Mailing Address 66 Franklin Stree	, Suite 210	08 31 2007
City	State Zip Code	Transaction ID: 3090
Oakland  FEC ID number of contributing federal political committee.	CA 94607	Amount of Each Receipt this Period  30.00
Name of Employer Dealey, Renton & Associat- es	Occupation Account Executive	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	
SUBTOTAL of Receipts This Page (optic	nal)	110.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 119 (check only one)    X
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers g the name and address of any political committee to EALTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) GREG HORSTMAN Mailing Address N7940 Highway E City	State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Watertown FEC ID number of contributing federal political committee.	WI 53094	Amount of Each Receipt this Period  30.00
Name of Employer WisconsinRx  Receipt For:  Primary General  Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   210.00	
Full Name (Last, First, Middle Initial) MARYLOU HUDMAN Mailing Address 5330 Bent Tree Fo	prest Drive, Suit	Date of Receipt  0 8 0 1 2 0 0 7
City	State Zip Code	Transaction ID: 3424
Dallas  FEC ID number of contributing federal political committee.	TX 75248	Amount of Each Receipt this Period 50.00
Name of Employer A Benefit Source	Occupation agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  MARYLOU HUDMAN  Mailing Address 5330 Bent Tree Fo	prest Drive, Suit	Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3432
Dallas  FEC ID number of contributing federal political committee.	TX 75248	Amount of Each Receipt this Period  50.00
Name of Employer A Benefit Source	Occupation agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (option	nal)	130.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 43 / 119 (check only one)    X   11a	
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per ename and address of any political committee.  TH UNDERWRITERS PAC (HUPAC)	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KATHLEEN HUGHES Mailing Address 13513 Arlington Road City Norwalk FEC ID number of contributing federal political committee.  Name of Employer Benefit Solutions Receipt For:	State Zip Code OH 44857  C  Occupation Benefits Spec  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) LISA ILLS  Mailing Address 4455 East Camelbac	210.00 Road, Suite D	Date of Receipt
City	State Zip Code	0 8 0 1 2 0 0 7  Transaction ID: 3203
Phoenix  FEC ID number of contributing federal political committee.	AZ 85018	Amount of Each Receipt this Period 35.00
Name of Employer Glass Financial Group Receipt For:	Occupation Employee Benefit Consultant	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) LISA ILLS		Date of Receipt
Mailing Address 4455 East Camelbac	Road, Suite D	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Phoenix	State Zip Code AZ 85018	Transaction ID: 3205  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer Glass Financial Group	Occupation Employee Benefit Consultant	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
SUBTOTAL of Receipts This Page (optional)		100.00

SCHEDULE A (FEC Form 3X)  ITEMIZED RECEIPTS  Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 44 / 119 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) TERRY IVES		Date of Receipt
Mailing Address P O Box 3459  City	State Zip Code	0 8 0 1 2 0 0 7 Transaction ID: 2997
San Clemente	CA 92674	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Executive Financial Advis- ors Inc.	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) TERRY IVES		Date of Receipt
Mailing Address P O Box 3459		08 31 7 2007
City	State Zip Code	Transaction ID: 3149
San Clemente	CA 92674	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Executive Financial Advis- ors Inc.	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) JULIA JENNINGS		Date of Receipt
Mailing Address 500 Faunce Corner Ro	d	0 8 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2975
<u>Dartmouth</u>	MA 02747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Sylvia & Co. Ins. Agency, Inc.	Occupation Vice President, Employee Benef	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)		90.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee ALTH UNDERWRITERS PAC (HUPAC)	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) JULIA JENNINGS Mailing Address 500 Faunce Corner  City Dartmouth	Rd State Zip Code MA 02747	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: 3088  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Sylvia & Co. Ins. Agency, Inc.  Receipt For:  Primary General  Other (specify) ▼	Occupation Vice President, Employee Benef  Aggregate Year-to-Date   270.00	30.00
Full Name (Last, First, Middle Initial) R JENSEN Mailing Address 6060 South Kenton City	State Zip Code	Date of Receipt    M M
Englewood  FEC ID number of contributing federal political committee.  Name of Employer Self employed  Receipt For:  Primary General Other (specify)	CO 80111  C Occupation Agent  Aggregate Year-to-Date  240.00	Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) R JENSEN Mailing Address 6060 South Kenton City	State Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Englewood  FEC ID number of contributing federal political committee.	CO 80111	Amount of Each Receipt this Period 30.00
Name of Employer Self employed  Receipt For:  Primary General  Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date ▼  270.00	
SUBTOTAL of Receipts This Page (optional	)	90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 119 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAD	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DAVID JOHNSON Mailing Address P. O. Box 871129			Date of Receipt  0 8 3 1 2 0 0 7
City Stone Mountain	State GA	Zip Code 30087	Transaction ID: 3895  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		85.00
Name of Employer David S. Johnson Insurance  Receipt For:  Primary  General  Other (specify) ▼	Occupation Agent Aggregate	Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) ERIC JOHNSON  Mailing Address P.O. Box 244261			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3094
Anchorage	AK	99503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Innovative Benefit Design	Occupation agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) ERIC JOHNSON	<b>'</b>		Date of Receipt
Mailing Address 3510 Willow Ridge	Drive		08 31 2007
City	State	Zip Code	Transaction ID: 3095
Arlington  FEC ID number of contributing federal political committee.	C	76017	Amount of Each Receipt this Period  30.00
Name of Employer BenefitPort Southwest	Occupation Life & He	n ealth Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional	· I)		145.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NATIONAL ASSOCIATION OF HE	ALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) SANDRA JOHNSON		Date of Receipt
Mailing Address 12500 Network Blv	d, # 403	08 02 2007
City	State Zip Code	Transaction ID: 3014
San Antonio	TX 78249	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer Hairston, Johnson & Assoc- iates, PLLC	Occupation Partner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) SUZANNE JOHNSON		Date of Receipt
Mailing Address 6235 Morrison Bou	levard, Suite 302	08 01 2007
City	State Zip Code	Transaction ID: 3264
Charlotte	NC 28211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Strategic Employee Benefit Services	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	320.00	
Full Name (Last, First, Middle Initial) SUZANNE JOHNSON		Date of Receipt
Mailing Address 6235 Morrison Bou	levard, Suite 302	0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3272
Charlotte	NC 28211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Strategic Employee Benefit Services	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
CURTOTAL of Possints This Page (antion)	al)	110.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48/119   (check only one)   X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) KENNETH JONES			Date of Receipt
Mailing Address 3659 Green Rd., # 2	217		08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3175
Beachwood	OH	44122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer GBA Solutions	Occupation agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) KEITH JORDANO			Date of Receipt
Mailing Address 12751 Orange Boul	evard		08 31 YYYYY 2007
City	State	Zip Code	Transaction ID: 3093
West Palm Beach	<u> </u>	33412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Jordano Insurance Group, Inc.	Occupation Presiden		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	210.00	
Full Name (Last, First, Middle Initial) LARRY KACZMAREK			Date of Receipt
Mailing Address 2633 State Route 5	9, Suite B		0 8 0 1 2 0 0 7
City	State	Zip Code	Transaction ID: 4149
Ravenna	OH	44266	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Kaczmarek Insurance Servi- ces, Inc.	Occupation Agent	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	800.00	
			160.00

TEMIZED RECEIPTS for each category		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAD	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) LARRY KACZMAREK Mailing Address 2633 State Route 59, City Ravenna FEC ID number of contributing federal political committee.  Name of Employer Kaczmarek Insurance Services, Inc. Receipt For:	State OH C Occupation Agent	Zip Code 44266 n	Date of Receipt    M M M
Primary General Other (specify)  Full Name (Last, First, Middle Initial) THELMA KACZMAREK Mailing Address 2633 State Route 59,	1 1	900.00	Date of Receipt
City Ravenna	State OH	Zip Code 44266	0 8 0 1 2 0 0 7  Transaction ID: 4145  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Kaczmarek Ins. Services Agency, Inc.	Occupation Agent		100.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	]
Full Name (Last, First, Middle Initial) THELMA KACZMAREK  Mailing Address 2633 State Route 59,	, Suite B		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City Ravenna	State OH	Zip Code 44266	Transaction ID: 4156 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Kaczmarek Ins. Services Agency, Inc. Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Agent Aggregate	e Year-to-Date ▼ 900.00	
SUBTOTAL of Receipts This Page (optional)			300.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 119 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>A.</b>	Full Name (Last, First, Middle Initial) KRISTINE KASSEL  Mailing Address 4515 S McClintock Dri  City Tempe  FEC ID number of contributing	State AZ	Zip Code 85282	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For:  Primary  Other (specify)	Occupatio Agent	e Year-to-Date ▼  220.00	
В.	Full Name (Last, First, Middle Initial) JOSEPH KELLIHER Mailing Address 24 Sawyer Dr.  City	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Salem  FEC ID number of contributing federal political committee.  Name of Employer Benefits Group, Inc.  Receipt For:  Primary General Other (specify)	C Occupation Agent Aggregate	24153 on e Year-to-Date ▼ 250.00	Amount of Each Receipt this Period  30.00
_ C.	Full Name (Last, First, Middle Initial) MARK KENNEDY Mailing Address 1173 Brittmoore Road  City Houston	State TX	Zip Code 77043	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.  Name of Employer Benefit Concepts Inc.  Receipt For:  Primary General Other (specify)	Occupation Agent Aggregate	e Year-to-Date ▼ 640.00	80.00
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	140.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 119 (check only one)    X   11a
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEALT		
Full Name (Last, First, Middle Initial) JOHN KIEBLER  Mailing Address 300 West Vine Street  City Lexington  FEC ID number of contributing federal political committee.  Name of Employer Humana  Receipt For: Primary General Other (specify)	State Zip Code KY 40507  C  Occupation CHC  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MICHAEL KIELIAN Mailing Address PO Box 45279  City Omaha  FEC ID number of contributing federal political committee.  Name of Employer The Harry A. Koch Company  Receipt For: Primary General Other (specify)	State Zip Code NE 68145  C  Occupation Agent  Aggregate Year-to-Date   675.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3856  Amount of Each Receipt this Period  85.00
Full Name (Last, First, Middle Initial) MICHAEL KIELIAN Mailing Address PO Box 45279  City Omaha  FEC ID number of contributing federal political committee.  Name of Employer The Harry A. Koch Company  Receipt For: Primary General Other (specify)	State Zip Code NE 68145  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt    M M   D D   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		200.00

