

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00230789  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 02 01 2006 through 02 28 2006

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

Type or Print Name of Treasurer Thomas W. Hiltachk

Signature of Treasurer Electronically Filed by Thomas W. Hiltachk Date 03 17 2006

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

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

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

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		90578.83
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	99263.67									
(c) Total Receipts (from Line 19) .....	6984.84	16669.68								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	106248.51	107248.51								
7. Total Disbursements (from Line 31) .....	0.00	1000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	106248.51	106248.51								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
	11 02 2004	CA								

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**

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

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3417.68	13102.52
(i) Itemized (use Schedule A) .....	3567.16	3567.16
(ii) Unitemized .....	6984.84	16669.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	6984.84	16669.68
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	6984.84	16669.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6984.84	16669.68

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	1000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	1000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	6984.84	16669.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6984.84	16669.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. David Anderson</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 21281 Burbank Blvd.		<b>Transaction ID: INC:A:3304</b>	
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Chief Sales Officer		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>B. Pamela Ann Bohall</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3372</b>	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 153.84		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Enrollment Director		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

Full Name (Last, First, Middle Initial) <b>C. Jeffrey A. Cinciarelli</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 11971 Foundation Place C		<b>Transaction ID: INC:A:3309</b>	
City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Director Sales		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	353.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Gerald V. Coil

Mailing Address 503 Canal Blvd.

City State Zip Code  
Point Richmond CA 94804

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

Name of Employer  
Heath Net Inc.

Occupation  
President MHN & SVP

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2006

Transaction ID: INC:A:3312

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mark S. El Tawil

Mailing Address 2800 N. 44th Street #900

City State Zip Code  
Phoenix AZ 85008

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

Name of Employer  
Health Net, Inc.

Occupation  
President HN Arizona

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2006

Transaction ID: INC:A:3321

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Daria A. Eppley

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer  
Health Net Federal Services, Inc.

Occupation  
Director Op Research & An

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2006

Transaction ID: INC:A:3383

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Paul A. Gilbertson		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3386
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net Federal Services, Inc.	Occupation VP MCS Support Services	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Maurice Hebert		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 21650 Oxnard Street		<b>Transaction ID:</b> INC:A:3325
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net, Inc.	Occupation Controller	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Randal Kirchner		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3395
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net Federal Services, Inc.	Occupation VP Program Support	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Karin Mayhew</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 3400 Data Drive		<b>Transaction ID: INC:A:3334</b>	
City Rancho Cordova	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 95670			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation SVP Organization Effectiveness		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>B. Peter McLaughlin</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 3636 Nobel Drive #300		<b>Transaction ID: INC:A:3401</b>	
City San Diego	State CA	Amount of Each Receipt this Period 153.84	
Zip Code 92122			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Director Performance Development		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

Full Name (Last, First, Middle Initial) <b>C. Lawrence Naehr</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3406</b>	
City Rancho Cordova	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 95742			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Executive Director		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	353.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2107 Wilson Blvd., #900

City State Zip Code  
Arlington VA 22201

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

Name of Employer Health Net, Inc. Occupation VP Business Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3408

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Anthony S. Pizsel

Mailing Address 24002 Long Valley Road

City State Zip Code  
Hidden Hills CA 91320

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3341

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Scott A. Ptacek

Mailing Address 1230 West Washington Street

City State Zip Code  
Tempe AZ 85281

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3342

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Jonathan H. Scheff		Date of Receipt MM / DD / YYYY 02 / 28 / 2006
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3348
City Rancho Cordova	State CA	Zip Code 95742
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 150.00
Name of Employer Health Net Federal Services, Inc.	Occupation Chief Medical Officer	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jack, R. Simpson		Date of Receipt MM / DD / YYYY 02 / 28 / 2006
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3413
City Rancho Cordova	State CA	Zip Code 95742
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer Health Net Federal Services, Inc.	Occupation Director, IT	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Joanne Tully Steffen		Date of Receipt MM / DD / YYYY 02 / 28 / 2006
Mailing Address 7320 Sandy Plains Avenue		<b>Transaction ID:</b> INC:A:3354
City Las Vegas	State NV	Zip Code 89131
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer Health Net, Inc.	Occupation VP Network & Delivery Sys. Management	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Vice President Human Resources

Receipt For: 2006  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3357

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Franklin Tom

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP Legal

Receipt For: 2006  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3359

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Jennifer Humbert Vargas

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation SVP General Manager

Receipt For: 2006  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3360

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
B. Curtis Westen

Mailing Address 31 Roundup Road

City State Zip Code  
Bell Canyon CA 91307

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

Name of Employer Health Net, Inc. Occupation SVP & General Counsel

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: INC:A:3364

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2800 N. 44th Street #900

City State Zip Code  
Phoenix AZ 85008

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

Name of Employer Health Net, Inc. Occupation VP State Govt Affairs

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: INC:A:3365

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Sr. Vice President COO, FHFS

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: INC:A:3419

Amount of Each Receipt this Period  
 410.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>610.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3417.68</b>

**Image# 26920023200**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3419**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3365**

\*\*\*\*\*

**Image# 26920023201**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3364**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3360**

\*\*\*\*\*

**Image# 26920023202**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3359**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3357**

\*\*\*\*\*



**Image# 26920023203**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3354**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3413**

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**Image# 26920023204**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3348**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3342**

\*\*\*\*\*

**Image# 26920023205**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3341**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3408**

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**Image# 26920023206**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3406**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3401**

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**Image# 26920023207**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3334**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3395**

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**Image# 26920023208**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3325**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3386**

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**Image# 26920023209**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3383**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3321**

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**Image# 26920023210**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3312**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3309**

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**Image# 26920023211**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3372**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3304**

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