

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
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 04 01 2006 through 04 30 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 05 15 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.

**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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	4

D	D
3	0

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 .....	102718.35									
(c) Total Receipts (from Line 19) .....	7404.84	31044.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	110123.19	121623.19								
7. Total Disbursements (from Line 31) .....	0.00	11500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	110123.19	110123.19								
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									

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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	4

D	D
3	0

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	5682.62	17510.92
(i) Itemized (use Schedule A) .....	1722.22	13533.44
(ii) Unitemized .....	7404.84	31044.36
(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) .....	7404.84	31044.36
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)) .....	7404.84	31044.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7404.84	31044.36

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	11500.00
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	11500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	11500.00

**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) .....	7404.84	31044.36
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7404.84	31044.36
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 / 49
	<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)  
Reba Suits

Mailing Address 3016 Mammoth Way

City State Zip Code  
Roseville CA 95747

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

Name of Employer Health Net Federal Services  
Occupation Director Utilization Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 6

**Transaction ID:** INC:A:3659

Amount of Each Receipt this Period  
500.00

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

Mailing Address 21281 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3545

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Suzanne L. Austin

Mailing Address 21281 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net of California  
Occupation Director, Membership Accounting

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 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3547

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</b>
<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 / 49
	<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)  
Marshall Bentley

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 & 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 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3548

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3608

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3610

Amount of Each Receipt this Period  
 153.84

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	253.84
<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 8 / 49
	<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)  
Russell A. Bretall

Mailing Address 21271 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Director IS Applications

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 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3549

Amount of Each Receipt this Period  
50.00

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

Mailing Address 11971 Foundation Place C

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation Director Sales

Receipt For: 2006  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3550

Amount of Each Receipt this Period  
100.00

**C.** 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 Health Net Inc. Occupation President MHN & SVP

Receipt For: 2006  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3553

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<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 / 49
	<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)  
Edward F. Cotter, Jr.

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, Natl Medicare Compliance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3555

Amount of Each Receipt this Period  
 90.00

**B.** Full Name (Last, First, Middle Initial)  
Alida K. Dodd

Mailing Address One Far Mill Crossing

City Shelton State CT Zip Code 06484

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

Name of Employer Health Net, Inc. Occupation Director Financial Analysis

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3560

Amount of Each Receipt this Period  
 52.00

**C.** Full Name (Last, First, Middle Initial)  
Donald A. Dreyer

Mailing Address 3600 Port of Tacoma Road #505

City Tacoma State WA Zip Code 98424

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3618

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	202.00
<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 10 / 49
	<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)  
Tim Duval

Mailing Address 2015 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 Occupation Chief Technology Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3620

Amount of Each Receipt this Period  
 96.00

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

Mailing Address 2800 N. 44th Street #900

City Phoenix State AZ Zip Code 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 ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3562

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Director Op Research & An

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3621

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	396.00
<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 / 49
	<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

Full Name (Last, First, Middle Initial) <b>A. David J. Friedman</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 3400 Data Drive		<b>Transaction ID: INC:A:3564</b>	
City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation SVP and General Manager		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>B. Paul A. Gilbertson</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3624</b>	
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 ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C. Maurice Hebert</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 21650 Oxnard Street		<b>Transaction ID: INC:A:3566</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 Controller		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	310.00
<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 / 49
	<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> Frank L. Kelly		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3631
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 76.94	
FEC ID number of contributing federal political committee. C		
Name of Employer Health Net Federal Services, Inc.	Occupation Dir. Materials Management	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.76	

Full Name (Last, First, Middle Initial) <b>B.</b> Scott Kelly		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3632
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Health Net Federal Services, Inc.	Occupation Sr. Vice President Field Operations	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Randal Kirchner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3633
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
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 ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	256.94
<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 / 49
	<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.</b> Gerry P. Long		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 503 Canal Blvd.		<b>Transaction ID:</b> INC:A:3571	
City State Zip Code Point Richmond CA 94804		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MHN Government Services, Inc.		Occupation VP Operations	
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.</b> Karin Mayhew		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 3400 Data Drive		<b>Transaction ID:</b> INC:A:3575	
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 SVP Organization Effectiveness	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Candace Maynard		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 3131 Camino Del Rio		<b>Transaction ID:</b> INC:A:3638	
City State Zip Code San Diego CA 92108		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net of California		Occupation Director, Case 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) ..... ▶	200.00
<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 14 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Peter McLaughlin

Mailing Address 3636 Nobel Drive #300

City State Zip Code  
San Diego CA 92122

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2006

**Transaction ID:** INC:A:3639

Amount of Each Receipt this Period  
153.84

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

Mailing Address 2025 Aerojet Drive

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation Director of Finance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2006

**Transaction ID:** INC:A:3640

Amount of Each Receipt this Period  
50.00

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

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2006

**Transaction ID:** INC:A:3577

Amount of Each Receipt this Period  
80.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	283.84
<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 15 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Stuart M. Murphy

Mailing Address 40 Wall Street, 6th Floor

City State Zip Code  
New York NY 10005

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

Name of Employer Health Net, Inc. Occupation Director Sales

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3642

Amount of Each Receipt this Period  
76.00

**B.** Full Name (Last, First, Middle Initial)  
Lawrence Naehr

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 Executive Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3644