ITE	HEDULE A (FEC Form 3X)  EMIZED RECEIPTS	Use separate for each cate Detailed Sun		FOR LINE NUMBER: PAGE 52 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or fo	information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or use name and address of any poli	used by any person tical committee to se	for the purpose of soliciting contributions olicit contributions from such committee.
	NATIONAL ASSOCIATION OF HEA	TH UNDERWRITERS PAG	C (HUPAC)	
	Full Name (Last, First, Middle Initial) LAURIE KIRKLAND			Date of Receipt
-	Mailing Address PO Box 10088			08 31 2007
	City Vakima	State Zip Code		Transaction ID: 3158
-	Yakima FEC ID number of contributing	WA 98909	1 1	Amount of Each Receipt this Period
	ederal political committee.	C		30.00
Ī	Name of Employer Conover Insurance, Inc.	Occupation Agent		
Ī	Receipt For:	Aggregate Year-to-Date	7	
	Primary General Other (specify) ▼		340.00	
	Full Name (Last, First, Middle Initial) RANDY KLEIN			Date of Receipt
1	Mailing Address 306 North Cleveland	Massillon Road		08 31 YYYY 2007
(	Dity	State Zip Code		Transaction ID: 3109
4	Akron	OH 44333		Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		30.00
(	Name of Employer Group Benefit Associates, LC	Occupation Agent		
_	Receipt For:	Aggregate Year-to-Date	7	
	Primary General Other (specify) ▼		240.00	
	Full Name (Last, First, Middle Initial) KAY KNUTSON			Date of Receipt
Ī	Mailing Address 11209 Academy Rido	e Rd., NE		08 31 2007
	City	State Zip Code		Transaction ID: 3870
_	Albuquerque	NM 87111		Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		85.00
1	Name of Employer Presbyterian Health Plan	Occupation VP Medicare Programs	s	
Ī	Receipt For:	Aggregate Year-to-Date		]
	Primary General Other (specify) ▼		780.00	
	PTOTAL (Consider This Press (colling))			145.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers g the name and address of any political committee to EALTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROSS KRAFT Mailing Address 41 Notre Dame La	ne State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Utica  FEC ID number of contributing federal political committee.	NY 13502	Amount of Each Receipt this Period  85.00
Name of Employer Meridian Group of New Yor- k, Inc. Receipt For:  Primary  General  Other (specify) ▼	Occupation President  Aggregate Year-to-Date   680.00	
Full Name (Last, First, Middle Initial)  MARY KRAMER  Mailing Address 2637 South 158th	Plaza, Suite 200	Date of Receipt  0 8 0 1 2 0 0 7
City	State Zip Code	Transaction ID: 3267
Omaha  FEC ID number of contributing federal political committee.	NE 68130	Amount of Each Receipt this Period 40.00
Name of Employer Holmes Murphy and Associates, Inc. Receipt For:  Primary General Other (specify) ▼	Occupation Vice President  Aggregate Year-to-Date ▼  320.00	
Full Name (Last, First, Middle Initial)		D. (D. )
MARY KRAMER  Mailing Address 2637 South 158th	Plaza, Suite 200	Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3274
Omaha  FEC ID number of contributing federal political committee.	NE 68130	Amount of Each Receipt this Period 40.00
Name of Employer Holmes Murphy and Associa- tes, Inc.	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (option	nal)	165.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 119 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers he name and address of any political committee to	
Full Name (Last, First, Middle Initial) DAVID KROSS Mailing Address 5556-B Cheviot Rd.	LTH UNDERWRITERS PAC (HUPAC)	Date of Receipt  0 8
City Cincinnati  FEC ID number of contributing	State Zip Code OH 45247	Transaction ID: 3159  Amount of Each Receipt this Period  30.00
Receipt For:  Primary  Other (specify)	Occupation Agent  Aggregate Year-to-Date ▼  210.00	
Full Name (Last, First, Middle Initial) MARY LANDEN Mailing Address 1000 Burnett Avenue	e, Suite 440	Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3107
Concord	CA 94520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer BenefitMall	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) SUE LARSEN		Date of Receipt
Mailing Address P.O. Box 6465		0 8 3 1 Y Y Y Y Y Y
City Santa Barbara	State Zip Code CA 93111	Transaction ID: 3897
FEC ID number of contributing federal political committee.	C 95111	Amount of Each Receipt this Period 85.00
Name of Employer Larsen Insurance	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional)		145.00

ITEMIZED RECEIPTS for each category		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEALT			
Full Name (Last, First, Middle Initial) SCOTT LEAVITT		(18176)	Date of Receipt
Mailing Address 9494 West Fairview A	ve., # C		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3106
Boise  FEC ID number of contributing federal political committee.	C	83704	Amount of Each Receipt this Period  30.00
Name of Employer Scott Leavitt Insurance & Financial S Receipt For:	Occupatio Agent Aggregate	n e Year-to-Date ▼	
Primary General Other (specify) ▼	1.99.094.0	230.00	
Full Name (Last, First, Middle Initial) MARILYN LEONARD	•		Date of Receipt
Mailing Address 3676 Woodley Drive			08 31 2007
City	State	Zip Code	Transaction ID: 3117
San Jose  FEC ID number of contributing federal political committee.	CA	95148	Amount of Each Receipt this Period  30.00
Name of Employer Beacon Ridge Health Insurance Services Receipt For: Primary General Other (specify)	Occupatio Agent Aggregate	e Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) RONALD LEVINE			Date of Receipt
Mailing Address 3965 Johns Creek Ct.,	Suite- A		0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3118
Suwanee  FEC ID number of contributing federal political committee.	GA C	30024	Amount of Each Receipt this Period  30.00
Name of Employer ARINSO International	Occupatio Vice Pres	n sident HRO Sales	7
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	90.00

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

Use separate sche for each category of Detailed Summary		FOR LINE NUMBER: PAGE 56 / 11 (check only one)    X	
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to		
Full Name (Last, First, Middle Initial) BRIAN LIECHTY		Date of Receipt	
Mailing Address 120 East Washington	n Street	08 31 2007	
City	State Zip Code	Transaction ID: 3871	
Plymouth	IN 46563	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	85.00	
Name of Employer KL Benefits	Occupation Benefits Spec		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	680.00		
Full Name (Last, First, Middle Initial) CHARLES LINEBERGER		Date of Receipt	
Mailing Address 1536-A Union Rd		08 01 2007	
City	State Zip Code	Transaction ID: 2970	
Gastonia	NC 28054	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	30.00	
Name of Employer Benefit Partners, Inc.	Occupation President		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	240.00		
Full Name (Last, First, Middle Initial) CLARK LOEWE		Date of Receipt	
Mailing Address 12200 Northwest Fw	y Ste 662	0 8 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 1959	
Houston	TX 77092	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	25.00	
Name of Employer Northwest General Insuran- ce	Occupation Agent		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	225.00		
		140.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 119 (check only one)    X
or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DALE LOWENSTEIN Mailing Address PO Box 8577  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Calabasas  FEC ID number of contributing federal political committee.	CA 91372	Amount of Each Receipt this Period  50.00
Name of Employer Dale R. Lowenstein Insura- nce Services Receipt For:  Primary General Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   300.00	
Full Name (Last, First, Middle Initial)  MAURICE LYONS  Mailing Address 301 Madison Ave	nue, 4th Floor	Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3873
New York	NY 10017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer The Medical Link, Inc.	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 745.00	
Full Name (Last, First, Middle Initial) THOMAS MAGNUS Mailing Address PO Box 999	1	Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3177
El Granada  FEC ID number of contributing federal political committee.	CA 94018	Amount of Each Receipt this Period 30.00
Name of Employer Blue Cross of California	Occupation Sales Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
SUBTOTAL of Receipts This Page (option	nal)	165.00

CHEDULE A (FEC Form 3X)  TEMIZED RECEIPTS  Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 58 / 119 (check only one)    X	
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	he name and add	ress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) RAYMOND MAGNUSON Mailing Address 9121 E. Tanque Vero	de Rd.#105, #3	309	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State AZ	Zip Code	Transaction ID: 3115
Tucson  FEC ID number of contributing federal political committee.	C	85749	Amount of Each Receipt this Period  30.00
Name of Employer Magnuson and Associates  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation agent  Aggregate	Year-to-Date ▼ 210.00	]
Full Name (Last, First, Middle Initial) VICTORIA MAJOR-BELL Mailing Address P O Box 540034			Date of Receipt  0 8 0 1 2 0 0 7
City	State	Zip Code	Transaction ID: 931
Lake Worth	FL	33454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer VMB Solutions	Occupation Agent	1	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 305.00	
Full Name (Last, First, Middle Initial) VICTORIA MAJOR-BELL			Date of Receipt
Mailing Address P O Box 540034			08 31 2007
City	State	Zip Code	Transaction ID: 1249
Lake Worth	FL	33454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer VMB Solutions	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (optional)	•		50.00

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	
Full Name (Last, First, Middle Initial) KIMBERLY MARTIN		Date of Receipt
Mailing Address 180 Charlotte Highw	ay	08 31 2007
City	State Zip Code	Transaction ID: 3271
Asheville	NC 28803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Ebenconcepts	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial) PHYLLIS MARTINSEN		Date of Receipt
Mailing Address 1108 West Boise Av	enue, Suite 100	08 31 2007
City	State Zip Code	Transaction ID: 3161
Boise	ID 83706	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Byron Hyatt Erstad & Co	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) MATTHEW MASONE	I	Date of Receipt
Mailing Address 6731 Columbia Gate	eway Dr, Suite 2	08 31 2007
City	State Zip Code	Transaction ID: 3284
Columbia	MD 21046	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer Lincoln Financial Group	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
	1	115.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports or for commercial purposes, other than usir	and Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF H		•	
Full Name (Last, First, Middle Initial) NICHOLAS MASSEI			Date of Receipt
Mailing Address 832 Humewick W	ay		08 31 2007
City	State	Zip Code	Transaction ID: 3875
Sunnyvale	CA	94087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer Massei Insurance Services Agency	Occupation agent		
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DONALD MATHERN			Date of Receipt
Mailing Address 7650 Cherrywood	Drive		08 31 2007
City	State	Zip Code	Transaction ID: 3162
Boise	ID	83704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Insurance Specialists	Occupation Agent		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) CAROL MATZNICK			Date of Receipt
Mailing Address PO Box 38905			08 31 2007
City	State	Zip Code	Transaction ID: 3104
Greensboro	NC	27438	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer North Carolina AHU	Occupation Executive		
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		220.00	
			145.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 119 (check only one)    X   11a
An	for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA	LTH UNDERV	VRITERS PAC (HUPAC)	
	Full Name (Last, First, Middle Initial) MICHAEL MATZNICK			Date of Receipt
	Mailing Address PO Box 38248	Otata	7'. 0.1.	08 31 2007
	City Greensboro	State NC	Zip Code 27438	Transaction ID: 3898
	FEC ID number of contributing federal political committee.	C	27430	Amount of Each Receipt this Period  85.00
	Name of Employer EbenConcepts Company	Occupation Agent	n	
	Receipt For:  Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 680.00	
	Full Name (Last, First, Middle Initial) CHRISTA MCCONATHY			Date of Receipt
	Mailing Address 5171 Verdugo Way			08 / 01 / 2007
	City	State	Zip Code	Transaction ID: 3874
	Ventura	CA	93004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer wellpoint	Occupation Director,	n Dental Sales	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 680.00	1
	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0 0	
	JOHN MCCONNAUGHEY  Mailing Address PO Box 805			Date of Receipt
				08 31 2007
	City West Chester	State OH	Zip Code 45071	Transaction ID: 3157  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer JRM & Associates Agency, Inc	Occupation Agent	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
	JBTOTAL of Receipts This Page (optional)			200.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to LTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) H MCDERMOTT Mailing Address 883 West Baxter Driv  City South Jordan  FEC ID number of contributing federal political committee.  Name of Employer McDermott Company & Associates Receipt For: Primary General	State Zip Code UT 84095  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt    M M
Full Name (Last, First, Middle Initial) RYAN MCDERMOTT  Mailing Address 883 West Baxter Driv  City  South Jordan  FEC ID number of contributing	725.00  /e  State Zip Code UT 84095  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer McDermott Company & Associates Receipt For: Primary General Other (specify)	Occupation Account Exec  Aggregate Year-to-Date   240.00	
Full Name (Last, First, Middle Initial) LESLIE MCGERR  Mailing Address 6125 Havelock Avenue		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lincoln  FEC ID number of contributing federal political committee.	State Zip Code NE 68507	Transaction ID: 3015  Amount of Each Receipt this Period  30.00
Name of Employer Les McGerr & Company  Receipt For:  Primary General Other (specify) ▼	Occupation President  Aggregate Year-to-Date   210.00	
SUBTOTAL of Receipts This Page (optional)		160.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sol for each category Detailed Summa	y of the
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  DANIEL MCMAHON  Mailing Address 123 East 2nd Avenue  City  Spokane  FEC ID number of contributing federal political committee.  Name of Employer Jones & Mitchell Insurance  Receipt For:		Date of Receipt  M M M / D D / Y Y Y Y Y  0 8 3 1 2 0 0 7  Transaction ID: 3431  Amount of Each Receipt this Period  50.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) TRAVIS MIDDLETON  Mailing Address 20501 Katy Freeway	# 219	Date of Receipt
City	State Zip Code	0 8 3 1 2 0 0 7  Transaction ID: 4158
Katy	TX 77450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer TradeMark Insurance Agency LLC	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	800.00
Full Name (Last, First, Middle Initial) JEFF MILES		Date of Receipt
Mailing Address 578 Washington Blvd	I., #801	0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3903
Marina del Rey	CA 90292	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer The Miles Organization, Inc.	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	510.00
SUBTOTAL of Receipts This Page (optional)		235.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 119   (check only one)   X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) GLENDAE MITCHELL			Date of Receipt
Mailing Address 736 Old Greenville	Rd		08 31 2007
City Fayetteville	State GA	Zip Code 30215	Transaction ID: 1961  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30213	25.00
Name of Employer Benevestco, Inc.	Occupation Account	n Executive	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) STEPHANIE MONETTE			Date of Receipt
Mailing Address 1510 Meadow Wood Lane			0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3097
Reno FEC ID number of contributing	NV	89502	Amount of Each Receipt this Period
federal political committee.	C		30.00
Name of Employer Saint Mary's Health Plans	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) DAVID MOORE			Date of Receipt
Mailing Address PO Box 1006			0 8 0 1 2 0 0 7
City Burlington	State NC	Zip Code 27216	Transaction ID: 3854
FEC ID number of contributing federal political committee.	C	2/210	Amount of Each Receipt this Period 85.00
Name of Employer David R. Moore, CLU & Ass- ociates	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	
SUBTOTAL of Receipts This Page (optional			140.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to ALTH UNDERWRITERS PAC (HUPAC)	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) DAVID MOORE Mailing Address PO Box 1006  City Burlington FEC ID number of contributing	State Zip Code NC 27216	Date of Receipt    M M M
rec in humber of contributing federal political committee.  Name of Employer David R. Moore, CLU & Associates Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   865.00	85.00
Full Name (Last, First, Middle Initial) WESLEY MOORE Mailing Address P O Box 604		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 4144
<u>Darlington</u>	SC 29540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer W P Moore Agency	Occupation Owner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) WESLEY MOORE		Date of Receipt
Mailing Address P O Box 604		08 31 2007
City	State Zip Code	Transaction ID: 4157
Darlington  FEC ID number of contributing federal political committee.	SC 29540	Amount of Each Receipt this Period  100.00
Name of Employer W P Moore Agency	Occupation Owner	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options	al)	285.00

	OULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 119 (check only one)    X
or for com	mercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	OF COMMITTEE (In Full) ONAL ASSOCIATION OF HEAL	TH UNDERV	WRITERS PAC (HUPAC)	
. CAROL	ame (Last, First, Middle Initial) LYNNE MULDOON			Date of Receipt
	Address 457 Main Street			08 31 2007
City Longr	mont	State CO	Zip Code 80501	Transaction ID: 3100  Amount of Each Receipt this Period
FEC ID	O number of contributing political committee.	C		30.00
Name ( Colora Group	of Employer do Employee Benefit . LLC	Occupatio Owner	n	
Receip F	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
	ame (Last, First, Middle Initial) MULREADY			Date of Receipt
Mailing	Mailing Address 1400 South Boston Avenue, 3rd Flo			0 8 3 1 2 0 0 7
City		State	Zip Code	Transaction ID: 3101
	O number of contributing political committee.	OK C	74119	Amount of Each Receipt this Period  30.00
Name of Self Er	of Employer mployed	Occupatio Agent	n	
	ot For: Primary General Other (specify) ▼	T' -	e Year-to-Date ▼ 210.00	
	ame (Last, First, Middle Initial) USSER			Date of Receipt
	Mailing Address 404 North Second Avenue, Suite B			0 8 3 1 2 0 0 7
City	ام.	State	Zip Code	Transaction ID: 3896
	number of contributing political committee.	CA	91786	Amount of Each Receipt this Period  85.00
Name ( Ray M s, Inc.	of Employer . Musser & Associate-	Occupatio Agent	n	
Receip F	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 680.00	
SUBTOT	AL of Receipts This Page (optional)			145.00

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 67/119   (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) Ashley Mutschink			Date of Receipt
Mailing Address 1017 Main Street			08 31 2007
City	State	Zip Code	Transaction ID: 4384
Bastrop	TX	78602	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Insurance Network of Texas	Occupatio Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) MICHELE MYERS			Date of Receipt
Mailing Address 85 North Danny Thom	nas Blvd.		08 31 7 2007
City	State	Zip Code	Transaction ID: 3050
Memphis 550 ID	TN	38103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer BlueCross BlueShield of Tennessee	Occupatio Agent	n	
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼		210.00	
Full Name (Last, First, Middle Initial) JOSHUA NACE			Date of Receipt
Mailing Address 936 North 34th Street	, Suite 208		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2967
Seattle	WA	98103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Dental Health Services,	Occupatio		
Inc. Receipt For:		sident Sales & Service  e Year-to-Date   T	-
Primary General	, iggi ogaic		1
Other (specify) ▼		240.00	
SUBTOTAL of Receipts This Page (optional) .			310.00

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16
NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statement may not be sold o	
NATIONAL ASSOCIATION OF HEA	LTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) JOSHUA NACE		Date of Receipt
Mailing Address 936 North 34th Stree	et, Suite 208	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Seattle	State Zip Code WA 98103	Transaction ID: 3051  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Dental Health Services, Inc.	Occupation Vice President Sales & Service	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) JOEL NEWMAN		Date of Receipt
Mailing Address 3305 115th Ave. NE	#301	08 31 2007
City	State Zip Code	Transaction ID: 3054
Bellevue	WA 98004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Colonial Supplemental Ins.	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) RON NEZAT	_1	Date of Receipt
Mailing Address PO Box 91180		08 31 7 2007
City	State Zip Code	Transaction ID: 3882
Lafayette FEC ID number of contributing	LA 70509	Amount of Each Receipt this Period 85.00
federal political committee.	C	83.00
Name of Employer Global Financial Resource- s, Inc.	Occupation Agent	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	780.00	
IIRTOTAL of Receipts This Page (optional)		145.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 119 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	e name and addı	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Gary Nitsche  Mailing Address 2838 Guenther Road  City La Grange  FEC ID number of contributing federal political committee.  Name of Employer Insurance Network of Texas  Receipt For: Primary General Other (specify)	State TX  C  Occupation agent  Aggregate	Zip Code 78945 Year-to-Date ▼	Date of Receipt    M   M   D   D   D   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) R Nitsche Mailing Address 143 East Austin  City Giddings  FEC ID number of contributing federal political committee.  Name of Employer Insurance Network of Texas  Receipt For: Primary General Other (specify)	State TX  C  Occupation Agent  Aggregate	Zip Code 78942  Year-to-Date ▼ 500.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 4388  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Robert Nitsche  Mailing Address 143 East Austin  City Giddings  FEC ID number of contributing federal political committee.  Name of Employer Insurance Network of Texas  Receipt For: Primary General Other (specify)	State TX  C  Occupation Agent  Aggregate	Zip Code 78942  Year-to-Date ▼ 500.00	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to stalk the name and address of any political committee the name and address of a name and add	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) TRISHA NORKET		Date of Receipt
Mailing Address PO Box 220748		08 31 2007
City	State Zip Code	Transaction ID: 3044
Charlotte	NC 28222	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Wachovia Insurance Servic- es	Occupation Assistant Vice President	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) MICHAEL NORRIS		Date of Receipt
Mailing Address PO Box 999		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2966
<u>Franklin</u>	NC 28744	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Wayah Insurance Agency	Occupation Account Executive	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) MICHAEL NORRIS		Date of Receipt
Mailing Address PO Box 999		0 8 3 1 2 0 0 7
City Franklin	State Zip Code NC 28744	Transaction ID: 3045
FEC ID number of contributing federal political committee.	C 20744	Amount of Each Receipt this Period  30.00
Name of Employer Wayah Insurance Agency	Occupation Account Executive	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
SUBTOTAL of Receipts This Page (optional	al)	90.00

