

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) 2000 14TH ST ARLINGTON VA 22201

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00283135 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2011 through 07 31 2011

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 Jennifer Murphy

Signature of Treasurer Electronically Filed by Jennifer Murphy Date 08 16 2011

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. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2011"/>		111303.33
(b) Cash on Hand at Beginning of Reporting Period .....	95182.31	
(c) Total Receipts (from Line 19) .....	48015.28	298897.41
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	143197.59	410200.74
7. Total Disbursements (from Line 31) .....	26651.51	293654.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	116546.08	116546.08
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	

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

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	31720.93	162325.13
(ii) Unitemized .....	9292.50	129566.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	41013.43	291891.13
(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) .....	41013.43	291891.13
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 .....	7000.00	7000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1.85	6.28
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)) .....	48015.28	298897.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	48015.28	298897.41

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.....	1651.51	15479.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1651.51	15479.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	277750.00
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	425.00
(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	425.00
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))..	26651.51	293654.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26651.51	293654.66

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) .....	41013.43	291891.13
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	425.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	41013.43	291466.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1651.51	15479.66
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1651.51	15479.66

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 150
	<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)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark K. Ackerman	Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 333 Barberry Dr	<b>Transaction ID:</b> 11503-P48561
	City Lexington State SC Zip Code 29072-8845	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction (\$30.00 Monthly)
	Name of Employer Turbeville Insurance Agency, Inc. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeff Ahrendsen	Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 3830 Wakefield Dr	<b>Transaction ID:</b> 11503-P48868
	City Colorado Springs State CO Zip Code 80906-4393	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction (\$100.00 Monthly)
	Name of Employer Benefit Resources, Inc. Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lori J. Alala	Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address PO Box 2424	<b>Transaction ID:</b> 11503-P48592
	City Hickory State NC Zip Code 28603-2424	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction (\$30.00 Monthly)
	Name of Employer Carolina first Assoc. Occupation Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Suzetta E. Alberts

Mailing Address 201W. Fort Street, Mail Code 7969

City State Zip Code  
Detroit MI 48226

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

Name of Employer Occupation  
Comerica Insurance Services Agent

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48585  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Terry Allard

Mailing Address 11619 Brook Hill Ct

City State Zip Code  
Anchorage AK 99516-1970

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

Name of Employer Occupation  
The Wilson Agency, LLC Agent

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48722  
Amount of Each Receipt this Period: 50.00  
Payroll Deduction: (\$50.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Daniel Alm

Mailing Address 5071 S 175th St

City State Zip Code  
Omaha NE 68135-3457

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

Name of Employer Occupation  
BlueCross BlueShield of Nebraska agent

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48283  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

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

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

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

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

FOR LINE NUMBER: PAGE 8 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Kirk Andonian

Mailing Address 4423 Point Fosdick Dr NW Ste 306

City State Zip Code  
Gig Harbor WA 98335-1794

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

Name of Employer Occupation  
Berg Andonian Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48526  
Amount of Each Receipt this Period: 150.00  
Payroll Deduction: (\$150.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Catherine M. Antonie

Mailing Address W190 S7238 Lochcrest Blvd

City State Zip Code  
Muskego WI 53150

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

Name of Employer Occupation  
Planned Futures LLC Employee Benefit Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48950  
Amount of Each Receipt this Period: 50.00  
Payroll Deduction: (\$50.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Ashmore

Mailing Address 6102 82nd St Ste 6

City State Zip Code  
Lubbock TX 79424-0803

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

Name of Employer Occupation  
Ashmore & Associates Insurance Agency agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48134  
Amount of Each Receipt this Period: 170.00  
Payroll Deduction: (\$170.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 370.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 150  
(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)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

**A.** Full Name (Last, First, Middle Initial)  
Virginia T. Ashton-Vernon

Mailing Address 3702 Alton Rd SW

City State Zip Code  
Roanoke VA 24014-3004

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

Name of Employer Occupation  
Lewis-Gale Medical Center Director of Provider Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48102

Amount of Each Receipt this Period  
42.00

Payroll Deduction  
(\$42.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Kimberly L. Auclair

Mailing Address 6873 Raccoon Ct

City State Zip Code  
Viera FL 32940-6869

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

Name of Employer Occupation  
Pineapple Financial Services, LLC Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48637

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Michael K. Avery

Mailing Address 10904 E County Road 109

City State Zip Code  
Midland TX 79706-5369

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

Name of Employer Occupation  
AL J. Avery & Associates, Inc. Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2011

**Transaction ID:** 11442

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 172.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Rick D. Bailey

Mailing Address 4390 Earney Rd Ste 240

City State Zip Code  
Woodstock GA 30188-5687

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

Name of Employer Rick Bailey & Company, Inc.  
Occupation agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1120.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48628

Amount of Each Receipt this Period  
135.00

Payroll Deduction  
(\$135.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Andrea M. Baldrice

Mailing Address 108 E Saint Vrain St Ste 12

City State Zip Code  
Colorado Springs CO 80903-1161

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

Name of Employer Baldrice & Company  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48528

Amount of Each Receipt this Period  
42.00

Payroll Deduction  
(\$42.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Kimberly L Ball

Mailing Address 711 E Ashlan Ave

City State Zip Code  
Fresno CA 93704-3705

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

Name of Employer Blue Shield of California  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48774

Amount of Each Receipt this Period  
50.00

Payroll Deduction  
(\$50.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **227.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Donald L. Balla</p> <p>Mailing Address 371 Steeplechase Dr</p> <p>City State Zip Code  <b>Cranberry Twp PA 16066-2239</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  Simpson &amp; McCrady LLC Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID: 11503-P48921</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Monthly)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Diane L. Barton</p> <p>Mailing Address 2732 Kerry Ln</p> <p>City State Zip Code  <b>Oklahoma City OK 73120-2810</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  Blue Cross Blue Shield of OK Account Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID: 11501-P48096</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Bi-Weekly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) David S. Bauer</p> <p>Mailing Address 1027 Tahoe Dr</p> <p>City State Zip Code  <b>Belmont CA 94002-3010</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  Bauer Financial Services Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID: 11503-P48564</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Monthly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">90.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathryn A. Beals		Date of Receipt
	Mailing Address 5151 W River Rd		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Waunakee	WI	53597-9523
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Dean Health Plan		Occupation Agent	<b>Transaction ID:</b> 11501-P48168
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1140.00"/>	<input type="text" value="170.00"/>
			Payroll Deduction
			(\$170.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Darrald T Bean		Date of Receipt
	Mailing Address 3922 Rampart St		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Boise	ID	83704-4557
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Bean Insurance		Occupation Agent	<b>Transaction ID:</b> 11503-P48924
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="30.00"/>
			Payroll Deduction
			(\$30.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ann C. Bell		Date of Receipt
	Mailing Address 2171 S Pebblecreek Ln		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Boise	ID	83706-6123
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation agent	<b>Transaction ID:</b> 11501-P48188
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="210.00"/>	<input type="text" value="30.00"/>
			Payroll Deduction
			(\$30.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="230.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)

Bruce D. Benton

Mailing Address 20161 Delita Dr

City

Woodland Hills

State

CA

Zip Code

91364-3521

FEC ID number of contributing federal political committee.

C

Name of Employer  
Genesis SmithBenton Insurance & Finan

Occupation  
Agent

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1315.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48067

Amount of Each Receipt this Period

170.00

Payroll Deduction

(\$170.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)

Stephanie Berger

Mailing Address 743 Diamond Dr

City

Camarillo

State

CA

Zip Code

93010-7497

FEC ID number of contributing federal political committee.

C

Name of Employer  
HLS Insurance Services

Occupation  
Large Group Specialist

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48925

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Lori L. Bergsma

Mailing Address 2612 E 4128 N

City

Filer

State

ID

Zip Code

83328-5167

FEC ID number of contributing federal political committee.

C

Name of Employer  
Balanced Rock Insurance Agency, Inc.

Occupation  
Agent

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2011

Transaction ID: 11463

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Lori L. Bergsma  
Mailing Address 2612 E 4128 N  
City State Zip Code  
Filer ID 83328-5167  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Balanced Rock Insurance Agency, Inc. Occupation: Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.00  
Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48482  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
David A Berman  
Mailing Address 6510 N Shadeland Ave  
City State Zip Code  
Indianapolis IN 46220-4369  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Neace Lukens Holding Company, Inc. Occupation: agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 720.00  
Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48116  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction: (\$85.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Besselman  
Mailing Address 6421 Perkins Rd Bldg A # 2B  
City State Zip Code  
Baton Rouge LA 70808-6200  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Besselman & Little Agency Occupation: Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1875.00  
Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48494  
Amount of Each Receipt this Period: 250.00  
Payroll Deduction: (\$250.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 365.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) C. Sue Bisbee		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 4211 Parsifal St NE		Transaction ID: 11501-P48143
	City Albuquerque	State NM	Zip Code 87111-3374
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Infinisource, Inc.		Occupation Agent	Payroll Deduction (\$30.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert J Bishop		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 2785 E Desert Inn Rd Ste 260		Transaction ID: 11503-P48525
	City Las Vegas	State NV	Zip Code 89121-3693
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer KIA Insurance		Occupation President	Payroll Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bradford H. Blain		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 2205 Abbeywood Rd		Transaction ID: 11503-P48972
	City Lexington	State KY	Zip Code 40515-1157
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Al Torstrick Insurance Agency, Inc.		Occupation Agent	Payroll Deduction (\$30.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Russ Blakely  
Mailing Address PO Box 11310

City State Zip Code  
Chattanooga TN 37401-2310

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

Name of Employer: Russ Blakely & Associates   Occupation: Agent

Receipt For:  Primary    General    Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48463  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Chad V. Blankenburg  
Mailing Address 5950 Fairview Rd Ste 618

City State Zip Code  
Charlotte NC 28210-3113

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

Name of Employer: The Cason Group, Inc.   Occupation: agent

Receipt For:  Primary    General    Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48225  
Amount of Each Receipt this Period: 40.00  
Payroll Deduction: (\$40.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
David M. Block  
Mailing Address 80 Challedon Dr

