

**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

91387

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00230789

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

11

02

2004

in the State of

CA

5. Covering Period

10

14

2004

through

11

22

2004

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

11

29

2004

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

Report Covering the Period: From: ^M10 ^D14 ^Y2004 To: ^M11 ^D22 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^M ^D		25628.60
(b) Cash on Hand at Beginning of Reporting Period	20088.34	
(c) Total Receipts (from Line 19)	3081.00	46551.74
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	23180.34	72180.34
<hr/>		
7. Total Disbursements (from Line 31)	1500.00	50500.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21680.34	21680.34
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

Report Covering the Period: From: ^M10 ^D14 ^Y2004 To: ^M11 ^D22 ^Y2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2786.00	
(ii) Unitemized	295.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	3081.00	45770.00
(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)	3081.00	45770.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	781.74
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))	3081.00	46551.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3081.00	46551.74

DETAILED SUMMARY PAGE

of Disbursements

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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	2500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1500.00	48000.00
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 ActMty (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))..	1500.00	50500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	1500.00	50500.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	3081.00	45770.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3081.00	45770.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 43

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. David Anderson		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 212B1 Burbank Blvd.		Transaction ID: INC:A:1610
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Health Net, Inc.	Occupation Chief Sales Officer	Aggregate Year-to-Date ▼ 1000.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thomas E. Ash		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 123 Technology Drive		Transaction ID: INC:A:1612
City Irvine	State CA	Zip Code 92618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Health Net, Inc.	Occupation Pres. EOS & Managed Care	Aggregate Year-to-Date ▼ 1000.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Karan S. Ameshow		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1613
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Health Net, Inc.	Occupation Dir. of Communication	Aggregate Year-to-Date ▼ 400.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 7 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Marshall Bentley		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1614
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Health Net, Inc.	Occupation VP & Counsel	Aggregate Year-to-Date ▼ 500.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Russell A. Breball		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21271 Burbank Blvd.		Transaction ID: INC:A:1615
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Health Net, Inc.	Occupation Director IS Applications	Aggregate Year-to-Date ▼ 400.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey A. Cinciarelli		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 11971 Foundation Place C		Transaction ID: INC:A:1616
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Health Net, Inc.	Occupation Director Sales	Aggregate Year-to-Date ▼ 1000.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 43

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Renee D. Claborn		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 129D1 SE 97th Avenue		Transaction ID: INC:A:1617
City Clackamas	State OR	Zip Code 97015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Health Net, Inc.	Occupation Director Healthcare Services	Aggregate Year-to-Date ▼ 400.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Edward F. Cotter, Jr.		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 340D Data Drive		Transaction ID: INC:A:1618
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer Health Net, Inc.	Occupation VP, Natl Medicare Compliance	Aggregate Year-to-Date ▼ 775.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert F. Crawford, Jr.		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 123D West Washington Street		Transaction ID: INC:A:1619
City Tempe	State AZ	Zip Code 85281
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Health Net, Inc.	Occupation Director Provider Network Management	Aggregate Year-to-Date ▼ 320.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 9 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Philip G. Davis		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Dxnard Street		Transaction ID: INC:A:1620
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Health Net, Inc.	Occupation VP and Deputy Counsel	Aggregate Year-to-Date ▼ 200.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Maria L. Diaz		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 13221 SA 68th Parkway		Transaction ID: INC:A:1622
City Tigard	State OR	Zip Code 97223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Health Net, Inc.	Occupation Director Product Development	Aggregate Year-to-Date ▼ 300.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alida K. Dodd		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address One Far Mill Crossing		Transaction ID: INC:A:1623
City Shelton	State CT	Zip Code 06484
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.00
Name of Employer Health Net, Inc.	Occupation Director Financial Analysis	Aggregate Year-to-Date ▼ 520.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 43