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

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 119 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAD	the name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) FRANK NOVY Mailing Address 21238 Woodview C	ircle		Date of Receipt
City Strongsville FEC ID number of contributing	State OH	Zip Code 44149	Transaction ID: 3046  Amount of Each Receipt this Period
federal political committee.  Name of Employer Qualified Administrative Services, In Receipt For:  Primary  General  Other (specify) ▼	Occupation Agent Aggregate	Year-to-Date ▼ 340.00	30.00
Full Name (Last, First, Middle Initial) THERESA OLSON Mailing Address P. O. Box 21479			Date of Receipt    M   M   D   D     Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: 1963
Keizer  FEC ID number of contributing federal political committee.	OR	97307	Amount of Each Receipt this Period  25.00
Name of Employer Olson Insurance  Receipt For: Primary General	Occupation Agent Aggregate	Year-to-Date ▼	1
Other (specify) ▼  Full Name (Last, First, Middle Initial) TIFFANY OTIS	0 0	225.00	Date of Receipt
Mailing Address 28588 Northwestern	n Highway, Suite	9	08 31 2007
City	State	Zip Code	Transaction ID: 3056
Southfield  FEC ID number of contributing federal political committee.	C	48034	Amount of Each Receipt this Period  30.00
Name of Employer PPOM		ident Corporate Sales	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional	I)		85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	(crieck only one)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	e name and address of any political commi	person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOHN PARKER  Mailing Address 47 Laurel Hill Drive  City Niantic  FEC ID number of contributing federal political committee.  Name of Employer Parker Agency  Receipt For:  Primary General Other (specify)	State Zip Code CT 06357  C  Occupation Principal  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) JOHN PARKER  Mailing Address 47 Laurel Hill Drive  City Niantic  FEC ID number of contributing federal political committee.  Name of Employer Parker Agency  Receipt For:  Primary General Other (specify)	State Zip Code CT 06357  C  Occupation Principal  Aggregate Year-to-Date  910.0	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3921  Amount of Each Receipt this Period  90.00
Full Name (Last, First, Middle Initial) DAVID PERRY Mailing Address 1634 Ryan Street  City Lake Charles  FEC ID number of contributing federal political committee.  Name of Employer The Perry Agency, Inc.  Receipt For: Primary General Other (specify)	State Zip Code LA 70601  C  Occupation President  Aggregate Year-to-Date   440.0	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	•	210.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 73 / 119 (check only one)    X   11a
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	end statements may not be sold of used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DAVID PERRY	·	Date of Receipt
Mailing Address 1634 Ryan Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3048
Lake Charles	LA 70601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer The Perry Agency, Inc.	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	
Full Name (Last, First, Middle Initial) Joseph Phifer	L	Date of Receipt
Mailing Address 5495 Belt Line Ro	ad, Suite 155	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3863
Dallas	TX 75254	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer SafeGuard Dental & Vision	Occupation Sr. Account Executive	
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼  780.00	
Full Name (Last, First, Middle Initial) Joseph Phifer	I	Date of Receipt
Mailing Address 5495 Belt Line Ro	ad, Suite 155	08 31 2007
City	State Zip Code	Transaction ID: 3878
<u>Dallas</u>	TX 75254	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer SafeGuard Dental & Vision	Occupation Sr. Account Executive	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	
SUBTOTAL of Receipts This Page (option	nal)	200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 119 (check only one)    X   11a
A or	ny information copied from such Reports and for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	Statements may r he name and addre	not be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NATIONAL ASSOCIATION OF HEA	LTH UNDERWI	RITERS PAC (HUPAC)	
	Full Name (Last, First, Middle Initial) SUSAN PITTMAN			Date of Receipt
	Mailing Address 32418 51st Avenue,		7: 0.1	08 01 2007
	City Federal Way	State WA	Zip Code 98023	Transaction ID: 3426
	FEC ID number of contributing federal political committee.	C	90023	Amount of Each Receipt this Period  50.00
	Name of Employer Insure NW Inc.	Occupation Agent		
	Receipt For:  Primary General  Other (specify) ▼		/ear-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) SUSAN PITTMAN			Date of Receipt
	Mailing Address 32418 51st Avenue,	SW		08 / 01 / 2007
	City	State	Zip Code	Transaction ID: 3437
	Federal Way	WA	98023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer Insure NW Inc.	Occupation Agent		
	Receipt For:	Aggregate Y	/ear-to-Date ▼	
	Primary General  Other (specify) ▼		450.00	
	Full Name (Last, First, Middle Initial) TERRI PRITCHARD	<b>I</b>		Date of Receipt
	Mailing Address 1315 Westbrook Pla	za Dr., #300		0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3151
	Winston Salem	NC	27103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Third Party Marketers Of America, Inc.	Occupation Agent		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 220.00	
	SUBTOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedi for each category of Detailed Summary P	the (circuit dilly dile)
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	he name and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOHN PRUE Mailing Address 7311 West 132nd S  City Shawnee Mission  FEC ID number of contributing federal political committee.  Name of Employer Humana, Inc.  Receipt For:	State Zip Code KS 66213  C  Occupation Agent  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3864  Amount of Each Receipt this Period  85.00
Full Name (Last, First, Middle Initial) JOHN PRUE Mailing Address 7311 West 132nd S		Date of Receipt  0.00  0
City Shawnee Mission  FEC ID number of contributing federal political committee.  Name of Employer Humana, Inc.	State Zip Code KS 66213  C Occupation	Transaction ID: 3879  Amount of Each Receipt this Period  85.00
Receipt For: Primary General Other (specify)	Agent Aggregate Year-to-Date ▼ 76	5.00
Full Name (Last, First, Middle Initial) REBECCA PURDY  Mailing Address 724 South 9th Stree	t	Date of Receipt    M   M   D   D     Y   Y   Y   Y   Y   Y   Y
City <u>Las Vegas</u> FEC ID number of contributing federal political committee.	State Zip Code NV 89101	Transaction ID: 3059  Amount of Each Receipt this Period  30.00
Name of Employer The Onyx Group  Receipt For:  Primary General  Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   21	0.00
SUBTOTAL of Receipts This Page (optional		200.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 119 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	e name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SUSAN MALEY RASH Mailing Address 2108 West Laburnum	Avenue, Suit	e	Date of Receipt
City	State	Zip Code	08 31 2007
Richmond	VA	23227	Transaction ID: 3880  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	LOLLI	85.00
Name of Employer BB&T Benefit Consultants of Virginia.	Occupation Vice Pres	ident	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) JON RAUSER  Mailing Address 400 East Wisconsin A	Avenue #200		Date of Receipt
	WC1100, # 200		08 31 2007
City	State	Zip Code	Transaction ID: 4338
Milwaukee	WI	53202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		170.00
Name of Employer The Rauser Agency, Inc.	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1460.00	
Full Name (Last, First, Middle Initial) KEN RAY			Date of Receipt
Mailing Address P. O. Box 14207			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 1137
<u>Jackson</u>	MS	39236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Stewart Sneed Hewes/Banco- rpSouth Insu Receipt For:	<del></del>	f Marketing - Life/H	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 205.00	
SUBTOTAL of Receipts This Page (optional) .			265.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 119 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HE	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DENNIS RECKER Mailing Address 0.74 North Page 1.54			Date of Receipt
Mailing Address 971 North Perry St  City	State	Zip Code	0 8 0 1 2 0 0 7  Transaction ID: 2983
Ottawa  FEC ID number of contributing federal political committee.	OH C	45875	Amount of Each Receipt this Period  30.00
Name of Employer Fawcett, Lammon, Recker & Associates Receipt For:  Primary General Other (specify) ▼	<del>                                   </del>	ed Representative  Year-to-Date   240.00	
Full Name (Last, First, Middle Initial) DENNIS RECKER Mailing Address 971 North Perry St	reet		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3150
Ottawa	ОН	45875	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Fawcett, Lammon, Recker & Associates Receipt For:		n ed Representative Year-to-Date ▼	
Primary General Other (specify) ▼		270.00	
Full Name (Last, First, Middle Initial) JONI REENTS			Date of Receipt
Mailing Address 7100 N. Broadway	, #6-OPH		08 31 2007
City	State	Zip Code	Transaction ID: 3058
Denver  FEC ID number of contributing federal political committee.	C	80221	Amount of Each Receipt this Period  30.00
Name of Employer Romer, Reents & Associate- s, Inc.	Occupation Producer		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (options	al)		90.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for comm	ercial purposes, other than using the F COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NATIO	NAL ASSOCIATION OF HEAL	TH UNDERV	WRITERS PAC (HUPAC)	
. JAMES F	ne (Last, First, Middle Initial)			Date of Receipt
Mailing A	Address 3900 Halisport Drive			08 / 31 / 2007
City	.ow	State GA	Zip Code	Transaction ID: 3881
	number of contributing olitical committee.	C	30152	Amount of Each Receipt this Period  85.00
Name of Purchas ions, Inc	Employer ing Alliance Solut-	Occupatio Executive	n e Vice President	
Receipt		Aggregate	e Year-to-Date ▼ 950.00	
GLEN RI	ne (Last, First, Middle Initial) ENSCHE			Date of Receipt
Mailing A	Address 3601 Calvert, Ste. 1			08 01 7 2007
City		State	Zip Code	Transaction ID: 2980
	number of contributing olitical committee.	C	68506	Amount of Each Receipt this Period  30.00
	Employer d Insurance Servic-	Occupatio Agent	n	
	For: mary General ner (specify) ♥	, ' <u> </u>	e Year-to-Date ▼ 210.00	
	ne (Last, First, Middle Initial) ENSCHE			Date of Receipt
Mailing A	Address 3601 Calvert, Ste. 1			08 01 2007
City		State	Zip Code	Transaction ID: 2981
	number of contributing olitical committee.	C	68506	Amount of Each Receipt this Period 30.00
Name of Advance	Employer d Insurance Servic-	Occupatio Agent	n	
Receipt	For: mary General ner (specify) ▼	<del>, '                                   </del>	e Year-to-Date ▼ 240.00	
SUBTOTA	L of Receipts This Page (optional)	1		145.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 119 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	e name and add	lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) GLEN RIENSCHE Mailing Address 3601 Calvert, Ste. 1  City Lincoln  FEC ID number of contributing federal political committee.  Name of Employer Advanced Insurance Services Receipt For:  Primary General	State NE  C Occupation Agent Aggregate	Zip Code 68506 Year-to-Date ▼	Date of Receipt    M M M
Other (specify)  Full Name (Last, First, Middle Initial) GLEN RIENSCHE Mailing Address 3601 Calvert, Ste. 1	0 0	270.00	Date of Receipt  0 8 3 1 2 0 0 7
City Lincoln  FEC ID number of contributing federal political committee.  Name of Employer	State NE C Occupation	Zip Code 68506	Transaction ID: 3154  Amount of Each Receipt this Period  30.00
Advanced Insurance Services Receipt For: Primary General Other (specify)	Agent	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  MARK C RILEY  Mailing Address PO Box 1635	1		Date of Receipt  0 8 3 1 2 0 0 7
City Irmo  FEC ID number of contributing federal political committee.	State SC	Zip Code 29063	Transaction ID: 3435  Amount of Each Receipt this Period  50.00
Name of Employer American Benefit Services, LLC Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Agent Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			110.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 119   (check only one)     X
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) ELIZABETH RIOS-CARL			Date of Receipt
Mailing Address 124 West Castellar	no Drive, Suite		08 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City El Paso	State TX	Zip Code 79912	Transaction ID: 2982
FEC ID number of contributing federal political committee.	C	79912	Amount of Each Receipt this Period  30.00
Name of Employer Goodman Financial Group	Occupation VP - Fmr	n oloyee Benefits	
Receipt For: Primary General Other (specify)	<del></del>	e Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) ELIZABETH RIOS-CARL			Date of Receipt
Mailing Address 124 West Castellar	no Drive, Suite		0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3155