City State Zip Code  
Candler NC 28715-9417

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

Name of Employer: Insurance Specialties, Inc.   Occupation: President

Receipt For:  Primary    General    Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48197  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Laura Blomgren  
Mailing Address 37W778 Stratford Ln  
City Elgin State IL Zip Code 60124-6750  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Peridot Financial Group, LLC Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48926  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Michele B. Bloom  
Mailing Address 2213A Walnut St  
City Harrisburg State PA Zip Code 17103-2427  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Emerson, Reid & Co Occupation Plan Manager  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 212.94  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48296  
Amount of Each Receipt this Period 30.42  
Payroll Deduction (\$30.42 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Daniel J. Boaz  
Mailing Address 5565 Roberts Dr  
City Atlanta State GA Zip Code 30338-3350  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HealthLife Group, LLC Occupation President  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48927  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 90.42  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 18 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Diane Borrison  
Mailing Address 5448 Thornwood Dr Ste 200  
City San Jose State CA Zip Code 95123-1225  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Advanced Professionals Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48602  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
James C. Bosier  
Mailing Address 6410 N Butler Rd  
City Cedar Falls State IA Zip Code 50613-9317  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Accel Group Occupation Ins Design and Sales  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48717  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Jim Bowman  
Mailing Address 2701 W 15th St # 554  
City Plano State TX Zip Code 75075-7523  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bowman & Bowman Consultants, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48467  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 19 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Eleanor M. Brockhurst  
Mailing Address 5812 N 12th St Unit 4  
City Phoenix State AZ Zip Code 85014-2020  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Brockhurst & Associates, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48716  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Belinda M Brooks  
Mailing Address 323 Krotzer Ave  
City Luckey State OH Zip Code 43443-9758  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Consumer Driven Concepts, L.L.C. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48084  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Jude Broussard  
Mailing Address 31 Oakthorn Ct  
City Youngsville State LA Zip Code 70592-5464  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Breaux & Broussard, LLC Occupation Managing Member  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48931  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 20 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Anthony C Buechler  
Mailing Address 1203 Colonial Cir  
City Papillion State NE Zip Code 68046-6109  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Buechler Insurance Services Occupation agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48439  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Scott T. Buie  
Mailing Address 2819 E 4215 S  
City Salt Lake City State UT Zip Code 84124-2900  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Buie Insurance Services Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48354  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Lynn M. Bull  
Mailing Address 2517 Leslie Ln  
City Ceres State CA Zip Code 95307-2325  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Winton-Ireland Insurance Agency, Inc. Occupation Benefits Dept. Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48932  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 110.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Jennifer Bundy-Cobb

Mailing Address 3000 A St Ste 400

City Anchorage State AK Zip Code 99503-4040

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

Name of Employer The Wilson Agency, LLC Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11501-P48101

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Susan F. Burdette

Mailing Address 9608 Briar Forest Dr

City Houston State TX Zip Code 77063-1007

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

Name of Employer SBH & Associates Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11501-P48186

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Patrick Burns

Mailing Address 5653 Maxwellton Rd

City Oakland State CA Zip Code 94618-2654

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

Name of Employer Burns Employee Benefits Insurance Ser Occupation Managing Member

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48949

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

**A.** Full Name (Last, First, Middle Initial)  
 Charles R. Bushkill  
 Mailing Address 24056 S Shore Dr  
 City Edwardsburg State MI Zip Code 49112-9565  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Healy Group, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID: 11503-P48967**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
 Joseph W. Buyalos  
 Mailing Address 9051 Major Smith Ln  
 City Frederick State MD Zip Code 21704-7831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Insurance Exchange, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID: 11503-P48444**  
 Amount of Each Receipt this Period 85.00  
 Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
 Kareim R. Cade  
 Mailing Address 1544 Pebble Beach Dr  
 City Pontiac State MI Zip Code 48340-1367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great Lakes Benefit Group Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID: 11501-P48344**  
 Amount of Each Receipt this Period 85.00  
 Payroll Deduction (\$85.00 Bi-Weekly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
David A. Cagliola

Mailing Address 71 Quail Dr S

City Phoenixville State PA Zip Code 19460-1075

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

Name of Employer Radnor Benefits Group, Inc. Occupation Senior Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48718

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Louie L. Cason

Mailing Address 2920 Gervais St

City Columbia State SC Zip Code 29204-3345

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

Name of Employer The Cason Group, Inc. Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48610

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mike R. Castleberry

Mailing Address 506 Holly St

City Little Rock State AR Zip Code 72205-3932

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

Name of Employer HealthSCOPE Benefits Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48954

Amount of Each Receipt this Period 44.00

Payroll Deduction (\$44.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 214.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Russell B. Childers

Mailing Address 402 Rawley Rd

City State Zip Code  
Americus GA 31719-2150

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

Name of Employer Occupation  
Russ Childers, CLU President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48213

Amount of Each Receipt this Period  
95.00

Payroll Deduction  
(\$95.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan S. Clark

Mailing Address 545 E 4500 S Ste E250

City State Zip Code  
Salt Lake City UT 84107-2955

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

Name of Employer Occupation  
Western Benefit Planners Insurance Se Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48514

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dorothy M. Cociu

Mailing Address PO Box 1941

City State Zip Code  
Big Bear Lake CA 92315-1941

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

Name of Employer Occupation  
Advanced Benefit Consulting & Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48918

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **210.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Maggie Coley  
Mailing Address P.O. Box 61267

City Savannah State GA Zip Code 31420-

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

Name of Employer: Coley Benefit Services, Inc. Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48193  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
George Scott Condos  
Mailing Address 8860 S Tenaya Way

City Las Vegas State NV Zip Code 89113-5502

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

Name of Employer: Leavitt Insurance Agency Occupation: Charter Senior Financial Plann

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48270  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Teresa Conto  
Mailing Address 145 Polaris Dr

City Walkersville State MD Zip Code 21793-9123

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

Name of Employer: Independent Benefit Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48374  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction: (\$85.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Troy J. Cook  
 Mailing Address 6600 Westown Pkwy # 250  
 City State Zip Code  
 West Des Moines IA 50266-7724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Krist Insurance Services Occupation AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48113  
 Amount of Each Receipt this Period 85.00  
 Payroll Deduction (\$85.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Catherine L. Cooper  
 Mailing Address 17232 Brookview Dr  
 City State Zip Code  
 Livonia MI 48152-4543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Health Care Administrators Occupation agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 445.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48970  
 Amount of Each Receipt this Period 42.00  
 Payroll Deduction (\$42.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mike Coppess  
 Mailing Address 5001 Western Ave  
 City State Zip Code  
 Omaha NE 68132-1465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Aflac Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48743  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 157.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

**A.** Full Name (Last, First, Middle Initial)  
 Steven G. Cosby  
 Mailing Address 27 W Boscawen St  
 City Winchester State VA Zip Code 22601-4740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Cosby Insurance Group Occupation: Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00  
 Date of Receipt: 07 / 23 / 2011  
**Transaction ID: 11503-P48470**  
 Amount of Each Receipt this Period: 85.00  
 Payroll Deduction: (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
 Carrie Cox  
 Mailing Address 3621 Eastman Dr  
 City Oklahoma City State OK Zip Code 73112-1439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Oden Roberts Rohrman Insurance Occupation: Group Benefits Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt: 07 / 23 / 2011  
**Transaction ID: 11501-P48191**  
 Amount of Each Receipt this Period: 30.00  
 Payroll Deduction: (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
 John B. Crable  
 Mailing Address 712 Riverton Rd  
 City Moorestown State NJ Zip Code 08057-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Corporate Synergies Group, Inc. Occupation: VP & Lead Conosultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00  
 Date of Receipt: 07 / 23 / 2011  
**Transaction ID: 11503-P48959**  
 Amount of Each Receipt this Period: 50.00  
 Payroll Deduction: (\$50.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **165.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Lori Crandall

Mailing Address 4328 E Clarendon Ave

City State Zip Code  
Phoenix AZ 85018-5952

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

Name of Employer Wick Pilcher Insurance Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
07 / 20 / 2011

Transaction ID: 11465

Amount of Each Receipt this Period: 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Neil R Crosby

Mailing Address 1561 Berkshire Ct

City State Zip Code  
San Marcos CA 92069-1182

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

Name of Employer Warner Pacific Insurance Services Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48587

Amount of Each Receipt this Period: 50.00

Payroll Deduction (\$50.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Reed Damron

Mailing Address 4642 Riveredge Dr

City State Zip Code  
Duluth GA 30096-2987

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

Name of Employer HIRE Benefits, Inc. Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48465

Amount of Each Receipt this Period: 85.00

Payroll Deduction (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **635.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
John A Davidson  
 Mailing Address 25 Rolling Oaks Dr Ste 110  
 City State Zip Code  
 Thousand Oaks CA 91361-1003  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2011  
**Transaction ID:** 11503-P48522  
 Amount of Each Receipt this Period  
 85.00  
 Payroll Deduction  
 (\$85.00 Monthly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Davidson Insurance & financial Service Occupation Insurance Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

**B.** Full Name (Last, First, Middle Initial)  
Sandra H. Davis  
 Mailing Address PO Box 243  
 City State Zip Code  
 Watson LA 70786-0243  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2011  
**Transaction ID:** 11501-P48266  
 Amount of Each Receipt this Period  
 42.00  
 Payroll Deduction  
 (\$42.00 Bi-Weekly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation Office Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

**C.** Full Name (Last, First, Middle Initial)  
Johnny Lee Dawkins  
 Mailing Address 122 Thorncliff Dr  
 City State Zip Code  
 Fayetteville NC 28303-5268  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2011  
**Transaction ID:** 11503-P48758  
 Amount of Each Receipt this Period  
 121.00  
 Payroll Deduction  
 (\$121.00 Monthly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ebenconcepts Occupation Broker/Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 248.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 150
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Craig R Dawson		Date of Receipt
	Mailing Address 2010 Coleman Ct		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Midland	TX	79705-1719
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Insurance One Management, Inc / Don C		Occupation Agent	Transaction ID: 11503-P48538
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="350.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="50.00"/>
		Payroll Deduction	
			(\$50.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Teresa F DeBruin		Date of Receipt
	Mailing Address 5441 Edgerton Dr		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Norcross	GA	30092-2185
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer DeBruin Benefit Services, Inc./ The L		Occupation Agent	Transaction ID: 11503-P48939
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="445.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="42.00"/>
		Payroll Deduction	
			(\$42.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) James F. Deese		Date of Receipt
	Mailing Address 2811 Lenoir Dr		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Greensboro	NC	27408-5212
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Carolina Benefit Administrators		Occupation Agent	Transaction ID: 11503-P48942
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="280.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="50.00"/>
		Payroll Deduction	
			(\$50.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="142.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
John E. DeGruttola

Mailing Address 848 Forest Glade Dr

City State Zip Code  
Chesapeake VA 23322-8102

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

Name of Employer Occupation  
Optima Health Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48728

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Scott A Delisi

Mailing Address 920 Starview Ln

City State Zip Code  
Lincoln NE 68512-1150

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

Name of Employer Occupation  
Ameritas Life Insurance Group Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48214

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Marie G. DeWolf

Mailing Address 2028 Blue Mesa Ct

City State Zip Code  
Loveland CO 80538-4188

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

Name of Employer Occupation  
DeWolf Insurance, Inc. Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48871

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **90.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 150  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Rush D. Dixon

Mailing Address 1375 Piccard Dr

City State Zip Code  
Rockville MD 20850-4311

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

Name of Employer  
Early Cassidy and Schilling

Occupation  
VP of Employee Benefits

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1315.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48575

Amount of Each Receipt this Period  
170.00

Payroll Deduction  
(\$170.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Steven H. Dodder

Mailing Address PO Box 2069

City State Zip Code  
Monument CO 80132-2069

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

Name of Employer  
Assurant Health

Occupation  
Regional Sales Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
770.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48582

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Cynthia H. Doucet

Mailing Address 206 Bon Mange Cir

City State Zip Code  
Lafayette LA 70506-3748

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

Name of Employer  
Global Financial Resources, Inc.