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial) A. Susan M. Duback-Reinhold		Date of Receipt M / D / Y 10 / 31 / 2004	
Mailing Address 503 Canal Blvd.		Transaction ID: INC:A:1624	
City Point Richmond	State CA	Zip Code 94804	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Health Net, Inc.	Occupation VP Strategy and Development	Aggregate Year-to-Date ▼ 400.00	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mark S. B. Tevil		Date of Receipt M / D / Y 10 / 31 / 2004	
Mailing Address 2800 N. 44th Street #900		Transaction ID: INC:A:1626	
City Phoenix	State AZ	Zip Code 85008	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Health Net, Inc.	Occupation President HN Arizona	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. David J. Friedman		Date of Receipt M / D / Y 10 / 31 / 2004	
Mailing Address 3400 Data Drive		Transaction ID: INC:A:162B	
City Rancho Cordova	State CA	Zip Code 95670	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Health Net, Inc.	Occupation SVP and General Manager	Aggregate Year-to-Date ▼ 600.00	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 11 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Richard Douglas Jacobs, Jr.		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 2800 N. 44th Street #900		Transaction ID: INC:A:1629
City Phoenix	State AZ	Zip Code 85008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Health Net Arizona	Occupation Chief Medical Officer	Aggregate Year-to-Date ▼ 200.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Sharon Lewis		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1630
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Health Net, Inc.	Occupation VP Org. Effectiveness	Aggregate Year-to-Date ▼ 300.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lori A. Long		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 13221 SW 68th Parkway		Transaction ID: INC:A:1631
City Tigard	State OR	Zip Code 97223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Health Net Oregon	Occupation Manager, Political Relations	Aggregate Year-to-Date ▼ 300.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Karin Mayhew		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1633
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Health Net, Inc.	Occupation SVP Organization Effectiveness	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Adriane Biggert Morrell		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Oxnard Street		Transaction ID: INC:A:1635
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Health Net, Inc.	Occupation VP Government Relations	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) C. Stuart M. Murphy		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 40 Wall Street, 6th Floor		Transaction ID: INC:A:1636
City New York	State NY	Zip Code 10005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation Director Sales	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	170.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 13 / 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	17

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

Full Name (Last, First, Middle Initial) A. David W. Olson		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1637
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation SVP Investor Relations	Aggregate Year-to-Date ▼ 500.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Steven Ruffin		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1638
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Health Net, Inc.	Occupation VP & Chief Medical Officer	Aggregate Year-to-Date ▼ 400.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Teresa Reynolds		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 212B1 Burbank Blvd.		Transaction ID: INC:A:1640
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation VP Procurement	Aggregate Year-to-Date ▼ 500.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	140.00
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial) A. Carol P. Richey		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Oxnard Street		Transaction ID: INC:A:1641
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Health Net, Inc.	Occupation Sr. Vice President, Controller	Aggregate Year-to-Date ▼ 2000.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Rallo		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Oxnard Street		Transaction ID: INC:A:1642
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Health Net, Inc.	Occupation VP Business Development	Aggregate Year-to-Date ▼ 640.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Linda Salzman		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Oxnard Street		Transaction ID: INC:A:1643
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation SVP Corporate Business Planning	Aggregate Year-to-Date ▼ 485.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	330.00
TOTAL 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: PAGE 15 / 43

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial) A. Bijan Sarafzadeh		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 10834 International Drive		Transaction ID: INC:A:1644
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Health Net, Inc.	Occupation VP Information Technology	Aggregate Year-to-Date ▼ 600.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ann Servais		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 405 Lexington Avenue		Transaction ID: INC:A:1646
City New York	State NY	Zip Code 10174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Director Sales	Occupation Health Net, Inc.	Aggregate Year-to-Date ▼ 300.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey Lee Shelton		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1647
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Health Net, Inc.	Occupation VP State Govt. Affairs	Aggregate Year-to-Date ▼ 500.00
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	140.00
TOTAL 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: PAGE 16 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Rickey Dea Simmons		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21271 Burbank Blvd		Transaction ID: INC:A:1648
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 860.00
Name of Employer Health Net, Inc.	Occupation VP Information Systems	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00	