El Paso FEC ID number of contributing federal political committee.	C	79912	Amount of Each Receipt this Period  30.00
Name of Employer Goodman Financial Group	Occupation VP - Emr	n oloyee Benefits	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) MICHAEL RIVERA			Date of Receipt
Mailing Address 12200 Northwest F	reeway, Suite 6	62	08 31 2007
City Houston	State TX	Zip Code 77092	Transaction ID: 3899
FEC ID number of contributing federal political committee.	C	77092	Amount of Each Receipt this Period  85.00
Name of Employer Northwest General Insuran- ce	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	
SUBTOTAL of Receipts This Page (optional	-D		145.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than use NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any persing the name and address of any political committee the HEALTH UNDERWRITERS PAC (HUPAC)	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ALINE ROBERTS Mailing Address 3537 Old Conej		Date of Receipt
City Newberry Park	State Zip Code CA 91320	Transaction ID: 4336  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	170.00
Name of Employer Insurance Dimensions, Inc.  Receipt For:  Primary General  Other (specify) ▼	Occupation agent  Aggregate Year-to-Date ▼  1360.00	
Full Name (Last, First, Middle Initial) JOSEPH ROBERTS Mailing Address 7101 S. 82nd St	, #B	Date of Receipt  0 8  0 1  0 7  0 7  0 7  0 7  0 7  0 7  0 7
City	State Zip Code	Transaction ID: 4147
Lincoln  FEC ID number of contributing federal political committee.	NE 68516	Amount of Each Receipt this Period  100.00
Name of Employer Midlands Financial Benefi- ts	Occupation Registered Representative	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial) JOSEPH ROBERTS		Date of Receipt
Mailing Address 7101 S. 82nd St	, #B	08 31 2007
City Lincoln	State Zip Code NE 68516	Transaction ID: 4155  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Midlands Financial Benefi- ts	Occupation Registered Representative	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (opt	ional)	370.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 119 (check only one)    X
or for commercial purposes, other than usin	and Statements may not be sold or used by any persong the name and address of any political committee to EALTH UNDERWRITERS PAC (HUPAC)	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) WILLIAM ROBINSON Mailing Address 100 S. Sunrise W	ay, PMB 364	Date of Receipt
		08 01 2007
City Palm Springs	State Zip Code CA 92262	Transaction ID: 3861
FEC ID number of contributing federal political committee.	C 92202	Amount of Each Receipt this Period  85.00
Name of Employer Palm Canyon Insurance Age- ncy Receipt For: Primary General	Occupation Agent  Aggregate Year-to-Date ▼	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  WILLIAM ROBINSON  Mailing Address 100 S. Sunrise W	655.00	Date of Receipt
City Palm Springs	State Zip Code CA 92262	Transaction ID: 3900  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Palm Canyon Insurance Agency Receipt For:  Primary General Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   740.00	85.00
Full Name (Last, First, Middle Initial) WILLIAM ROBINSON	l	Date of Receipt
Mailing Address 739 East Jackson	Street	08 31 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3078
<u>Martinsville</u>	IN 46151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer American Community Mutual Insurance	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optio	nal)	200.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any p the name and address of any political committee ALTH UNDERWRITERS PAC (HUPAC)	person for the purpose of soliciting contributions see to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) EUGENE ROWE	TETT SIDETWITTERS THE (HOTHE)	Date of Receipt
Mailing Address 16000 Ventura Blvd		0 8 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2979
Encino  FEC ID number of contributing federal political committee.	CA 91436	Amount of Each Receipt this Period  30.00
Name of Employer R & R Insurance and Retir- ement Servic Receipt For:	Occupation Agent Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial) EUGENE ROWE		Date of Receipt
Mailing Address 16000 Ventura Blvd	, Suite 1103	0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3173
Encino	CA 91436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer R & R Insurance and Retir- ement Servic	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  270.00	
Full Name (Last, First, Middle Initial) FRANCIS RUGGIERO		Date of Receipt
Mailing Address 15 Kennedy Drive		08 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3902
Budd Lake	NJ 07828	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer John J. Slattery Associat- es	Occupation Director of Broker Development	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00	
SURTOTAL of Receipts This Page (entions	)	145.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 119 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	Statements may not be sold or used by any pene name and address of any political committee.  LTH UNDERWRITERS PAC (HUPAC)	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CRISTY RUSSELL GUPTO Mailing Address 357 Sanford Drive  City Morganton  FEC ID number of contributing federal political committee.  Name of Employer Colonial Supplemental Insurance Receipt For: Primary General Other (specify)	State Zip Code NC 28655  C  Occupation Agent  Aggregate Year-to-Date   400.00	Date of Receipt  M M J J J J J J J J J J J J J J J J J
Full Name (Last, First, Middle Initial) VIRGINIA SAFFORD  Mailing Address 5753 North River Ros  City  Waterville  FEC ID number of contributing federal political committee.  Name of Employer Virginia D. Safford Group Health Bene Receipt For:  Primary General Other (specify)	State Zip Code OH 43566  C Occupation Agent Aggregate Year-to-Date  340.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 2978  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) VIRGINIA SAFFORD  Mailing Address 5753 North River Roa  City  Waterville  FEC ID number of contributing federal political committee.  Name of Employer Virginia D. Safford Group Health Bene  Receipt For:  Primary General  Other (specify)	State Zip Code OH 43566  C  Occupation Agent  Aggregate Year-to-Date  370.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		110.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS  Any information copied from such Report	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 119 (check only one)    X
or for commercial purposes, other than u	HEALTH UNDERWRITERS PAC (HUPAC)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) WAYNE SAKAMOTO		Date of Receipt
Mailing Address 2664 White Cec	dar Lane	08 31 2007
City	State Zip Code	Transaction ID: 3057
Naples  FEC ID number of contributing federal political committee.	FL 34109	Amount of Each Receipt this Period  30.00
Name of Employer Health Insurance Interact-	Occupation	
ive, Inc.  Receipt For:  Primary  Other (specify)   Other (specify)	Agent Aggregate Year-to-Date ▼ 310.00	
Full Name (Last, First, Middle Initial) STEPHEN SALAMON		Date of Receipt
Mailing Address PO Box 4252  City	State Zip Code	08 01 2007
Timonium	MD 21094	Transaction ID: 977  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Heritage Financial Consul- tants, LLC	Occupation Agent	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	
Full Name (Last, First, Middle Initial) STEPHEN SALAMON		Date of Receipt
Mailing Address PO Box 4252		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 1272
Timonium	MD 21094	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Heritage Financial Consul- tants, LLC	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 395.00	
SUBTOTAL of Receipts This Page (opt	tional)	50.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	M 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	of the X 11a 11b 11c 12 Page 13 14 15 16	
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full)	oorts and Statements may not be sold or used by any per n using the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.	
NATIONAL ASSOCIATION C	OF HEALTH UNDERWRITERS PAC (HUPAC)		
Full Name (Last, First, Middle Initia STEPHEN SALAMON	l)	Date of Receipt	
Mailing Address PO Box 4252		08 31 7 2007	
City	State Zip Code	Transaction ID: 3901	
Timonium	MD 21094	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	85.00	
Name of Employer Heritage Financial Consul- tants, LLC	Occupation Agent		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	480.00		
Full Name (Last, First, Middle Initia	JI)	Date of Receipt	
Mailing Address 1521 Technol	ogy Parkway	08 31 7 2007	
City	State Zip Code	Transaction ID: 3077	
Cedar Falls	IA 50613	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	30.00	
Name of Employer PIPAC	Occupation Agent		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	240.00		
Full Name (Last, First, Middle Initia ALFONSO SCHIEBEL	JI)	Date of Receipt	
Mailing Address 200 Sandy Sp	orings Pl., # 300A	0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 3194	
Atlanta	GA 30328	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	33.00	
Name of Employer Schiebel & Associates, LLC dba Shopbe	Occupation Agent		
Receipt For:	Aggregate Year-to-Date ▼	_	
Primary ☐ General Other (specify) ▼	364.00		
	optional)	148.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 119 (check only one)    X		
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to the LTH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) MARK SCHLANGE Mailing Address P. O. Box 700  City Bellevue  FEC ID number of contributing federal political committee.  Name of Employer NP Dodge Insurance  Receipt For: Primary General Other (specify)	State Zip Code NE 68005  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt  M M M D D D 2007  Transaction ID: 3001  Amount of Each Receipt this Period  30.00		
Full Name (Last, First, Middle Initial) MARK SCHLANGE Mailing Address P. O. Box 700  City Bellevue  FEC ID number of contributing federal political committee.  Name of Employer NP Dodge Insurance  Receipt For: Primary General Other (specify)	State Zip Code NE 68005  C  Occupation Agent  Aggregate Year-to-Date  270.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3076  Amount of Each Receipt this Period  30.00		
Full Name (Last, First, Middle Initial) MEL SCHLESINGER  Mailing Address PO Box 30100  City Winston Salem  FEC ID number of contributing federal political committee.  Name of Employer The Rainmakers Group, Inc.  Receipt For: Primary General Other (specify)	State Zip Code NC 27130  C  Occupation Agent  Aggregate Year-to-Date   880.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y		
SUBTOTAL of Receipts This Page (optional)		145.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 88 / 119 (check only one)  X 11a 11b 11c 12 15 16 16	
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persithe name and address of any political committee to	
Full Name (Last, First, Middle Initial) Kenneth Schmidt  Mailing Address 1332 Hunters Hollov  City Eureka  FEC ID number of contributing federal political committee.  Name of Employer Mengel, Surdyke, Murphy and Finke Receipt For:  Primary General Other (specify)	<u> </u>	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Kenneth Schmidt Mailing Address 1332 Hunters Hollov  City Eureka  FEC ID number of contributing federal political committee.  Name of Employer Mengel, Surdyke, Murphy	v Court  State Zip Code MO 63025  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mergei, Surdyke, Murphy and Finke Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) ALAN SCHULMAN  Mailing Address 2003 Little Haven Center of the Company of th	Benefits Consultant  Aggregate Year-to-Date   900.00	Date of Receipt
City Olney  FEC ID number of contributing federal political committee.  Name of Employer Insurance Benefits & Advisors  Receipt For:  Primary General Other (specify)	State Zip Code MD 20832  C  Occupation Agent  Aggregate Year-to-Date  250.00	Transaction ID: 3002  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (optional	)	230.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 89 / 119 (check only one)  X 11a 11b 11c 12 15 16 16	
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	Statements may not be sold or used by any personame and address of any political committee to	
Full Name (Last, First, Middle Initial) ALAN SCHULMAN Mailing Address 2003 Little Haven Cod City Olney FEC ID number of contributing federal political committee.  Name of Employer Insurance Benefits & Advisors Receipt For: Primary General Other (specify)  Other (specify)	` ,	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) JAMES SCHULZ  Mailing Address 7101 S. 82nd St.  City  Lincoln  FEC ID number of contributing federal political committee.  Name of Employer Midlands Financial Benefits  Receipt For:  Primary General Other (specify)	State Zip Code NE 68516  C  Occupation Agent  Aggregate Year-to-Date ▼  680.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  DAN SCHWARTZER  Mailing Address 4600 American Parkv  City  Madison  FEC ID number of contributing federal political committee.  Name of Employer  WAHU  Receipt For:  Primary General Other (specify)	vay, Suite 208  State Zip Code WI 53718  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 3060  Amount of Each Receipt this Period  30.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		145.00