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48055

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **285.00**

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



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

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

FOR LINE NUMBER: PAGE 33 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Joseph F. Dowd  
Mailing Address 106 S Princeton Ave  
City State Zip Code  
Wenonah NJ 08090-1937  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Kistler-Tiffany Benefits Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48873  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Betty R. Doyle  
Mailing Address 3304 Cedar Valley Rd  
City State Zip Code  
Moore OK 73170-7929  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Doyle Insurance Source Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48320  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Dana Drake  
Mailing Address 706 N 19th St  
City State Zip Code  
Coeur D Alene ID 83814-5549  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Schedler Mack Insurance, Inc. Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48162  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Samuel H. Drysdale		Date of Receipt
	Mailing Address 4520 S National Ave		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Springfield	MO	68501
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 11503-P48498
Name of Employer Mercy Health Plans		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="222.00"/>	<input type="text" value="42.00"/>
			Payroll Deduction (\$42.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Keith M. Duhon		Date of Receipt
	Mailing Address 208 Essex St		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Lafayette	LA	70506-6133
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 11501-P48310
Name of Employer The Family Insurance Center, Inc.		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	<input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Tina M. Durand		Date of Receipt
	Mailing Address 3105 Lawnview St		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Corpus Christi	TX	78404-2426
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 11501-P48073
Name of Employer Heavin & Associates Insurance		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="222.00"/>	<input type="text" value="42.00"/>
			Payroll Deduction (\$42.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="114.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 35 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Wendy Ebner  
Mailing Address 50 Mill Park Ln  
City Marlton State NJ Zip Code 08053-9711  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Savoy Associates Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48853  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Michael A. Embry  
Mailing Address 26240 Wacker Dr  
City New Baltimore State MI Zip Code 48051-3306  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Comerica Insurance Services, Inc. Occupation VP - Group Benefits Division  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48880  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Linda M. Erlenbach  
Mailing Address 151 Belcourt Ln  
City Aurora State OH Zip Code 44202-8438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer L.M. Erlenbach, Inc. Occupation Benefits Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48281  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) John G. Fagen Mailing Address PO Box 19 City State Zip Code Demotte IN 46310-0019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Financial Arts Inc. Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00	Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2011 <b>Transaction ID:</b> 11503-P48631 Amount of Each Receipt this Period 85.00 Payroll Deduction (\$85.00 Monthly)
<b>B.</b>	Full Name (Last, First, Middle Initial) Valerie Fagen Mailing Address 506 Daisy St SE City State Zip Code Demotte IN 46310-9709 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Financial Arts, Inc. Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.35	Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2011 <b>Transaction ID:</b> 11503-P48944 Amount of Each Receipt this Period 41.67 Payroll Deduction (\$41.67 Monthly)
<b>C.</b>	Full Name (Last, First, Middle Initial) Nicole Fairbairn Mailing Address 2113 Dakota Dr City State Zip Code Noblesville IN 46062-9075 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Creative Insurance Concepts, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 385.00	Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2011 <b>Transaction ID:</b> 11503-P48946 Amount of Each Receipt this Period 30.00 Payroll Deduction (\$30.00 Monthly)

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

156.67

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)

Dominick Fanuele

Mailing Address 118 Orton Rd

City State Zip Code  
Caldwell NJ 07006-8251

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

Name of Employer Occupation  
Fanuele Financial Group Agent  
LLC

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48947

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Cheryl S Farmer

Mailing Address 56114 C. R. 23

City State Zip Code  
Bristol IN 46507

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

Name of Employer Occupation  
Health Resources Inc. Agent

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48694

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Jennifer Liane Farrell

Mailing Address 6958 W Juniper Ave

City State Zip Code  
Peoria AZ 85382-3999

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

Name of Employer Occupation  
Black, Gould & Associates Sr. Account Executive

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48695

Amount of Each Receipt this Period

40.00

Payroll Deduction

(\$40.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

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

Mailing Address 125 Chatham Dr

City Aurora State OH Zip Code 44202-7809

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

Name of Employer Self Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48882

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Richard Fishback

Mailing Address 736 Johnson Ferry Rd C-200

City Marietta State GA Zip Code 30068-4379

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

Name of Employer Purchasing Alliance Solutions, Inc. Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48632

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Erin B. Fisher

Mailing Address 131 Courtland Ave

City Stamford State CT Zip Code 06902-3443

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

Name of Employer Health Plan One - Medicare Solutions Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 407.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48556

Amount of Each Receipt this Period 87.00

Payroll Deduction (\$87.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 202.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Robert Mark Fitzgerald

Mailing Address 2842 Landing Way

City State Zip Code  
Marietta GA 30066-2362

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

Name of Employer Occupation  
Robert Fitzgerald Insurance Agency, I Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 335.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48897

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dennis G. Fletcher

Mailing Address 2510 N Pines Rd Ste 205

City State Zip Code  
Spokane WA 99206-7636

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

Name of Employer Occupation  
The Fletcher Financial Group President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48604

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Wesley Foster

Mailing Address 411 Copper Cir

City State Zip Code  
Argyle TX 76226-7333

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

Name of Employer Occupation  
BenefitMall Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48691

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Brenda N. Franklin

Mailing Address 7915 N Hale Ave Ste D

City Peoria State IL Zip Code 61615-2088

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

Name of Employer OSF HealthPlans Occupation Group Representative

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48099  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Patricia Freeman

Mailing Address 15206 John West Rd

City Gonzales State LA Zip Code 70737-7131

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

Name of Employer Trish Freeman Insurance Services Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48442  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Linda K. Friedrich

Mailing Address 3011 Crown Pointe Rd

City Lincoln State NE Zip Code 68506-5168

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

Name of Employer UNICO Financial Services, Inc. Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48077  
 Amount of Each Receipt this Period 50.00  
 Payroll Deduction (\$50.00 Bi-Weekly)

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelly Don Fristoe		Date of Receipt
	Mailing Address 807 8th St Ste 300		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Wichita Falls	TX	76301-3317
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Financial Partners		Occupation Agent	<b>Transaction ID:</b> 11501-P48305
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="835.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Bruce E. Frizen		Date of Receipt
	Mailing Address 1706 Grayscroft Dr		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Waxhaw	NC	28173-6678
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Horizon Benefits Consultants, Inc		Occupation Agent	<b>Transaction ID:</b> 11503-P48978
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="45.00"/>
			Payroll Deduction (\$45.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Joan A. Fusco		Date of Receipt
	Mailing Address 595 Wood Ave		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	North Brunswick	NJ	08902-2543
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Savoy Associates		Occupation Director, Research & Education	<b>Transaction ID:</b> 11501-P48072
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="105.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 42 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Joan L. Galletta  
 Mailing Address 3342 Kori Rd  
 City State Zip Code  
 Jacksonville FL 32257-8883  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 JP Perry Insurance, Inc. Agent  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 595.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2011  
**Transaction ID:** 11503-P48486  
 Amount of Each Receipt this Period  
 85.00  
 Payroll Deduction  
 (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Hollie Gandy  
 Mailing Address 2920 Duniven Cir  
 City State Zip Code  
 Amarillo TX 79109-1650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Senior Solutions Group Agent  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2011  
**Transaction ID:** 11501-P48200  
 Amount of Each Receipt this Period  
 30.00  
 Payroll Deduction  
 (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
James S. Garbina  
 Mailing Address 16510 Summit Dr  
 City State Zip Code  
 Omaha NE 68136-4038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Harry A. Koch Co. Agent  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 595.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2011  
**Transaction ID:** 11501-P48078  
 Amount of Each Receipt this Period  
 85.00  
 Payroll Deduction  
 (\$85.00 Bi-Weekly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Stephanie L. Garcia  
 Mailing Address 4101 Indian School Rd NE  
 City State Zip Code  
 Albuquerque NM 87110-3988  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lovelace Health Plan Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00  
 Date of Receipt 07 / 20 / 2011  
**Transaction ID:** 11466  
 Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Joy K. Gardner  
 Mailing Address 10605 Sterling Ridge Way  
 City State Zip Code  
 Reno NV 89521-5199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Comstock Insurance Agencies, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48098  
 Amount of Each Receipt this Period 40.00  
 Payroll Deduction (\$40.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
G. Russell Garner  
 Mailing Address 1308 Murraywood Dr  
 City State Zip Code  
 Columbia SC 29212-1159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48696  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 570.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 44 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Charles T. Gartlan

Mailing Address 19 Tarworth Ter

City State Zip Code  
Manchester NJ 08759-6671

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

Name of Employer Occupation  
Emerson, Reid & Co. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48697

Amount of Each Receipt this Period  
100.00

Payroll Deduction  
(\$100.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Julie Reno George

Mailing Address 2016 Muirfield PI

City State Zip Code  
Clemmons NC 27012-9345

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

Name of Employer Occupation  
JBA Benefits, LLC Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 35.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2011

**Transaction ID:** 11521

Amount of Each Receipt this Period  
0.00

**C.** Full Name (Last, First, Middle Initial)  
Julie Reno George

Mailing Address 2016 Muirfield PI

City State Zip Code  
Clemmons NC 27012-9345

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

Name of Employer Occupation  
JBA Benefits, LLC Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1035.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2011

**Transaction ID:** 11522

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Charles J. Giardina  
Mailing Address 41 Seven Oaks Rd  
City Marrero State LA Zip Code 70072-5059  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MetLife Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48205  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
James David Gibson  
Mailing Address 93 Hollenbeck Rd  
City Irmo State SC Zip Code 29063-8076  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gibson & Associates, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1020.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48516  
Amount of Each Receipt this Period 170.00  
Payroll Deduction (\$170.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Michael Gibson  
Mailing Address 308 Beulah Ln  
City Irmo State SC Zip Code 29063-9573  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gibson & Associates Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48884  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 285.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 150

(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

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

NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)

Richard R Girdler

Mailing Address 400 Sims Ln

City State Zip Code  
Franklin TN 37069-1890

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

Name of Employer Occupation  
Cowan Benefit Services Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 745.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48914

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Patrice Goldfarb

Mailing Address 442 Teaneck Rd

City State Zip Code  
Ridgefield Park NJ 07660-1516

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

Name of Employer Occupation  
The Employee Benefits Adv-  
isors Group Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48701

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$60.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Michael A. Gomes

Mailing Address 4851 Lyndon B Johnson Fwy Ste 1100

City State Zip Code  
Dallas TX 75244-6025

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

Name of Employer Occupation  
BenefitMall, Inc. EVP - Marketing Ops.