Full Name (Last, First, Middle Initial) B. Thomas V. Smith		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1649
City	State	Zip Code
Rancho Cordova	CA	95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Health Net, Inc.	Occupation Dir. Natl. Mtg. and Events	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Michael P. Sobetzko		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21271 Burbank Blvd.		Transaction ID: INC:A:1650
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Health Net, Inc.	Occupation Director of Operations Quality & Train	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	166.00
TOTAL 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: PAGE 17 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Joanne Tuly Steffen		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 7320 Sandy Plains Avenue		Transaction ID: INC:A:1651
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: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Robert T. Taketama		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21281 Burbank Blvd.		Transaction ID: INC:A:1652
City Woodland Hills	State CA	Zip Code 91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Health Net, Inc.	Occupation VP Pharmacy	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Franklin Tom		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1653
City Rancho Cordova	State CA	Zip Code 95670
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 Legal	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	260.00
TOTAL 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: PAGE 18 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Jennifer Humbert Vargas		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 3400 Data Drive		Transaction ID: INC:A:1654
City	State	Zip Code
Rancho Cordova	CA	95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Health Net, Inc.	Occupation SVP General Manager	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Gail Wells		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21650 Oxnard Street		Transaction ID: INC:A:1655
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation VP Organizational Effectiveness	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Richard A. Waitch		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 11971 Foundation Place, Suite C		Transaction ID: INC:A:1656
City	State	Zip Code
Rancho Cordova	CA	95670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Health Net, Inc.	Occupation Director Real Estate Admin.	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL 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: PAGE 10 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Curtis Westen		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Dxnard Street		Transaction ID: INC:A:1657
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Health Net, Inc.	Occupation SVP General Counsel/Secty	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Gay Ann Williams		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 2800 N. 44th Street #900		Transaction ID: INC:A:1658
City	State	Zip Code
Phoenix	AZ	85008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation VP State Govt Affairs	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Benjamin Willis		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 21850 Dxnard Street		Transaction ID: INC:A:1659
City	State	Zip Code
Woodland Hills	CA	91367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00
Name of Employer Health Net, Inc.	Occupation VP Leadership Development	
Receipt For: 2004 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional)	188.00
TOTAL 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: PAGE 20 / 43
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial) A. Christopher P. Wing		Date of Receipt M / D / Y 10 / 31 / 2004	
Mailing Address 212B1 Burbank Blvd.		Transaction ID: INC:A:1060	
City Woodland Hills	State CA	Zip Code 91367	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Health Net of California	Occupation Executive VP, Reg. Health Plans & Spe	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: 2004 Primary General X Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	2786.00

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial)
A. American Success PAC

Mailing Address 1155 21st Street, NW Suite 300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Monetary contribution

Candidate Name
American Success PAC

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: EXP:B:16D8
Date of Disbursement
10 / 26 / 2004

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Friends of Bobby Jindal Inc.

Mailing Address P. O. Box 8628

City Metairie State LA Zip Code 70011

Purpose of Disbursement
Monetary contribution

Candidate Name
Bobby Jindal

Office Sought: House Senate President
State: LA District D1

Disbursement For: 2004 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: EXP:B:16D8
Date of Disbursement
10 / 26 / 2004

Amount of Each Disbursement this Period
500.00

SUBTOTAL of Disbursements This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	1500.00

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1660

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1659

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1658

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1657

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1656

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1655

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1654

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1653

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1652

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1651

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1650

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1649

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1648

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1647

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1646

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1644

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1643

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1642

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1641

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1640

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1639

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1637

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1636

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1635

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1633

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1631

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1630

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1629

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1628

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1628

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1624

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1623

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1622

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1620

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1619

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1618

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1617

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1618

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1615

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1614

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1613

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction
Transaction ID: INC:A:1612

Form/Schedule: SA11A1 Bi-Weekly Payroll Deduction

Transaction ID: INC:A:1610