or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to EALTH UNDERWRITERS PAC (HUPAC)	Date of Receipt
Full Name (Last, First, Middle Initial) GREG SEIFERT Mailing Address PO Box 189	EALTH UNDERWRITERS PAC (HUPAC)	<del>-</del>
GREG SEIFERT  Mailing Address PO Box 189		<del>-</del>
City		08 / 31 / 2007
Vancouver	State Zip Code WA 98666	Transaction ID: 3890  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Biggs Insurance Services	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1280.00	
Full Name (Last, First, Middle Initial) DOUGLAS SHEFFER	Mari	Date of Receipt
Mailing Address 110 International V	•	08 31 2007
City Springfield	State Zip Code OR 97477	Transaction ID: 3174  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 37477	30.00
Name of Employer PacificSource Health Plans	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  220.00	
Full Name (Last, First, Middle Initial) Kenneth Sherlin		Date of Receipt
Mailing Address P. O. Box 1550		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Asheville	State Zip Code NC 28801	Transaction ID: 2999
FEC ID number of contributing federal political committee.	C 28001	Amount of Each Receipt this Period  30.00
Name of Employer Benefit Design Group	Occupation Marketing Partner	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (option	al)	145.00

CHEDULE A (FEC Form 3X FEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 91 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16	
r for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Kenneth Sherlin Mailing Address P. O. Box 1550  City Asheville FEC ID number of contributing federal political committee.  Name of Employer Benefit Design Group  Receipt For: Primary General Other (specify)	State Zip Code NC 28801  C  Occupation Marketing Partner  Aggregate Year-to-Date  270.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) BOB SHUPE Mailing Address PO Box 2344  City Brentwood	State Zip Code TN 37024	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
FEC ID number of contributing federal political committee.  Name of Employer ESP, Inc  Receipt For: Primary General Other (specify)	Occupation President, CEO  Aggregate Year-to-Date   675.00	50.00
Full Name (Last, First, Middle Initial) ROBERT SICHMELLEA Mailing Address 585 East Los Angele	,	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Simi Valley  FEC ID number of contributing federal political committee.	State Zip Code CA 93065	Transaction ID: 3068  Amount of Each Receipt this Period  30.00
Name of Employer Acme Insurance and Financial Services Receipt For:  Primary  General  Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   240.00	
SUBTOTAL of Receipts This Page (optional)		110.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS  Any information copied from such Re	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 119 (check only one)    X
or for commercial purposes, other that NAME OF COMMITTEE (In Full)	on using the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initian ROBERT SICHMELLEA		Date of Receipt
Mailing Address 585 East Los	Angeles Avenue, #n	08 31 2007
City	State Zip Code	Transaction ID: 3069
Simi Valley  FEC ID number of contributing federal political committee.	CA 93065	Amount of Each Receipt this Period  30.00
Name of Employer Acme Insurance and Financial Services	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	]
Full Name (Last, First, Middle Initial)  STEVEN SINKLER	al)	Date of Receipt
Mailing Address 4320 114th S	dt.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3000
<u>Urbandale</u>	IA 50322	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Coventry Health Care of lowa	Occupation Director of Individual Sales	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial STEVEN SINKLER	al)	Date of Receipt
Mailing Address 4320 114th S	St.	0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3070
<u>Urbandale</u>	IA 50322	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Coventry Health Care of Jowa	Occupation Director of Individual Sales	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
SUBTOTAL of Receipts This Page	(optional)	90.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 119 (check only one)    X
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per he name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) JON SIVERS  Mailing Address 10731 Treena St., #  City San Diego  FEC ID number of contributing federal political committee.  Name of Employer Ace Benefits Insurance Se-		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Ace Benefits' Insurance Services, Inc.  Receipt For:  Primary  Other (specify) ▼	Agent Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial) ROBERT SKINNER Mailing Address 6612 East 75th Street	et, Suite 200	Date of Receipt  0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 1964
Indianapolis	IN 46250	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer GroupLink, Inc.	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) DESMOND SLATTERY		Date of Receipt
Mailing Address PO Box 256		08 31 2007
City	State Zip Code	Transaction ID: 3883
Spring Lake	NJ 07762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer John J. Slattery Associates Inc.  Receipt For:  Primary  General  Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date   680.00	
SUBTOTAL of Receipts This Page (optional)		140.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 94/119   (check only one)     X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) GREGORY SMITH			Date of Receipt
Mailing Address 2201 Woodlawn Ro	oad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lincoln	State IL	Zip Code 62656	Transaction ID: 1495
FEC ID number of contributing federal political committee.	C	02030	Amount of Each Receipt this Period  15.00
Name of Employer Group Marketing Services Inc.	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) PAUL SMITH	<b>I</b>		Date of Receipt
Mailing Address 124 Washington St	reet		0 8 3 1 2 0 0 7
City Middletown	State CT	Zip Code 06457	Transaction ID: 3888
FEC ID number of contributing federal political committee.	C	00437	Amount of Each Receipt this Period  85.00
Name of Employer AmeriBen Alliance, LLC	Occupation Agent	n	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) JAMES SOUTHARD			Date of Receipt
Mailing Address 7204-B West Friend	dly Avenue		08 31 2007
City	State	Zip Code	Transaction ID: 3066
Greensboro  FEC ID number of contributing federal political committee.	NC C	27410	Amount of Each Receipt this Period 30.00
Name of Employer Professional Benefits Associates, LLC	Occupation Partner		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 310.00	
SUBTOTAL of Receipts This Page (optional	al)		130.00

SCHEDULE A (FEC Form 3X)  ITEMIZED RECEIPTS  Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 95 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1	
or for commercial  NAME OF CO	opied from such Reports and S purposes, other than using the MMITTEE (In Full) ASSOCIATION OF HEALT	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	st, First, Middle Initial)			Date of Receipt
Mailing Addres	s 7204-B West Friendly	Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 3204
Greensboro FEC ID numbe federal politica	er of contributing I committee.	C	27410	Amount of Each Receipt this Period  35.00
Name of Empl Professional E ociates, LLC Receipt For: Primary Other (s	General	Occupation Partner Aggregate	Year-to-Date ▼	
Full Name (La: ANNE SPERLII Mailing Addres				Date of Receipt
City		State	Zip Code	0 8 3 1 2 0 0 7  Transaction ID: 3269
Santa Fe		NM	87508	Amount of Each Receipt this Period
FEC ID number federal political	er of contributing I committee.	C		40.00
Name of Empl Daniels Insura	oyer nce, Inc.	Occupatio Employe	n e Benefits Manager	
Receipt For: Primary Other (s	☐ General pecify) ▼	Aggregate	Year-to-Date ▼ 420.00	
Full Name (La:	st, First, Middle Initial)			Date of Receipt
Mailing Addres	s PO Box 2073			0 8 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 2986
Wichita Fall	S	TX	76307	Amount of Each Receipt this Period
FEC ID numbe federal politica	er of contributing I committee.	C		30.00
gherty Insur	oyer on-Mason-Dau-	Occupatio Agent		
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of F	eceipts This Page (optional)			105.00

SCHEDULE A (FEC Form 3X)  TEMIZED RECEIPTS  Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 96 / 119 (check only one)    X   11a
ny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	he name and add	lress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) JACKIE SPRAGINS Mailing Address PO Box 2073  City Wichita Falls  FEC ID number of contributing federal political committee.  Name of Employer Allred-Thompson-Mason-Dau-	State TX C	Zip Code 76307	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3170  Amount of Each Receipt this Period  30.00
gherty Insur  Receipt For:  Primary General  Other (specify) ▼	Agent Aggregate	Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) NORMAN SPRINGER Mailing Address 1626 East 203rd Street	eet		Date of Receipt  0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3171
Westfield	IN	46074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer American Community Mutual	Occupation Agent	1	
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial)			
Mailing Address PO Box 41068			Date of Receipt  0 8 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: 3062
Brecksville	OH	44141	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Statz & Associates	Occupation agent	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	
SUBTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>N</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97/119   (check only one)   X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) JAMES STENGER			Date of Receipt
Mailing Address 268 South Street			08 31 2007
City	State	Zip Code	Transaction ID: 4337
Morristown	NJ	07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		170.00
Name of Employer NAS Financial Services	Occupation Principal		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1460.00	
Full Name (Last, First, Middle Initial) RODNEY STUART	<b>I</b>		Date of Receipt
Mailing Address 9755 Randall Dr., #	<b>‡</b> 101		08 01 7 2007
City	State	Zip Code	Transaction ID: 3428
Indianapolis	IN	46280	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Benefit Innovations LLP	Occupation Agent	n	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 985.00	7
Full Name (Last, First, Middle Initial)	0 0		-
RODNEY STUART			Date of Receipt
Mailing Address 9755 Randall Dr., #	<sup>‡</sup> 101		08 / 31 / Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3442
Indianapolis	IN	46280	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Benefit Innovations LLP	Occupation Agent	n	
Receipt For:	Aggregate	e Year-to-Date ▼	_
Primary General Other (specify) ▼	0 0	1035.00	
			270.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>^</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98/119   (check only one)   X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) RODNEY STUART			Date of Receipt
Mailing Address 9755 Randall Dr., #	<b>#</b> 101		0 8 3 1 2 0 0 7
City Indianapolis	State IN	Zip Code 46280	Transaction ID: 3889  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40200	85.00
Name of Employer Benefit Innovations LLP	Occupation Agent	n	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1120.00	
Full Name (Last, First, Middle Initial) JAMES SUGDEN	<b> </b>		Date of Receipt
Mailing Address 2000 S Colorado To	ower #1 #9000		0 8 3 1 Y Y Y Y Y
City Denver	State CO	Zip Code 80222	Transaction ID: 3164
FEC ID number of contributing federal political committee.	C	00222	Amount of Each Receipt this Period  30.00
Name of Employer Employee Benefit Solution-	Occupation Agent	n	
s, Inc.* Receipt For:		e Year-to-Date ▼	
Primary ☐ General Other (specify) ▼		210.00	
Full Name (Last, First, Middle Initial) HENRY SULLIVAN			Date of Receipt
Mailing Address 523 Camilla Avenue	е		08 31 2007
City	State	Zip Code	Transaction ID: 3067
Roanoke  EEC ID number of contributing	VA	24014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Sullivan & Associates	Occupation Media Re	n elations Chair Region 1	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		240.00	
			145.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 119 (check only one)    X   11a
A oı	ny information copied from such Reports and for commercial purposes, other than using the such as a such a	Statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	LTH UNDER\	WRITERS PAC (HUPAC)	
	Full Name (Last, First, Middle Initial) JAMES SUMMERS			Date of Receipt
	Mailing Address 8420 West Dodge Ro	oad, Suite 510	)	08 01 2007
	City	State	Zip Code	Transaction ID: 4222
	Omaha	NE	68114	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Senior Market Sales, Inc.	Occupation Agent	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		975.00	
_	Full Name (Last, First, Middle Initial) JAMES SUMMERS			Date of Receipt
	Mailing Address 8420 West Dodge Ro	oad, Suite 510	)	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 4225
	<u>Omaha</u>	NE	68114	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Senior Market Sales, Inc.	Occupation Agent	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		1100.00	
	Full Name (Last, First, Middle Initial) RYAN THORN			Date of Receipt
	Mailing Address 10342 South Springo	rest Lane		08 01 2007
	City	State	Zip Code	Transaction ID: 3012
	South Jordan	UT	84095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Ryan P. Thorn Insurance Planning, Inc.	Occupation Agent	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		490.00	
Г				280.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 119 (check only one)    X
NAME OF COMMITTEE (In Full)	ad Statements may not be sold or used by any pers the name and address of any political committee to	
Full Name (Last, First, Middle Initial) RYAN THORN	ALTH UNDERWRITERS PAC (HUPAC)	Date of Receipt
Mailing Address 10342 South Spring City	gcrest Lane State Zip Code	0 8 3 1 2 0 0 7 Transaction ID: 3063
South Jordan	UT 84095	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Ryan P. Thorn Insurance Planning, Inc. Receipt For:  Primary General  Other (specify) ▼	Occupation Agent  Aggregate Year-to-Date ▼  520.00	
Full Name (Last, First, Middle Initial) DANIEL TOMPKINS  Mailing Address PO Box 1810		Date of Receipt
City	State Zin Code	08 01 2007
City <u>Roswell</u>	State Zip Code GA 30077	Transaction ID: 3268  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Admin America	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) DANIEL TOMPKINS		Date of Receipt
Mailing Address PO Box 1810		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 3270
Roswell FEC ID number of contributing federal political committee.	GA 30077	Amount of Each Receipt this Period 40.00
Name of Employer Admin America	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optional	I)	110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL		on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JENNIFER TOUPS  Mailing Address PO Box 113113  City Metairie  FEC ID number of contributing federal political committee.  Name of Employer Business Insurance Group  Receipt For: Primary General Other (specify)	State Zip Code LA 70011  C  Occupation Director of Marketing  Aggregate Year-to-Date   240.00	Date of Receipt  M M M O 1 2007  Transaction ID: 3011  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) JENNIFER TOUPS  Mailing Address PO Box 113113  City  Metairie  FEC ID number of contributing federal political committee.  Name of Employer Business Insurance Group  Receipt For: Primary General Other (specify)	State Zip Code LA 70011  C  Occupation Director of Marketing Aggregate Year-to-Date  270.00	Date of Receipt  M M M J D D J D J D J D J D J D J D J D
Full Name (Last, First, Middle Initial) ERIC TOWNSEND  Mailing Address 1658 Presto Avenue  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer Mutual of Omaha  Receipt For:  Primary General Other (specify)	State Zip Code IN 46224  C  Occupation Agent  Aggregate Year-to-Date ▼  210.00	Date of Receipt  M M M O D D O Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 119 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) JANET TRAUTWEIN-STOKES  Mailing Address 2000 N 14th Street  City	State	Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Arlington  FEC ID number of contributing federal political committee.	C	22201	Amount of Each Receipt this Period  85.00
Name of Employer NAHU  Receipt For:  Primary  General  Other (specify) ▼	Occupatio CEO Aggregate	e Year-to-Date ▼ 680.00	
Full Name (Last, First, Middle Initial) JANET TRAUTWEIN-STOKES  Mailing Address 2000 N 14th Street			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 3891
Arlington	VA	22201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer NAHU	Occupatio CEO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 765.00	]
Full Name (Last, First, Middle Initial) ALBERT TRAVASOS			Date of Receipt
Mailing Address 2255 Glades Road,	Suite 420A		08 / 000 / 2007
City <u>Boca Raton</u>	State FL	Zip Code	Transaction ID: 3285
FEC ID number of contributing federal political committee.	C	33431	Amount of Each Receipt this Period 45.00
Name of Employer John Hancock	Occupatio Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optional)	)		215.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to a committee to be sold or used by any person the name and address of any political committee to be sold or used by any person to be	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT TRETTER  Mailing Address 13016 Delmar Street  City Leawood  FEC ID number of contributing federal political committee.  Name of Employer MGIS Inc  Receipt For: Primary General Other (specify)	State Zip Code KS 66209  C  Occupation Regional Mrkt. Manager  Aggregate Year-to-Date   350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) CHARLES TROGDON Mailing Address 7910 North Ingram A  City Fresno FEC ID number of contributing federal political committee.  Name of Employer Gallagher Benefit Services  Receipt For:	venue, Suite 2  State Zip Code CA 93711  C  Occupation Agent  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MARILYN VAN SANT Mailing Address 268 South Street  City Morristown  FEC ID number of contributing federal political committee.	340.00  State Zip Code NJ 07960  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Marschil Ins. T/A Northea- st Ins Svs. Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Occupation Agent  Aggregate Year-to-Date   780.00	165.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 119 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to	
Full Name (Last, First, Middle Initial) WENDY VANDERWATER Mailing Address 515 West Southwest  City Tyler  FEC ID number of contributing federal political committee.  Name of Employer Threlkeld & Company Insurance Receipt For: Primary General Other (specify)	·	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) ROBERT VERNON Mailing Address PO Box 18251  City Roanoke FEC ID number of contributing federal political committee.  Name of Employer Southwind Health Partners  Receipt For:	State Zip Code VA 24014  C  Occupation President  Aggregate Year-to-Date ▼	Date of Receipt    M M M
Primary General Other (specify)  Full Name (Last, First, Middle Initial) ROBERT VERNON Mailing Address PO Box 18251  City Roanoke FEC ID number of contributing federal political committee.	240.00  State Zip Code VA 24014  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y  O 8 31 2007  Transaction ID: 3130  Amount of Each Receipt this Period  30.00
Name of Employer Southwind Health Partners  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Occupation President  Aggregate Year-to-Date   270.00	90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 119 (check only one)    X
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) PETER VINTON Mailing Address 9480 Deereco Road		Date of Receipt
City Timonium FEC ID number of contributing	State Zip Code MD 21093	Transaction ID: 3552  Amount of Each Receipt this Period  80.00
Receipt For:  Primary  Other (specify)  General	Occupation Agent  Aggregate Year-to-Date   640.00	
Full Name (Last, First, Middle Initial) CHARLES WAGNER Mailing Address PO Box 9		Date of Receipt  0 8 0 1 2 0 0 7
City  Burwell  FEC ID number of contributing federal political committee.	State Zip Code NE 68823	Amount of Each Receipt this Period  50.00
Name of Employer Town and Country Insurance Agency, In Receipt For:  Primary General Other (specify) ▼	Occupation President  Aggregate Year-to-Date   800.00	
Full Name (Last, First, Middle Initial) TIMOTHY WALSH Mailing Address PO Box 417		Date of Receipt
City Hampstead FEC ID number of contributing federal political committee.	State Zip Code NC 28443	Transaction ID: 3128  Amount of Each Receipt this Period  30.00
Name of Employer Advanced Insurance Systems	Occupation Agent	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  225.00	
SUBTOTAL of Receipts This Page (optional)	)	160.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 119 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal name and address of any political committee to a solution. TH UNDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JESSICA WALTMAN Mailing Address 10 Doyle Road  City Wayne  FEC ID number of contributing federal political committee.  Name of Employer NAHU  Receipt For: Primary General Other (specify)	State Zip Code PA 19087  C  Occupation VP, Policy and State Affairs  Aggregate Year-to-Date  210.00	Date of Receipt  M M M O 1  O 1  Transaction ID: 2987  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) JESSICA WALTMAN Mailing Address 10 Doyle Road  City Wayne  FEC ID number of contributing federal political committee.  Name of Employer NAHU  Receipt For: Primary General Other (specify)	State Zip Code PA 19087  C  Occupation VP, Policy and State Affairs  Aggregate Year-to-Date  240.00	Date of Receipt  M M M J D D J Y Y Y Y Y Y  Transaction ID: 3182  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) CHARLES WEBB  Mailing Address 15 S. Jefferson Stree  City Roanoke  FEC ID number of contributing federal political committee.  Name of Employer Benefits Group, Inc.  Receipt For: Primary General Other (specify)	State Zip Code VA 24011  C  Occupation Agent  Aggregate Year-to-Date   510.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		145.00