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

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2011

Transaction ID: 11467

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1145.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Heather C. Gorman

Mailing Address 2 Windrock Way

City State Zip Code  
Greensboro NC 27455-2258

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

Name of Employer Occupation  
Eben Concepts Group Account Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48888

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Michael D. Gray

Mailing Address 8230 Rockledge Road #123

City State Zip Code  
Lincoln NE 68506-7519

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

Name of Employer Occupation  
The Harry A. Koch Company Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11501-P48355

Amount of Each Receipt this Period  
100.00

Payroll Deduction  
(\$100.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
J. J. R Green

Mailing Address 2121 N Webb Rd

City State Zip Code  
Grand Island NE 68803-1751

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

Name of Employer Occupation  
Primark, Inc. Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48601

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

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

160.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela A. Gregory		Date of Receipt		
	Mailing Address 111 Park Ln		M M / D D / Y Y Y Y 07 / 14 / 2011		
	City Ridgeland	State MS	Zip Code 39157-9763	<b>Transaction ID:</b> 11444	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00		
Name of Employer The Bottrell Insurance Agency, Inc.		Occupation Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Patricia A Griffey		Date of Receipt		
	Mailing Address 56294 Primrose Cir		M M / D D / Y Y Y Y 07 / 23 / 2011		
	City Elkhart	State IN	Zip Code 46516-1509	<b>Transaction ID:</b> 11503-P48700	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 85.00		
Name of Employer Page 1 Benefits, Inc.		Occupation Agent		Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 595.00			(\$85.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) J.B. Gross		Date of Receipt		
	Mailing Address 331 Clear Lake Ln		M M / D D / Y Y Y Y 07 / 23 / 2011		
	City Weatherford	State TX	Zip Code 76087-9173	<b>Transaction ID:</b> 11503-P48859	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 85.00		
Name of Employer J. B. Gross Insurance		Occupation Agent		Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 595.00			(\$85.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	670.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 49 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Lorelei A. Gross  
Mailing Address 331 Clear Lake Ln  
City Weatherford State TX Zip Code 76087-9173  
FEC ID number of contributing federal political committee. **C**  
Name of Employer J. B. Gross Insurance Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48860  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Robert A Grundman  
Mailing Address 7412 Karl Dr  
City Lincoln State NE Zip Code 68516-4368  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Senior Benefit Strategies Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48111  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Craig G. Gussin  
Mailing Address 843 Summersong Ct  
City Encinitas State CA Zip Code 92024-5447  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Auerbach & Gussin Insurance and Finan Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 535.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48599  
Amount of Each Receipt this Period 95.00  
Payroll Deduction (\$95.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 230.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 50 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Antonio Gutierrez

Mailing Address 12833 Riverdance Dr

City Raleigh State NC Zip Code 27613-7093

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

Name of Employer Integrated Benefit Solutions, Inc. Occupation Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48891

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Teresa C. Gutierrez

Mailing Address 12833 Riverdance Dr

City Raleigh State NC Zip Code 27613-7093

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

Name of Employer IBS/White Bear Group Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48893

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dwight A. Hall

Mailing Address 6107 Hazelwood Ave

City Indianapolis State IN Zip Code 46228-1316

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

Name of Employer D. Hall & Associates Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48704

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark Haraway		Date of Receipt
	Mailing Address 11325 Country Club Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2011
	City	State	Zip Code
	New Market	MD	21774-6701
	FEC ID number of contributing federal political committee.		Transaction ID: 11503-P48714
		Amount of Each Receipt this Period	
		<input type="text"/> 30.00	
Name of Employer DentaQuest		Occupation Agent	Payroll Deduction
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 210.00	
			(\$30.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Myrna S. Harris		Date of Receipt
	Mailing Address 3 Lawson Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2011
	City	State	Zip Code
	Asheville	NC	28806-9687
	FEC ID number of contributing federal political committee.		Transaction ID: 11503-P48862
		Amount of Each Receipt this Period	
		<input type="text"/> 30.00	
Name of Employer Crescent Preferred Provider Organizat		Occupation Chief Operating Officer	Payroll Deduction
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 210.00	
			(\$30.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher S. Harrison		Date of Receipt
	Mailing Address 921-C S McPherson Church Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2011
	City	State	Zip Code
	Fayetteville	NC	28303-5368
	FEC ID number of contributing federal political committee.		Transaction ID: 11503-P48458
		Amount of Each Receipt this Period	
		<input type="text"/> 410.00	
Name of Employer Ebenconcepts Company		Occupation President	Payroll Deduction
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 2870.00	
			(\$410.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 470.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 52 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Larry S. Harrison

Mailing Address 724 S 9th St

City State Zip Code  
Las Vegas NV 89101-7015

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

Name of Employer Occupation  
Harrison Insurance Agency Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48518

Amount of Each Receipt this Period  
30.42

Payroll Deduction  
(\$30.42 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Daniel R Hart

Mailing Address 2137 E 32nd St

City State Zip Code  
Tulsa OK 74105-2213

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

Name of Employer Occupation  
Guardian Life Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48741

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Gerald G Hartman

Mailing Address 3822 Gemini Cir

City State Zip Code  
Boise ID 83709-4834

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

Name of Employer Occupation  
Insurance Network America Inc Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48706

Amount of Each Receipt this Period  
50.00

Payroll Deduction  
(\$50.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **110.42**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Matthew F. Hatfield		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 2207 Springfield Ave		<b>Transaction ID:</b> 11503-P48863
	City State Zip Code Fort Wayne IN 46805-1541	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
	Name of Employer Self Occupation Sales Representative	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Payroll Deduction (\$40.00 Monthly)
	Aggregate Year-to-Date ▼ 280.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Lori Headley		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address PO Box 14725		<b>Transaction ID:</b> 11503-P48551
	City State Zip Code Portland OR 97293-0725	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
	Name of Employer Healthwise Insurance Planning Occupation Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Payroll Deduction (\$30.00 Monthly)
	Aggregate Year-to-Date ▼ 210.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Hedy S Hebert		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 4816 Woodberry Ln		<b>Transaction ID:</b> 11503-P48900
	City State Zip Code Benton LA 71006-9361	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
	Name of Employer Benefit Consulting Services Occupation Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Payroll Deduction (\$30.00 Monthly)
	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 150  
(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

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

NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Dan M. Heffley Mailing Address PO Box 50031 City State Zip Code Henderson NV 89016- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Employer Benefit Source, I-nc. Agent Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 245.00	Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2011 <b>Transaction ID:</b> 11503-P48982 Amount of Each Receipt this Period 10.00 Payroll Deduction (\$10.00 Monthly)
<b>B.</b>	Full Name (Last, First, Middle Initial) John Heinz Mailing Address 413 Roslyn Rd City State Zip Code Dundee IL 60118-1024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation INSource Benefits Consultants President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 295.00	Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2011 <b>Transaction ID:</b> 11503-P48916 Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20.00 Monthly)
<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy Hendricks Mailing Address 1605 S Eucalyptus Ave City State Zip Code Broken Arrow OK 74012-5995 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Business Planning Group Of OK Agent Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 700.00	Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2011 <b>Transaction ID:</b> 11501-P48154 Amount of Each Receipt this Period 100.00 Payroll Deduction (\$100.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>130.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 55 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Thomas L. Henry

Mailing Address 19310 Sonoma Hwy Ste A

City State Zip Code  
Sonoma CA 95476-5454

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

Name of Employer RealCare Insurance Market-Ing, Inc. Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48481  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
William S. Hepscher

Mailing Address 38176 Medical Center Ave

City State Zip Code  
Zephyrhills FL 33540-1380

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

Name of Employer The Canadian Drugstore Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48623  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Jon Hicks

Mailing Address 3620 Mountainside Dr

City State Zip Code  
Colorado Springs CO 80918-5528

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

Name of Employer Hicks Benefit Group Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48710  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Joshua Hilgers		Date of Receipt
	Mailing Address 1747 Reese St		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Homewood	AL	35209-2517
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Innovative Benefits Consulting		Occupation Agent	Transaction ID: 11503-P48983
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="210.00"/>	
		Payroll Deduction	Amount of Each Receipt this Period
		(\$30.00 Monthly)	<input type="text" value="30.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) John H. Hinck		Date of Receipt
	Mailing Address 3160 Ridge Dr		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Toano	VA	23168-9615
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Centaurus Financial, Inc.		Occupation Registered Principal	Transaction ID: 11503-P48865
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="210.00"/>	
		Payroll Deduction	Amount of Each Receipt this Period
		(\$30.00 Monthly)	<input type="text" value="30.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Jimmy C Hinson		Date of Receipt
	Mailing Address 4951 Forsyth Rd		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Macon	GA	31210-
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BB&T Insurance Services, Inc.		Occupation Agent	Transaction ID: 11501-P48132
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="220.00"/>	
		Payroll Deduction	Amount of Each Receipt this Period
		(\$10.00 Bi-Weekly)	<input type="text" value="10.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: PAGE 57 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
James H Hissong

Mailing Address 8401 Widmer Rd

City Lenexa State KS Zip Code 66215-5416

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

Name of Employer Jim Hissong Insurance Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11501-P48169

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Angela Hogan

Mailing Address 1233 Lincoln Mall Ste 100

City Lincoln State NE Zip Code 68508-2876

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

Name of Employer BlueCross BlueShield of Nebraska Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11501-P48059

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Matthew B. Holcomb

Mailing Address 712 Hill St SE

City Atlanta State GA Zip Code 30315-1312

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

Name of Employer Holcomb Insurance Services Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48907

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address PO Box 698

City State Zip Code  
Centralia WA 98531-0698

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

Name of Employer Centralia General Agencies Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48239  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Dean E. Holmes