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1300 Division Road, Suite 301

City State Zip Code  
West Warwick RI 02893

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

Name of Employer Health Net Federal Services Occupation VP Optimization

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 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3645

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	226.00
<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 16 / 49
	<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.</b> David W. Olson		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 3400 Data Drive		<b>Transaction ID:</b> INC:A:3579	
City State Zip Code Rancho Cordova CA 95670		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc. Occupation SVP Investor Relations			
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.</b> Robert A. Perreault		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 2107 Wilson Blvd., #900		<b>Transaction ID:</b> INC:A:3646	
City State Zip Code Arlington VA 22201		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc. Occupation VP Business Development			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Anthony S. Pizsel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 24002 Long Valley Road		<b>Transaction ID:</b> INC:A:3581	
City State Zip Code Hidden Hills CA 91320		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc. Occupation EVP & CFO			
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	550.00
<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 17 / 49
	<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)  
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 ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3582

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Jonathan H. Scheff

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: Chief Medical Officer

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 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3586

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Susan Schwartz

Mailing Address 104 Ticino Road

City State Zip Code  
New Bern NC 28562

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

Name of Employer: Health Net Inc.  
Occupation: VP Bene Coalition/Congress Svc

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3650

Amount of Each Receipt this Period  
76.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>326.00</b>
<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 18 / 49
	<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)  
Jeffrey Lee Shelton

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP State 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 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3587

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Rickey Dea Simmons

Mailing Address 21271 Burbank Blvd

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation VP Information Systems

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3588

Amount of Each Receipt this Period  
 86.00

**C.** Full Name (Last, First, Middle Initial)  
Jack R. Simpson

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3651

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	236.00
<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 19 / 49
	<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)  
Charles M. Sowers

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 Inc. Occupation Regional Finance Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3591

Amount of Each Receipt this Period  
76.00

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

Mailing Address 7320 Sandy Plains Avenue

City State Zip Code  
Las Vegas NV 89131

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3592

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Alan W. Sterling

Mailing Address 21281 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net Inc. Occupation Director Business Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3593

Amount of Each Receipt this Period  
80.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	256.00
<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 20 / 49
	<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)  
W. Randall Stewart

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3594

Amount of Each Receipt this Period  
76.00

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

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3595

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3400 Data Drive

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation VP Legal

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3597

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	276.00
<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 21 / 49
	<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)  
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 ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3598

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Gail Watts

Mailing Address 21650 Oxnard Street

City Woodland Hills State CA Zip Code 91367

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

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

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 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3599

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 31 Roundup Road

City Bell Canyon State CA Zip Code 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 ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

**Transaction ID:** INC:A:3602

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<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 22 / 49
	<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"/>	<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. Marie Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3656</b>	
City Rancho Cordova	State CA	Zip Code 95742	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Director Facilities FHFS		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) <b>B. Gay Ann Williams</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 2800 N. 44th Street #900		<b>Transaction ID: INC:A:3603</b>	
City Phoenix	State AZ	Zip Code 85008	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 VP State Govt Affairs		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. James, E. Woys</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3657</b>	
City Rancho Cordova	State CA	Zip Code 95742	Amount of Each Receipt this Period 410.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Sr. Vice President COO, FHFS		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1640.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	590.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 23 / 49	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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

**A.** Full Name (Last, First, Middle Initial)  
Bennie Yates

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 & CFO FHS Spec.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 6

Transaction ID: INC:A:3658

Amount of Each Receipt this Period  
 70.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5682.62

**Image# 26940142246**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3658**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3657**

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**Image# 26940142247**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3603**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3656**

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**Image# 26940142248**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3602**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3599**

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**Image# 26940142249**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3598**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3597**

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**Image# 26940142250**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3595**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3594**

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**Image# 26940142251**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3593**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3592**

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**Image# 26940142252**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3591**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3651**

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**Image# 26940142253**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction

Transaction ID: **INC:A:3588**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction

Transaction ID: **INC:A:3587**

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**Image# 26940142254**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3650**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3586**

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**Image# 26940142255**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3582**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3581**

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**Image# 26940142256**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3646**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3579**

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**Image# 26940142257**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3645**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3644**

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**Image# 26940142258**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3642**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3577**

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**Image# 26940142259**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3640**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3639**

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**Image# 26940142260**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3638**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3575**

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**Image# 26940142261**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3571**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3633**

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**Image# 26940142262**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3632**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3631**

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**Image# 26940142263**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3566**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3624**

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**Image# 26940142264**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3564**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3621**

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**Image# 26940142265**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3562**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3620**

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**Image# 26940142266**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3618**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3560**

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**Image# 26940142267**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3555**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3553**

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**Image# 26940142268**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3550**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3549**

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**Image# 26940142269**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3610**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3608**

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**Image# 26940142270**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3548**

Form/Schedule: **SA11AI** Bi-Weekly Payroll Deduction  
Transaction ID: **INC:A:3547**

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Image# 26940142271

Form/Schedule: SA11AI Bi-Weekly Payroll Deduction  
Transaction ID: INC:A:3545

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