SCHEDULE A ( ITEMIZED REC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 119 (check only one)    X
or for commercial purpos  NAME OF COMMITT	ses, other than using the name TEE (In Full)	onts may not be sold or used by any personand address of any political committee to IDERWRITERS PAC (HUPAC)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Firs DAN WEBB Mailing Address 21	08 24th St Ste 2	77.0.1	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bakersfield		tate Zip Code CA 93301	Transaction ID: 3905
FEC ID number of co	ntributing		Amount of Each Receipt this Period  85.00
Name of Employer The Webb Insurance Receipt For: Primary Other (specify)	Ag General	cupation arketing Manager gregate Year-to-Date 425.00	
Full Name (Last, First JENNIFER WENKE Mailing Address 13	t, Middle Initial) 195 Panther Lane, Suite 10	00	Date of Receipt  0 8 3 1 2 0 0 7
City		tate Zip Code	Transaction ID: 3137
<u>Naples</u>	F	•	Amount of Each Receipt this Period
FEC ID number of co federal political comm			30.00
Name of Employer Lutgert Insurance		cupation count Executive	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 240.00	
Full Name (Last, Firs			Date of Receipt
	O Box 925		0 8 0 1 2 0 0 7
City	S	tate Zip Code	Transaction ID: 2985
<u>Jackson</u>	Λ.	1S 39205	Amount of Each Receipt this Period
FEC ID number of co federal political comm			30.00
Name of Employer American Public Life rance Company	ווטן	cupation rector of Agency Development	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipt	s This Page (optional)		145.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>^)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 108/119   (check only one)     X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA	ALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) C.L. WESTMORELAND			Date of Receipt
Mailing Address PO Box 925			0 8 3 1 2 0 0 7
City Jackson	State MS	Zip Code 39205	Transaction ID: 3167  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer American Public Life Insu- rance Company Receipt For:  Primary General Other (specify) ▼		of Agency Development  e Year-to-Date ▼  270.00	
Full Name (Last, First, Middle Initial) LISA WETHERTON	L		Date of Receipt
Mailing Address 4180 Providence Ro	t		08 01 2007
City	State	Zip Code	Transaction ID: 1810
<u>Dahlonega</u>	GA	30533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Benefit Design Strategies	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 285.00	
Full Name (Last, First, Middle Initial) LISA WETHERTON			Date of Receipt
Mailing Address 4180 Providence Ro	t		08 31 2007
City Dahlonega	State GA	Zip Code	Transaction ID: 1834
FEC ID number of contributing federal political committee.	C	30533	Amount of Each Receipt this Period  20.00
Name of Employer Benefit Design Strategies	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 305.00	
SUBTOTAL of Receipts This Page (optional	)		70.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persing the name and address of any political committee the HEALTH UNDERWRITERS PAC (HUPAC)	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	IEAETT ONDERWITTERO FAO (NOFAO)	Date of Receipt
. RICHARD WHEELER  Mailing Address 617 Highway 71,	Building 2-6	0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3138
Brielle  FEC ID number of contributing federal political committee.	NJ 08730	Amount of Each Receipt this Period  30.00
Name of Employer Richard E. Wheeler Insura- nce Services Receipt For:  Primary General Other (specify) ▼	Occupation Sales agent  Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial) PAULA WILSON Mailing Address PO Box 892740		Date of Receipt
City	State Zip Code	0 8 0 1 2 0 0 7  Transaction ID: 2990
<u>Temecula</u>	CA 92589	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Paula Wilson, Inc.	Occupation Agent	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) PAULA WILSON		Date of Receipt
Mailing Address PO Box 892740		0 8 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 3163
<u>Temecula</u>	CA 92589	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Paula Wilson, Inc.	Occupation Agent	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optic	onal)	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 119 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) STEVEN WILSON Mailing Address 1151 Red Mile Road  City Lexington  FEC ID number of contributing federal political committee.  Name of Employer Benefit Insurance Marketing Receipt For: Primary General	State Zip Code KY 40504  C  Occupation Agent  Aggregate Year-to-Date ▼	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) SUE WILSON Mailing Address P. O. Box 12816  City Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Sue Wilson Brokerage, Inc.  Receipt For: Primary General Other (specify) ▼	State Zip Code OK 73157  C  Occupation President  Aggregate Year-to-Date  225.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 1965  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) OWEN WINGATE  Mailing Address 155 Professional Dr  City Ponte Vedra Beach  FEC ID number of contributing federal political committee.  Name of Employer Wingate Insurance Group, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code FL 32082  C  Occupation Agent  Aggregate Year-to-Date  320.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for eac	eparate schedule(s) th category of the ed Summary Page	FOR LINE NUMBER: PAGE 111 / 119 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of ar	ny political committee to	on for the purpose of soliciting contributions
NATIONAL ASSOCIATION OF HE Full Name (Last, First, Middle Initial)	EALTH UNDERWRITERS	S PAC (HUPAC)	
TAMMY WINN  Mailing Address 5113 Southwest Pa	arkway #150		Date of Receipt
City Austin	State Zip C		Transaction ID: 3009  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Pro Insurance Services	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	Pate ▼ 220.00	
Full Name (Last, First, Middle Initial) TAMMY WINN Mailing Address			Date of Receipt
Mailing Address 5113 Southwest Pa	arkway #150		08 31 2007
City	State Zip C		Transaction ID: 3135
Austin	TX 7873	85	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Pro Insurance Services	Occupation Agent		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	250.00	
Full Name (Last, First, Middle Initial) SHELLY WINSON	•		Date of Receipt
Mailing Address PO Box 1914			08 31 2007
City Scottsdale	State Zip C AZ 8525		Transaction ID: 3165
FEC ID number of contributing federal political committee.	C 8525	1	Amount of Each Receipt this Period  30.00
Name of Employer Principal Financial Group	Occupation Business Develop	oment Director,	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	ate ▼ 340.00	
SUBTOTAL of Receipts This Page (option			90.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 112/119   (check only one)     X
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	EALTH UNDERV	VRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) STEVEN WISNESKI			Date of Receipt
Mailing Address 4265 Grand Haven	n Road, Suite 20	0	08 31 2007
City Muskegon	State MI	Zip Code 49441	Transaction ID: 3136
FEC ID number of contributing federal political committee.	C	49441	Amount of Each Receipt this Period  30.00
Name of Employer Creative Benefit Systems, Inc.	Occupation Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) ROSANNE WOLFE	I		Date of Receipt
Mailing Address 4600 East Swans	Nest Road		0 8 3 1 2 0 0 7
City	State AZ	Zip Code	Transaction ID: 1270
Tucson  FEC ID number of contributing federal political committee.	C	85718	Amount of Each Receipt this Period
Name of Employer Wolfe Insurance & Consult- ants, LLC	Occupation Agent	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 205.00	
Full Name (Last, First, Middle Initial) DIANALOU WOLFF			Date of Receipt
Mailing Address 106 Main Street			08 31 2007
City Kingston	State NY	Zip Code 12401	Transaction ID: 3134  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12401	30.00
Name of Employer Benefit Counseling Associ- ates		Health Benefit Special	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (option	al)		70.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 119 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEA			
Full Name (Last, First, Middle Initial) DENNIS WRIGHT  Mailing Address 111 East Ludwig Roc  City Fort Wayne  FEC ID number of contributing federal political committee.  Name of Employer IntraHealth Solutions, In-	state IN  C  Occupation President	Zip Code 46825	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 3908  Amount of Each Receipt this Period  85.00
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  BARBARA WRIGHT KNOX	Aggregate Y	rear-to-Date ▼ 780.00	Date of Receipt
Mailing Address 111 East Ludwig Roa  City  Fort Wayne  FEC ID number of contributing federal political committee.	State IN	Zip Code 46825	Transaction ID: 3111  Amount of Each Receipt this Period  30.00
Name of Employer Intrahealthsolutions, Inc.  Receipt For:  Primary  General  Other (specify) ▼	Occupation Agent Aggregate Y	'ear-to-Date ▼ 220.00	]
Full Name (Last, First, Middle Initial) ROBERT ZIFF Mailing Address 17 North Delmorr Av	renue		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Morrisville  FEC ID number of contributing federal political committee.	State PA	Zip Code 19067	Transaction ID: 4151  Amount of Each Receipt this Period  100.00
Name of Employer Avanti Benefits Corp  Receipt For:  Primary General  Other (specify) ▼	Occupation President Aggregate Y	/ear-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			215.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 114/119
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b		24
	Detailed Guillinary Fage	27		28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
/ NATIONAL ASSOCIATION OF HEALTH U	NDERWRITERS PAC (I	HUPAC)		
Full Name (Last, First, Middle Initial)			Transaction ID: 620	
American Express			Date of Disbursemen	
Mailing Address PO Box 53852			0 8 1 1	<sup>Y</sup> 2007 <sup>Y</sup>
	State Zip Code AZ 85072		Amount of Each Disb	ursement this Period
Purpose of Disbursement	AZ 0307Z			4.50
bank Fees		001		
Candidate Name		Category/ Type		
	ment For:			
Senate President	Primary General Other (specify) ▼			
State: District:	Other (opcomy)			
Full Name (Last, First, Middle Initial)			Transaction ID: 621	0
American Express			Date of Disbursemen	
Mailing Address PO Box 53852			08 / 11	2007
,	State Zip Code		Amount of Each Disb	oursement this Period
	AZ 85072			105.28
Purpose of Disbursement bank Fees		001		103.20
Candidate Name		Category/ Type		
	ment For:			
Senate President	Primary General Other (specify) ▼			
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: 229	
Bank of America			Date of Disbursemen	
Mailing Address 7810 Old Branch Avenue	,		$\begin{bmatrix} 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 2 \end{bmatrix}$	2007
	State Zip Code		Amount of Each Disb	ursement this Period
Clinton Purpose of Disbursement	MD 20735			822.76
bank Fees		001		
Candidate Name		Category/ Type		
Office Sought: House Disburse	ment For:	71		
Senate	Primary General			
State: President State:	Other (specify) ▼			
1				000 74
SUBTOTAL of Disbursements This Page (optional) .				932.54