Mailing Address 12252 Beestone Ln

City State Zip Code  
Raleigh NC 27614-8024

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

Name of Employer Covenant Services Group, LLC Occupation Regional Sales Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48712  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Al Hombroek

Mailing Address 1185 Montclair Way

City State Zip Code  
Snellville GA 30078-7327

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

Name of Employer Multiple Benefits Corporation Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48809  
Amount of Each Receipt this Period 100.00  
Payroll Deduction (\$100.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)

Kymberly J. Hopwood

Mailing Address 1955 Las Colinas Dr

City State Zip Code  
Brentwood CA 94513-6601

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

Name of Employer Occupation  
Dealey, Renton & Associates Account Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48867

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Michelle S. Howard

Mailing Address 2850 W Grand Blvd

City State Zip Code  
Detroit MI 48202-2643

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

Name of Employer Occupation  
Health Alliance Plan Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48450

Amount of Each Receipt this Period

42.00

Payroll Deduction

(\$42.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Connie R. Humbert

Mailing Address 7613 Melody Dr

City State Zip Code  
Rohnert Park CA 94928-5435

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

Name of Employer Occupation  
Seniors First Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48527

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

157.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
William E. Hunsuck

Mailing Address 3000 A St Ste 400

City State Zip Code  
Anchorage AK 99503-4040

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

Name of Employer Occupation  
The Wilson Agency, LLC Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
365.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2011

Transaction ID: 11469

Amount of Each Receipt this Period

365.00

**B.**

Full Name (Last, First, Middle Initial)  
David L Hunt

Mailing Address 110 Mallard Ln

City State Zip Code  
Madison MS 39110-8799

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

Name of Employer Occupation  
Hunt Insurance Agency Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
245.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48202

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Steven Israel

Mailing Address 4790 Blossom Dr

City State Zip Code  
Delray Beach FL 33445-5322

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

Name of Employer Occupation  
S. Florida Affiliated Health Insurers Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48461

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

430.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Jerry D. Jackson	Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 1017 N Maplewood Ave	<b>Transaction ID:</b> 11503-P48869
	City Peoria State IL Zip Code 61606-1035	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction (\$30.00 Monthly)
	Name of Employer Jackson Financial Services Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Leah-Anne Janway	Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 2225 SW 96th St	<b>Transaction ID:</b> 11501-P48237
	City Oklahoma City State OK Zip Code 73159-6861	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction (\$30.00 Bi-Weekly)
	Name of Employer Berryhill Insurance Agency, Inc. Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Deborah Jeffs	Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 32 Foxboro	<b>Transaction ID:</b> 11503-P48720
	City Irvine State CA Zip Code 92614-7523	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction (\$30.00 Monthly)
	Name of Employer Progressive Benefit Managers Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 62 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Julia A. Jennings  
Mailing Address 2 Lady Slipper Ln  
City Marion State MA Zip Code 02738-1294  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Sylvia & Co. Ins. Agency, Inc. Occupation Vice President, Employee Benef  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 720.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48721  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
David S Johnson  
Mailing Address 1482 Baron Ct  
City Stone Mountain State GA Zip Code 30087-3037  
FEC ID number of contributing federal political committee. **C**  
Name of Employer David S. Johnson Insurance Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1270.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48870  
Amount of Each Receipt this Period 200.00  
Payroll Deduction (\$200.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Suzanne K. Johnson  
Mailing Address 6235 Morrison Blvd Ste 302  
City Charlotte State NC Zip Code 28211-3508  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Strategic Employee Benefit Services Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48353  
Amount of Each Receipt this Period 40.00  
Payroll Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 325.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 63 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Cynthia M. Jones

Mailing Address 24223 English Rose Pl

City State Zip Code  
Valencia CA 91354-4921

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

Name of Employer Warner Pacific Insurance Services  
Occupation Vice President of Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48598

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Charles Jurkus

Mailing Address 823 Commerce Dr Ste 350

City State Zip Code  
Oak Brook IL 60523-8855

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

Name of Employer Employee Benefit Risk Mgmt. Services  
Occupation Sales Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48502

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Lawrence Kaczmarek

Mailing Address 6711 Berry Rd

City State Zip Code  
Ravenna OH 44266-9161

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

Name of Employer Kaczmarek Ins. Services Agency, Inc.  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11501-P48232

Amount of Each Receipt this Period  
31.00

Payroll Deduction  
(\$31.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **91.00**

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

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

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

FOR LINE NUMBER: PAGE 64 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) T. Darlene Kaczmarek		Date of Receipt
	Mailing Address 6711 Berry Rd		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Ravenna	OH	44266-9161
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Kaczmarek Ins. Services Agency, Inc.		Occupation Agent	Transaction ID: 11501-P48338
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="217.00"/>	Amount of Each Receipt this Period <input type="text" value="31.00"/>
			Payroll Deduction (\$31.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Jonathan E. Katz		Date of Receipt
	Mailing Address 1404 Northpoint Glen Ct		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Herndon	VA	20170-2707
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Virginia Medical Plans		Occupation Agent	Transaction ID: 11503-P48455
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) George R Keeling		Date of Receipt
	Mailing Address 1875 N Highway 385		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Levelland	TX	79336-9493
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer George R. Keeling Insurance Agency		Occupation Agent	Transaction ID: 11501-P48178
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="595.00"/>	Amount of Each Receipt this Period <input type="text" value="85.00"/>
			Payroll Deduction (\$85.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) .....

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 150  
(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

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

NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Dianne M. Kelley

Mailing Address 7320 N La Cholla Blvd

City Tucson State AZ Zip Code 85741-2309

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

Name of Employer Sandbrook Business Benefits Group Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11501-P48351

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$50.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Tamara P Kennedy

Mailing Address 9414 E Sera Brisa

City Scottsdale State AZ Zip Code 85255-6054

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

Name of Employer Rogers Benefit Group, Inc. Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1285.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48513

Amount of Each Receipt this Period 200.00

Payroll Deduction (\$200.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dierdre Kennedy-Simington

Mailing Address 1748 Meadowbrook Rd

City Altadena State CA Zip Code 91001-3321

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

Name of Employer Polenzani Benefits & Insurance Servic Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48836

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 280.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

**A.** Full Name (Last, First, Middle Initial)  
 Laurie J Kirkland  
 Mailing Address 6601 Glacier Ct  
 City State Zip Code  
 Yakima WA 98908-2382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Conover Insurance, Inc. Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00  
 Date of Receipt: 07 / 23 / 2011  
**Transaction ID: 11503-P48680**  
 Amount of Each Receipt this Period: 85.00  
 Payroll Deduction: (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
 Kelly Kistler  
 Mailing Address 6565 26th St N  
 City State Zip Code  
 Saint Petersburg FL 33702-5631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 First Service Administrators, Inc. Employee Benefits Sales & Mark  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt: 07 / 23 / 2011  
**Transaction ID: 11503-P48908**  
 Amount of Each Receipt this Period: 30.00  
 Payroll Deduction: (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
 Randy H. Klein  
 Mailing Address 1880 Meadow Dr  
 City State Zip Code  
 Hinckley OH 44233-9523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Custom Brokers Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt: 07 / 23 / 2011  
**Transaction ID: 11503-P48866**  
 Amount of Each Receipt this Period: 30.00  
 Payroll Deduction: (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **145.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 67 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Lonnie Klene  
Mailing Address 926 W 22nd St  
City Houston State TX Zip Code 77008-1802  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Core Benefits Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48837  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
T. Brian Knauer  
Mailing Address 6204 Forrestal Dr  
City Tampa State FL Zip Code 33625-1609  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Florida Insurance Brokers, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48838  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ronald David Knight  
Mailing Address PO Box 507  
City Carrollton State GA Zip Code 30112-0009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer J. Smith Lanier & Co., Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2125.00  
Date of Receipt 07 / 20 / 2011  
Transaction ID: 11470  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1060.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 68 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Linda Rose Koehler  
Mailing Address 516 Shelley St  
City Livermore State CA Zip Code 94550-2368  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herzog Insurance Agency Occupation Health Benefits Insurance Specialist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48053  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Mark Kolterman  
Mailing Address PO Box 426  
City Seward State NE Zip Code 68434-0426  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kolterman Agency, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48484  
Amount of Each Receipt this Period 35.00  
Payroll Deduction (\$35.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Susanne Kolterman  
Mailing Address PO Box 426  
City Seward State NE Zip Code 68434-0426  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kolterman Agency, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48153  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ross W. Kraft</p> <p>Mailing Address 21 Jordan Rd</p> <p>City State Zip Code New Hartford NY 13413-2311</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Meridian Group of New York, Inc. Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">212.94</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID:</b> 11503-P48681</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.42</span></p> <p>Payroll Deduction                  (\$30.42 Monthly)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary B. Kramer</p> <p>Mailing Address 2120 Nelsons Creek Dr</p> <p>City State Zip Code Omaha NE 68116-5135</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Holmes Murphy and Associates, Inc. Occupation Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">280.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID:</b> 11501-P48173</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span></p> <p>Payroll Deduction                  (\$40.00 Bi-Weekly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Linda E. Krueger</p> <p>Mailing Address 5753 Housman Ave</p> <p>City State Zip Code Pueblo CO 81004-9708</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Beta Health Association, Inc. Occupation Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID:</b> 11501-P48056</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Bi-Weekly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">100.42</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Daniel C LaBroad

Mailing Address 710 Farmers Market Way

City State Zip Code  
Dallas TX 75201-8451

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

Name of Employer: Ovation Health & Life Services, Inc. Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48829  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction: (\$85.00 Monthly)

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

Mailing Address 3540 Breeze Knoll Dr

City State Zip Code  
Youngstown OH 44505-1918

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

Name of Employer: First Place Insurance Agency Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48830  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Julian E. Lago

Mailing Address 8104 Bautista Way

City State Zip Code  
Palm Beach Gardens FL 33418-8178

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

Name of Employer: Plastridge Insurance Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48846  
Amount of Each Receipt this Period: 170.00  
Payroll Deduction: (\$170.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **285.00**

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

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

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

FOR LINE NUMBER: PAGE 71 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Mary Landen  
 Mailing Address 517 White Ash Ct  
 City Windsor State CA Zip Code 95492-8199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48058  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Andrew M. LaRocco  
 Mailing Address 84 Dartmouth Ave  
 City Avondale Estates State GA Zip Code 30002-1410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The LaRocco Companies Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48877  
 Amount of Each Receipt this Period 40.00  
 Payroll Deduction (\$40.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ruthann Laswick  
 Mailing Address 3800 N Central Ave Fl 9  
 City Phoenix State AZ Zip Code 85012-1979  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Black Gould & Associates, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48569  
 Amount of Each Receipt this Period 50.00  
 Payroll Deduction (\$50.00 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 72 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
James A. Lawless  
Mailing Address 435 Kingswood  
City Lexington State KY Zip Code 40502-1000  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lawless Insurance Agency Occupation Owner/Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48683  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Amy L. Layman  
Mailing Address 2232 Page Rd  
City Durham State NC Zip Code 27703-8921  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fort Dearborn Life Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48251  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Scott A. Leavitt  
Mailing Address 12988 W Paint Dr  
City Boise State ID Zip Code 83713-1947  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Scott Leavitt Insurance & Financial S Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48822  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

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



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

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

FOR LINE NUMBER: PAGE 73 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Emma S Leigh  
Mailing Address 5101 Peachtree Rd  
City Atlanta State GA Zip Code 30341-2715  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Alliant Health Systems Occupation Sr. Sales Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48505  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Karen B. Leonard  
Mailing Address 8 Shakespeare Rd  
City Hackettstown State NJ Zip Code 07840-4707  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Leonard Financial Group, LLC Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48960  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Robert M. Lindsay  
Mailing Address 220 Emerson Pl  
City Davenport State IA Zip Code 52801-1624  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Trissel Graham & Toodle Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48985  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 220.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Larry Link

Mailing Address 6901 Ravine Cir

City State Zip Code  
Worthington OH 43085-2886

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

Name of Employer Occupation  
InsuranceLink Agency, Inc. Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48726

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Juan R. Lopez

Mailing Address 27 Banstead

City State Zip Code  
Trabuco Canyon CA 92679-3740

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

Name of Employer Occupation  
Kaiser Permanente Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48833

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**C.**

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

Mailing Address 717 Lucerne Dr

City State Zip Code  
New Iberia LA 70563-8979

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

Name of Employer Occupation  
Insurance Resource Group Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48986

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

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

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

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

FOR LINE NUMBER: PAGE 75 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)

Sallie Loughlin

Mailing Address 312 E Main St

City State Zip Code  
Salisbury MD 21801

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

Name of Employer  
Avery Hall Benefit Solutions, Inc.

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48352

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)

Douglas Lubenow

Mailing Address 3 Fulton Dr

City State Zip Code  
Mount Laurel NJ 08054-4510

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

Name of Employer  
Lubenow Agency

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48061

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)

Kate Ludwigson

Mailing Address 4274 Mill Ridge Circle

City State Zip Code  
Eau Claire WI 54703-

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

Name of Employer  
Area Financial Services Inc.

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48684

Amount of Each Receipt this Period

10.00

Payroll Deduction

(\$10.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Joseph L Lunenschloss

Mailing Address 1976 Willeo Creek Pt

City State Zip Code  
Marietta GA 30068-1554

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

Name of Employer Occupation  
Digital Insurance, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48685

Amount of Each Receipt this Period  
25.00

Payroll Deduction  
(\$25.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Maurice Lyons

Mailing Address 301 Madison Ave Fl 4

City State Zip Code  
New York NY 10017-8103

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

Name of Employer Occupation  
The Medical Link, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1875.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48594

Amount of Each Receipt this Period  
250.00

Payroll Deduction  
(\$250.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Jim Malone

Mailing Address 124 Main Ave N

City State Zip Code  
Fayetteville TN 37334-3056

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

Name of Employer Occupation  
The Malone Company President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 690.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48483

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 305.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Kimberly C. Martin  
Mailing Address 6 Rasada Dr  
City Weaverville State NC Zip Code 28787-9306  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ebenconcepts Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48373  
Amount of Each Receipt this Period 40.00  
Payroll Deduction (\$40.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Phyllis Martinsen  
Mailing Address 8331 W Cory Ct  
City Boise State ID Zip Code 83704-5725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Byron Hyatt Erstad & Co Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48812  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Matthew L. Masone  
Mailing Address 367 Sheffield Rd  
City Severna Park State MD Zip Code 21146-1647  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lincoln Financial Group Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 315.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48821  
Amount of Each Receipt this Period 45.00  
Payroll Deduction (\$45.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 115.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 78 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Donald L. Mathern

Mailing Address 7650 Cherrywood Dr

City State Zip Code  
Boise ID 83704-3541

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

Name of Employer Insurance Specialists Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48466

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Carol Matznick

Mailing Address 3207 Cottingham Ct

City State Zip Code  
Greensboro NC 27410-8362

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

Name of Employer North Carolina AHU Occupation Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11501-P48342

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Michael E. Matznick

Mailing Address 3207 Cottingham Ct

City State Zip Code  
Greensboro NC 27410-8362

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

Name of Employer EbenConcepts Company Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48834

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$100.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **172.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rebecca Ballard McCabe</p> <p>Mailing Address 111 Connors Cir</p> <p>City State Zip Code Cary NC 27511-6693</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation UnitedHealthcare Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID:</b> 11503-P48555</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Monthly)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Barbara A. McClaskey</p> <p>Mailing Address 10804 Granite Drive</p> <p>City State Zip Code Redding CA 96001</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Barbara A. McClaskey Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID:</b> 11503-P48883</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Monthly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) John R. McConnaughey</p> <p>Mailing Address 6312 Anthony Dr</p> <p>City State Zip Code Liberty Twp OH 45011-1303</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation JRM &amp; Associates Agency, Inc Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2011</span></p> <p><b>Transaction ID:</b> 11503-P48854</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Payroll Deduction                  (\$30.00 Monthly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">90.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
H. Luke McDermott

Mailing Address 1044 Park Palisade Dr

City State Zip Code  
South Jordan UT 84095-2229

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

Name of Employer  
McDermott Company & Associates

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48686

Amount of Each Receipt this Period  
50.00

Payroll Deduction  
(\$50.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Leslie E. McGerr

Mailing Address 6125 Havelock Ave

City State Zip Code  
Lincoln NE 68507-1234

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

Name of Employer  
Les McGerr & Company

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48578

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

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

Mailing Address 9905 S Maplewood Ave

City State Zip Code  
Tulsa OK 74137-5534

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

Name of Employer  
BenEx Insurance Agency

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1360.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48274

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

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

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 150  
(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

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

NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Gerard J. McGlone

Mailing Address 2300 Renaissance Blvd

City State Zip Code  
King of Prussia PA 19406-2772

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

Name of Employer Occupation  
Trion Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2011

Transaction ID: 11519

Amount of Each Receipt this Period  
0.00

**B.**

Full Name (Last, First, Middle Initial)  
Gerard J. McGlone

Mailing Address 2300 Renaissance Blvd

City State Zip Code  
King of Prussia PA 19406-2772

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

Name of Employer Occupation  
Trion Agent

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

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2011

Transaction ID: 11520

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Ward McKalson

Mailing Address 22365 Ferdinand Ct

City State Zip Code  
Salinas CA 93908-1106

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

Name of Employer Occupation  
Leavitt Central Coast Insurance Servi Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48826

Amount of Each Receipt this Period  
85.00

Payroll Deduction

(\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

1085.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Eloise Meardith

Mailing Address 2347 Sumac Dr

City Augusta State GA Zip Code 30906-5503

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

Name of Employer Health Insurance Services (H.I.S.) by Occupation agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48840

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Griffin L. Meredith

Mailing Address 2518 Wendell Ave

City Louisville State KY Zip Code 40205-3012

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

Name of Employer FSAB Benefits Occupation Insurance Broker

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48679

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Norman Joseph Michaels

Mailing Address 80 Business Park Dr

City Armonk State NY Zip Code 10504-1710

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

Name of Employer Michaels & Associates Occupation agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48507

Amount of Each Receipt this Period 250.00

Payroll Deduction (\$250.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **365.00**

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

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

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

FOR LINE NUMBER: PAGE 83 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
John R. Milam  
Mailing Address 426 Heathermoor Dr  
City Knoxville State TN Zip Code 37934-2559  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Willis of Tennessee, Inc. Occupation Executive Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 07 / 06 / 2011  
Transaction ID: 11391  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Dennis F. Mobley  
Mailing Address 459 Pimlico Pl  
City Jackson State MS Zip Code 39211-4030  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mobley Insurance Agency, LLC Occupation Office Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48229  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Sandra V Mobley  
Mailing Address 5454 I 55 N Ste B  
City Jackson State MS Zip Code 39211-4027  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Sandra Mobley Agency LLC Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48195  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 84 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Damian Mochan  
Mailing Address 1032 Kathryn St  
City Boalsburg State PA Zip Code 16827-1645  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Logical Planning Solutions Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48689  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
David R. Moore  
Mailing Address 605 Truitt Dr  
City Elon State NC Zip Code 27244-9262  
FEC ID number of contributing federal political committee. **C**  
Name of Employer David R. Moore, CLU & Associates Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48361  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Wesley P. Moore  
Mailing Address PO Box 604  
City Darlington State SC Zip Code 29540-0604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer W P Moore Agency Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48347  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) David Mordo		Date of Receipt
	Mailing Address 26 Kennedy Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 20 / 2011
	City	State	Zip Code
	Middletown	NJ	07748-3532
	FEC ID number of contributing federal political committee.		Transaction ID: 11471
		Amount of Each Receipt this Period	<input type="text"/> 150.00
Name of Employer Walsh Benefits		Occupation Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 515.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Todd A. Morrow		Date of Receipt
	Mailing Address 1173 Brittmoore Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 23 / 2011
	City	State	Zip Code
	Houston	TX	77043-5003
	FEC ID number of contributing federal political committee.		Transaction ID: 11503-P48560
		Amount of Each Receipt this Period	<input type="text"/> 42.00
Name of Employer Benefit Concepts		Occupation General Manager	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	(\$42.00 Monthly)
		<input type="text"/> 222.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph C. Moss		Date of Receipt
	Mailing Address 14202 Chimney House Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 23 / 2011
	City	State	Zip Code
	Midlothian	VA	23112-4304
	FEC ID number of contributing federal political committee.		Transaction ID: 11501-P48123
		Amount of Each Receipt this Period	<input type="text"/> 10.00
Name of Employer M&T Bank		Occupation HSA Specialist	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	(\$10.00 Bi-Weekly)
		<input type="text"/> 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 202.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 86 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Glen W. Mulready  
Mailing Address 2708 W 66th PI

City State Zip Code  
Tulsa OK 74132-1301

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

Name of Employer Benefit Plan Strategies Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48508  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Ray M. Musser  
Mailing Address 404 N 2nd Ave Ste B

City State Zip Code  
Upland CA 91786-4793

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

Name of Employer Ray Musser & Assoc. Insurance Services Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48626  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction: (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Joshua D. Nace  
Mailing Address 936 N 34th St Ste 208