A.

В.

# SCHEDULE B (FEC Form 3X)

Senate

District:

President

FOR LINE NUMBER: PAGE 115/119 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b 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) NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC) Full Name (Last, First, Middle Initial) Transaction ID: 6208 Bank of America Date of Disbursement 11 0 8 2007 Mailing Address 7810 Old Branch Avenue City State Zip Code Amount of Each Disbursement this Period Clinton MD 20735 56.84 Purpose of Disbursement bank Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 6180 Discover Newtork Date of Disbursement 10 0 8 2007 Mailing Address P.O. Box 3016 City State Zip Code Amount of Each Disbursement this Period New Albany 43054 OH 8.82 Purpose of Disbursement bank Fees 001 Candidate Name Category/ Type Office Sought: House Disbursement For:

General

		GE GG
SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	65.66
TOTAL This Period (last page this line number only)	•	998.20

Primary

Other (specify)

State:

	B (FEC Form 3X SBURSEMENTS	' Use sep	arate schedule(s) category of the	FOR LINE (check only	NUMBER: PAGE 116 / 119
		Detailed	Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
					for the purpose of soliciting contributions licit contributions from such committee
NAME OF COM	MITTEE (In Full) SSOCIATION OF HEA				
•	First, Middle Initial) ON FOR CONGRESS				Transaction ID: 6214 Date of Disbursement
Mailing Address	23942 Lyons Ave #	<b>#</b> 105			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & Y \end{smallmatrix} \end{bmatrix} $
City Santa Clarita		State CA	Zip Code 91321		Amount of Each Disbursement this Perio
Purpose of Disb				011	1000.00
	BUCK MCKEON			Category/ Type	
Office Sought:	X House D Senate President	X Primary Other (sp	2008 General ecify)		
State: CA	District: 25				
,	First, Middle Initial) JOHN BARRASSO				Transaction ID: 6212 Date of Disbursement
Mailing Address	6896 CASPER MC	OUNTAIN RD			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & O \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y \\ D & Q & O & T \end{bmatrix} $
City CASPER		State WY	Zip Code 82601		Amount of Each Disbursement this Perio
Purpose of Disb	ursement			011	1000.00
Candidate Name JOHN A BARI				Category/ Type	
Office Sought:	X Senate President	X Primary Other (sp	2008 General ecify)		
	District: 00  First, Middle Initial)  MAX BAUCUS				Transaction ID: 6219 Date of Disbursement
Mailing Address	PO BOX 586				$\begin{bmatrix}\begin{smallmatrix}M\\0\end{smallmatrix}8^M\end{smallmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D\\3\end{smallmatrix}0\end{smallmatrix} \ ] \ / \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2\end{smallmatrix}0\end{smallmatrix}007^Y$
City HELENA		State MT	Zip Code 59624		Amount of Each Disbursement this Perio
Purpose of Disb contribution	ursement			011	2000.00
Candidate Name				Category/ Type	
Office Sought:	House D X Senate President	Primary Other (spe	2008 X General		
		5 ti.is. (op	<i>1)</i> / <b>\</b>		
State: MT	District: 00				

IT			parate schedule(s)	FOR LINE	
	EMIZED DISBURSEMEN	ITS for eac	h category of the d d Summary Page	(check only 21b 27	y one) 22
	y Information copied from such Reports for commercial purposes, other than usi				for the purpose of soliciting contributions licit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF H	HEALTH UNDERW	/RITERS PAC (	HUPAC)	
<b>/</b>	Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT				Transaction ID: 6181 Date of Disbursement
	Mailing Address PO Box 50100				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ I & O & I & Y \end{bmatrix} $
	City Springfield	State MO	Zip Code 65805		Amount of Each Disbursement this Period
	Purpose of Disbursement contribution			011	2500.00
	Candidate Name ROY BLUNT  Office Sought: X House	Disbursement For:	: 2008	Category/ Type	
	Senate President	X Primary	General pecify)		
	State: MO District: 07  Full Name (Last, First, Middle Initial)  MARY BONO COMMITTEE				Transaction ID: 6215 Date of Disbursement
	Mailing Address P.O. Box 3370				08 20 20 7
	City Palm Springs	State CA	Zip Code 92263		
	Palm Springs Purpose of Disbursement contribution			011	Amount of Each Disbursement this Period 1000.00
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO	CA	92263	011 Category/ Type	
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought:  X House Senate President	CA  Disbursement For:  X Primary	92263	Category/	
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought:  X House Senate	CA  Disbursement For:  X Primary	92263 : 2008 : General	Category/	
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought: X House Senate President  State: CA District: 45  Full Name (Last, First, Middle Initial)	CA  Disbursement For:  X Primary	92263 : 2008 : General	Category/	1000.00  Transaction ID: 6190
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought: X House Senate President  State: CA District: 45  Full Name (Last, First, Middle Initial)  REED COMMITTEE	CA  Disbursement For:  X Primary	92263 : 2008 : General	Category/	Transaction ID: 6190 Date of Disbursement  May 2007  Amount of Each Disbursement this Period
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought: X House Senate President  State: CA District: 45  Full Name (Last, First, Middle Initial)  REED COMMITTEE  Mailing Address PO BOX 8628  City CRANSTON  Purpose of Disbursement contribution	Disbursement For:  X Primary Other (s	92263  2008 General pecify)	Category/ Type	Transaction ID: 6190 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought: X House Senate President  State: CA District: 45  Full Name (Last, First, Middle Initial)  REED COMMITTEE  Mailing Address PO BOX 8628  City CRANSTON  Purpose of Disbursement	Disbursement For:  X Primary Other (s	92263  2008 General pecify)	Category/ Type	Transaction ID: 6190 Date of Disbursement  May 2007  Amount of Each Disbursement this Period
	Palm Springs  Purpose of Disbursement contribution  Candidate Name MARY BONO  Office Sought: X House Senate President  State: CA District: 45  Full Name (Last, First, Middle Initial)  REED COMMITTEE  Mailing Address PO BOX 8628  City CRANSTON  Purpose of Disbursement contribution	Disbursement For:  X Primary Other (s  State RI  Disbursement For: Primary	92263  2008	Category/ Type  011 Category/	Transaction ID: 6190 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I			F	PAG	SE 118	/ 119	9
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) ] 22		24 280	, [	25 29		26 30
Any Information copied from such Reports and Stater									
or for commercial purposes, other than using the name	e and address of any political co	mmittee to soli	cit contribution	s from	such	CO	mmittee		
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEALTH I	JNDERWRITERS PAC (HU	PAC)							
Full Name (Last, First, Middle Initial) SUE MYRICK FOR CONGRESS			Transaction Date of Disb	_					
Mailing Address P.O. Box 37091			08 /	<sup>D</sup> 2 0	] ′ [	Y	ž 0 ŏ	7	
City Charlotte	State Zip Code NC 28237		Amount of E	ach Di	sburs	em			od
Purpose of Disbursement contribution		011					1000.	00	
Candidate Name SUE MYRICK		Category/ Type							
	ement For: 2008 Primary General Other (specify)								
Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS			Transaction Date of Disb						
Mailing Address 2021 E Dublin Granville	Road		0 8 M	<sup>D</sup> 0 2 2	]	Y	ž 0 ŏ	7 <sup>Y</sup>	
City Columbus	State Zip Code OH 43229		Amount of E	ach Di	sburs	em			d
Purpose of Disbursement contribution		011		•	•		1000.0	00	
Candidate Name PATRICK J TIBERI		Category/ Type							
	ement For: 2008 Primary General Other (specify)								
Full Name (Last, First, Middle Initial) TOM FEENEY FOR CONGRESS			Transaction Date of Disb						
Mailing Address 1420 Alafaya Trail #103			0 8 M	<sup>D</sup> 2 6	/	Y	ž 0 ŏ	7 <sup>Y</sup>	
City Oviedo	State Zip Code FL 32765		Amount of E	ach Di	sburs	em			od
Purpose of Disbursement contribution		011	L	•			2500.0	00	
Candidate Name TOM FEENEY		Category/ Type							
3 7	ement For: 2008 Primary General Other (specify)								
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>					4500.0	00	
TOTAL This Period (last page this line number only									
E6AN026			FEC Scho	edule E	3 ( F	orm	3X) (R	evise	d 02

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page (check on 21b	22 X 23 24 25 26
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEALTH UI	and address of any political committee to so	· ·
Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS COMMIT  Mailing Address 123 West High Avenue	TEE .	Transaction ID: 6213 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
7	DH   Zip Code   OH   44663   OH   Category/ Type   Code   Category/ Type   Category/ Type	Amount of Each Disbursement this Period 1000.00
Senate	Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	1000.00
TOTAL This Period (last page this line number only)	•	14000.00