City State Zip Code  
Seattle WA 98103-8869

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

Name of Employer Dental Health Services, Inc. Occupation Vice President Sales & Service

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48108  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

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

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

FOR LINE NUMBER: PAGE 87 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Katrina A. Nash  
Mailing Address 6812 Rivergate Ln  
City Oklahoma City State OK Zip Code 73132-3905  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gallagher Benefit Services, Inc Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48319  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
B. Ronnell Nolan  
Mailing Address 364 Steele Blvd  
City Baton Rouge State LA Zip Code 70806-5131  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Nolan Group Occupation President  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48091  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Michael A. Norris  
Mailing Address PO Box 2052  
City Franklin State NC Zip Code 28744-2052  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Wayah Agency, Inc. Occupation Account Executive  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48087  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 88 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Pamela Nygaard  
Mailing Address 1014 4th St W  
City Kirkland State WA Zip Code 98033-5337  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Spectera Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48185  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Edward M. Oleksiak  
Mailing Address 3333 Lee Pkwy  
City Dallas State TX Zip Code 75219-5111  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Holmes Murphy Occupation Broker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 365.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11496  
Amount of Each Receipt this Period 215.00

**C.** Full Name (Last, First, Middle Initial)  
Terri M. Olson  
Mailing Address PO Box 21479  
City Keizer State OR Zip Code 97307-1479  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Olson Insurance Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 440.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48330  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 295.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Tiffany A. Otis-Albert

Mailing Address 18920 Stonewater Blvd

City Northville State MI Zip Code 48168-8560

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

Name of Employer Cofinity (formerly PPOM) Occupation Vice President Corporate Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48654

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
John C. Parker

Mailing Address 47 Laurel Hill Dr

City Niantic State CT Zip Code 06357-1536

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

Name of Employer Parker Agency Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11497

Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
John C. Parker

Mailing Address 47 Laurel Hill Dr

City Niantic State CT Zip Code 06357-1536

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

Name of Employer Parker Agency Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11501-P48371

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 242.00

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

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

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

FOR LINE NUMBER: PAGE 90 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Jesse A. Patton  
Mailing Address 701 Grand Ave  
City State Zip Code  
West Des Moines IA 50265-3625  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Associations Marketing Group, Inc. Occupation CEO/President  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2450.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48655  
Amount of Each Receipt this Period 350.00  
Payroll Deduction (\$350.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Lee Patton  
Mailing Address 3105 True Pkwy, Apt 608  
City State Zip Code  
West Des Moines IA 50265  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Associations Marketing Group, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48291  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Jennifer L. Pender  
Mailing Address 1635 Mount McKinley Dr  
City State Zip Code  
Grayson GA 30017-2980  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pender & Associates Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48080  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 410.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 91 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Ross W. Pendergraft

Mailing Address 16622 Calahan St

City State Zip Code  
North Hills CA 91343-3602

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

Name of Employer Arroyo Insurance Services      Occupation Agent

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      595.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48802

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Kenneth G. Penn

Mailing Address 218 North St

City State Zip Code  
Portsmouth VA 23704-2602

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

Name of Employer ChamberSolutions      Occupation Executive Vice President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48657

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Carol C. Pennington

Mailing Address 4640 Woodbridge Dr

City State Zip Code  
Kernersville NC 27284-8850

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

Name of Employer Pennington Associates      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48591

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **145.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
William H Pennington  
Mailing Address 4640 Woodbridge Dr  
City Kernersville State NC Zip Code 27284-8850  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pennington Associates Inc. Occupation Principal  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48608  
Amount of Each Receipt this Period 40.00  
Payroll Deduction (\$40.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
David R. Perry  
Mailing Address 2003 Charvais Dr  
City Lake Charles State LA Zip Code 70601-5605  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Perry Agency, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48815  
Amount of Each Receipt this Period 60.00  
Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Paige W. Phillips  
Mailing Address 1235 Highway 301  
City Calera State AL Zip Code 35040-5591  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Benefit Partners, LLC Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48356  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 130.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 93 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Susan R. Pittman  
Mailing Address 32418 51st Ave SW  
City State Zip Code  
Federal Way WA 98023-1936  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Insure NW Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48254  
Amount of Each Receipt this Period 50.00  
Payroll Deduction (\$50.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Tom G. Polenzani  
Mailing Address 1120 Atchison St  
City State Zip Code  
Pasadena CA 91104-1319  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Polenzani Benefits & Ins. Svcs., Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1315.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48658  
Amount of Each Receipt this Period 170.00  
Payroll Deduction (\$170.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Angela Potts Bopp  
Mailing Address 1205 Highway 2 Ste 202  
City State Zip Code  
Sandpoint ID 83864-2740  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Summit Insurance Resource Group Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48161  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 94 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
D. Michael Pressley

Mailing Address 1075 Moran Rd

City State Zip Code  
Franklin TN 37069-6960

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

Name of Employer Occupation  
BB&T Insurance Services, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11501-P48267

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Terri B. Pritchard

Mailing Address 1399 Ashleybrook Ln Ste 110

City State Zip Code  
Winston Salem NC 27103-2961

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

Name of Employer Occupation  
IBSI Holdings, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48478

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
John G. Prue

Mailing Address 12713 S Edinburg St

City State Zip Code  
Olathe KS 66062-1300

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

Name of Employer Occupation  
Humana, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 595.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11501-P48190

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Kathy M. Rainwater

Mailing Address 3809 Silverwood Dr

City State Zip Code  
Tyler TX 75701-9336

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

Name of Employer Occupation  
Threlkeld & Company Insurance Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48223

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Susan Maley Rash

Mailing Address 2519 Kettlewell Ct

City State Zip Code  
Midlothian VA 23113-6726

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

Name of Employer Occupation  
BB&T Benefit Consultants of Virginia Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 805.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48661

Amount of Each Receipt this Period

170.00

Payroll Deduction

(\$170.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Jon C Rauser

Mailing Address 949 Lamplighter Ln

City State Zip Code  
Grafton WI 53024-9314

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

Name of Employer Occupation  
The Rauser Agency, Inc. Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48662

Amount of Each Receipt this Period

250.00

Payroll Deduction

(\$250.00 Monthly)

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

505.00

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

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

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

FOR LINE NUMBER: PAGE 96 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Kenneth L. Ray

Mailing Address 110 Beaver Bnd

City State Zip Code  
Canton MS 39046-9296

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

Name of Employer Occupation  
Stewart Sneed Hewes/Banco- Director of Marketing - Life/H  
rpSouth Insu

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48663

Amount of Each Receipt this Period  
40.00

Payroll Deduction  
(\$40.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Dennis J. Recker

Mailing Address 971 N Perry St

City State Zip Code  
Ottawa OH 45875-1218

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

Name of Employer Occupation  
Fawcett, Lammon, Recker Registered Representative  
& Associates

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11501-P48249

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Michael S. Reddy

Mailing Address 13800 Jackson Rd

City State Zip Code  
Mishawaka IN 46544-9195

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

Name of Employer Occupation  
Synergy Insurance Group Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48491

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 155.00

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



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

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

FOR LINE NUMBER: PAGE 97 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick Reuszer		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 312 Elm Sreet		<b>Transaction ID:</b> 11503-P48563
	City Cincinnati	State OH	Zip Code 45202
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Assurant Employee Benefits	Occupation Agent	Payroll Deduction (\$50.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) R Dane Rianhard		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 1 N Charles St		<b>Transaction ID:</b> 11503-P48991
	City Baltimore	State MD	Zip Code 21201-3740
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 85.00
	Name of Employer FranklinMorris	Occupation Agent	Payroll Deduction (\$85.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Lori R. Rice		Date of Receipt MM / DD / YYYY 07 / 23 / 2011
	Mailing Address 8830 Buckskin Dr		<b>Transaction ID:</b> 11503-P48807
	City Boerne	State TX	Zip Code 78006-5554
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
	Name of Employer Wells Fargo Benefit Services	Occupation Account Executive	Payroll Deduction (\$30.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>165.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Russell Lee Rice		Date of Receipt
	Mailing Address 8830 Buckskin Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2011
	City	State	Zip Code
	Boerne	TX	78006-5554
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 11503-P48808
Name of Employer AVESIS, Inc.		Occupation Regional VP of Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 210.00	<input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Shan Ricketts		Date of Receipt
	Mailing Address 3900 Halisport Dr NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2011
	City	State	Zip Code
	Kennesaw	GA	30152-4077
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 11503-P48742
Name of Employer Purchasing Alliance Solutions, Inc.		Occupation Executive Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 720.00	<input type="text"/> 85.00
			Payroll Deduction (\$85.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Gabriel Ricks		Date of Receipt
	Mailing Address 1612 Marion St Ste 2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 23 / 2011
	City	State	Zip Code
	Columbia	SC	29201-2939
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 11503-P48459
Name of Employer The Cason Group, Inc.		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 210.00	<input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 145.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 99 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Susan M. Rider

Mailing Address 45 Apple Tree Cir

City State Zip Code  
Fishers IN 46038-1111

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

Name of Employer Occupation  
Gregory & Appel Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48817

Amount of Each Receipt this Period 72.00

Payroll Deduction (\$42.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mark C. Riley

Mailing Address PO Box 1635

City State Zip Code  
Irmo SC 29063-1635

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

Name of Employer Occupation  
American Benefit Services, LLC Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48440

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$100.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth E Rios-Carl

Mailing Address 6841 Pino Real Dr

City State Zip Code  
El Paso TX 79912-2803

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

Name of Employer Occupation  
Goodman Financial Group VP - Employee Benefits

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48131

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 222.00

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

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

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

FOR LINE NUMBER: PAGE 100 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
John F. Rippinger  
Mailing Address 1492 Burberry Ln  
City Schaumburg State IL Zip Code 60173-2188  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Rippinger Financial Group, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48157  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Michael A. Rivera  
Mailing Address 12200 Northwest Fwy Ste 662  
City Houston State TX Zip Code 77092-4927  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Northwest General Insurance Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 720.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48451  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Sharon L. Robbins  
Mailing Address PO Box 530  
City Asheville State NC Zip Code 28802-0530  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Insurance Service of Asheville Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48104  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Joseph K. Roberts  
Mailing Address 4000 S 36th St

City Lincoln State NE Zip Code 68506-4809

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

Name of Employer Midlands Financial Benefits Occupation Registered Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1190.00

Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48066  
 Amount of Each Receipt this Period 170.00  
 Payroll Deduction (\$170.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
William D. Robinson  
Mailing Address 739 E Jackson St

City Martinsville State IN Zip Code 46151-2033

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

Name of Employer Health Insurance Specialists Occupation Marketing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48613  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
William T. Robinson  
Mailing Address 401 S El Cielo Rd Apt 66

City Palm Springs State CA Zip Code 92262-7922

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

Name of Employer Palm Canyon Insurance Agency Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48240  
 Amount of Each Receipt this Period 85.00  
 Payroll Deduction (\$85.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 285.00

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

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

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

FOR LINE NUMBER: PAGE 102 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Eugene L. Rowe

Mailing Address 10430 Wilshire Blvd

City State Zip Code  
Los Angeles CA 90024-4651

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

Name of Employer Occupation  
R & R Retirement and Insurance Service Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11501-P48140

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Donna M. Rudner

Mailing Address 4665 Ivygate Cir SE

City State Zip Code  
Smyrna GA 30080-6632

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

Name of Employer Occupation  
Employer Relief, Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48616

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Francis A. Ruggiero

Mailing Address 15 Kennedy Dr

City State Zip Code  
Budd Lake NJ 07828-1438

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

Name of Employer Occupation  
John J. Slattery Associates Director of Broker Development

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 595.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48667

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

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

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

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(check only one)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Jean Russell  
 Mailing Address 1A Spruce Hill Rd  
 City Burlington State MA Zip Code 01803-4012  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48499  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BenefitsMart Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 210.00

**B.** Full Name (Last, First, Middle Initial)  
Gregory S. Sailer  
 Mailing Address 9721 Wellington Rdg  
 City Woodbury State MN Zip Code 55125-9592  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48673  
 Amount of Each Receipt this Period 85.00  
 Payroll Deduction (\$85.00 Monthly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Sailer Benefit Services, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 595.00

**C.** Full Name (Last, First, Middle Initial)  
Wayne S. Sakamoto  
 Mailing Address 2664 White Cedar Ln  
 City Naples State FL Zip Code 34109-0622  
 Date of Receipt 07 / 20 / 2011  
**Transaction ID:** 11473  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Health Insurance Interactive, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 215.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 104 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Stephen J. Salamon  
Mailing Address PO Box 4252  
City Timonium State MD Zip Code 21094-4252  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Landmark Insurance & Financial Group Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48554  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Raymer M. Sale  
Mailing Address 2135 Enclave Mill Dr  
City Dacula State GA Zip Code 30019-3290  
FEC ID number of contributing federal political committee. **C**  
Name of Employer E2E Benefits Services, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1175.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48674  
Amount of Each Receipt this Period 150.00  
Payroll Deduction (\$150.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Rose P. Sandoval  
Mailing Address 2 Main St Ste 340  
City Stoneham State MA Zip Code 02180-3336  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Benefit Strategy Partners, LLC Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 675.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48611  
Amount of Each Receipt this Period 100.00  
Payroll Deduction (\$100.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 335.00  
**TOTAL** This Period (last page this line number only) ..... ▶



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

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

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

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Alfonso C. Schiebel

Mailing Address 706 Trailwood Lane

City State Zip Code  
Marietta GA 30064-

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

Name of Employer Occupation  
Schiebel & Associates, LLC Agent  
dba Shopbe

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 245.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

**Transaction ID:** 11503-P48675

Amount of Each Receipt this Period  
35.00

Payroll Deduction  
(\$35.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mel A. Schlesinger

Mailing Address PO 21533

City State Zip Code  
Winston Salem NC 27120

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

Name of Employer Occupation  
The RainmakersGroup, Ltd. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 495.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 20 / 2011

**Transaction ID:** 11474

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Kenneth L. Schmidt

Mailing Address 1332 Hunters Hollow Ct

City State Zip Code  
Eureka MO 63025-1051

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

Name of Employer Occupation  
Mengel, Surdyke, Murphy and Finke Benefits Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 06 / 2011

**Transaction ID:** 11390

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 185.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Kenneth L. Schmidt

Mailing Address 1332 Hunters Hollow Ct

City State Zip Code  
Eureka MO 63025-1051

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

Name of Employer Occupation  
Mengel, Surdyke, Murphy and Finke Benefits Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 800.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2011

**Transaction ID:** 11475

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
John E Schneider

Mailing Address 210 Carden Ave

City State Zip Code  
Nashville TN 37205-2422

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

Name of Employer Occupation  
Colonial Life Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48265

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Patricia A. Schrade

Mailing Address 4910 King Solomon Dr

City State Zip Code  
Annandale VA 22003-4044

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

Name of Employer Occupation  
Blue Kamen Benefits, LLC Senior Benefits Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48785

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Denise Michelle Schroeder

Mailing Address 474 E Camino Rancho Cielo

City State Zip Code  
Sahuarita AZ 85629-8962

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

Name of Employer LifeWise Health Plans of Arizona  
Occupation Account Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48448

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Alan R. Schulman

Mailing Address 10010 Colesville Rd Ste A

City State Zip Code  
Silver Spring MD 20901-2348

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

Name of Employer Insurance Benefits & Advisors  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 555.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48542

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
James D. Schulz

Mailing Address 7101 S 82nd St

City State Zip Code  
Lincoln NE 68516-6584

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

Name of Employer Midlands Financial Benefits  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48576

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
B. Kay Schweiger  
Mailing Address 9401 Indian Creek Pkwy  
City Shawnee Mission State KS Zip Code 66210-2007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Trustmark Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48495  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Ronald C. Segal  
Mailing Address 3621 Deauvilla Ct  
City Calabasas State CA Zip Code 91302-3047  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ron Segal Insurance Services, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48766  
Amount of Each Receipt this Period 60.00  
Payroll Deduction (\$60.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ronald E. Seibel  
Mailing Address 351 Woodland Davis  
City Driftwood State TX Zip Code 78619  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Advanced Benefits Solutions Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48767  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 150  
(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)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

**A.**

Full Name (Last, First, Middle Initial)  
Gregory J. Seifert

Mailing Address 3311 NE 115th Street

City State Zip Code  
Vancouver WA 98686-3945

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

Name of Employer Biggs Insurance Services Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48768

Amount of Each Receipt this Period  
170.00

Payroll Deduction  
(\$170.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ralph Steven Seiler

Mailing Address 948 Hawthorn Rd

City State Zip Code  
Allentown PA 18103-4678

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

Name of Employer R. Steve Seiler Insurance, LCC Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48476

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Steven C. Selinsky

Mailing Address 28638 Oak Point Dr

City State Zip Code  
Farmington Hills MI 48331-2706

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

Name of Employer Benesys Occupation Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 565.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2011

**Transaction ID:** 11447

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

**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

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NAME OF COMMITTEE (In Full)  
**NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

**A.** Full Name (Last, First, Middle Initial)  
 Bruce J. Setlik  
 Mailing Address 17808 Harney St  
 City State Zip Code  
 Omaha NE 68118-3500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American Community Mutual, Inc. Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11501-P48247  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
 Daniel Severo  
 Mailing Address 17137 Patricia Dr  
 City State Zip Code  
 Meadville PA 16335-6337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The DJB Group, Inc. Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48786  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
 Scott A Shalek  
 Mailing Address PO Box 67  
 City State Zip Code  
 Ringwood IL 60072-0067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Shalek Financial Services Occupation Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00  
 Date of Receipt 07 / 23 / 2011  
**Transaction ID:** 11503-P48543  
 Amount of Each Receipt this Period 85.00  
 Payroll Deduction (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
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(check only one)  
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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Douglas W Sheffer

Mailing Address 2425 Malabar Dr

City Eugene State OR Zip Code 97403-1893

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

Name of Employer PacificSource Health Plans Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48781  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Kenneth A. Sherlin

Mailing Address 8 1st St

City Asheville State NC Zip Code 28803-1414

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

Name of Employer Keystone Financial & Benefit Resources Occupation Marketing Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48300  
Amount of Each Receipt this Period 42.00  
Payroll Deduction (\$42.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
David M. Sherrill

Mailing Address 2844 Regal Ln

City Oviedo State FL Zip Code 32765-7573

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

Name of Employer Sherrill Insurance Brokerage, Inc. Occupation Vice President/Life & LTC Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48811  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

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

**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 112 / 150  
(check only one)  
 11a  11b  11c  12  
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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Jeffrey Sherrod  
Mailing Address 3810 Holly Ridge Dr  
City Longview State TX Zip Code 75605-2500  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Insurance Co. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48474  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Thomas E. Shores  
Mailing Address 8596 W Bolsa St  
City Boise State ID Zip Code 83709-5196  
FEC ID number of contributing federal political committee. **C**  
Name of Employer T.A. Shores Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 217.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48669  
Amount of Each Receipt this Period 31.00  
Payroll Deduction (\$31.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Eileen M. Shrem  
Mailing Address 215 McCabe Ave Apt C1  
City Bradley Beach State NJ Zip Code 07720-1465  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Independent Insurance Planner Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48670  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 91.00  
**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 113 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Robert C. Sichmeller  
Mailing Address 4120 Sterlingview Dr  
City State Zip Code  
Moorpark CA 93021-3761  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Sichmeller Insurance and Agent  
Financial So  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 255.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011  
Transaction ID: 11503-P48671  
Amount of Each Receipt this Period  
85.00  
Payroll Deduction  
(\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Michael John Simmang  
Mailing Address 143 E Austin St  
City State Zip Code  
Giddings TX 78942-3201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Insurance Network of Texas Executive Vice President  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011  
Transaction ID: 11503-P48769  
Amount of Each Receipt this Period  
30.00  
Payroll Deduction  
(\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Deirdre Slattery Fallon  
Mailing Address PO Box 256  
City State Zip Code  
Spring Lake NJ 07762-0256  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
John J. Slattery Associat- Agent  
es, Inc.  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2011  
Transaction ID: 11503-P48487  
Amount of Each Receipt this Period  
85.00  
Payroll Deduction  
(\$85.00 Monthly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 150  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
David C. Smith

Mailing Address 1926 Glengate Cir

City State Zip Code  
Morrisville NC 27560-6966

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

Name of Employer Ebenconcepts Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 970.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11502-P48418  
Amount of Each Receipt this Period: 200.00  
Payroll Deduction (\$50.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Nathaniel M. Smith

Mailing Address 5200 77 Center Dr Ste 125

City State Zip Code  
Charlotte NC 28217-0712

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

Name of Employer Rogers Benefit Group, Inc. Occupation Regional Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt: 07 / 20 / 2011  
Transaction ID: 11476  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Paul E. Smith

Mailing Address 7 Deming Lane

City State Zip Code  
Cromwell CT 06416

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

Name of Employer AmeriBen Alliance, LLC Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 521.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48504  
Amount of Each Receipt this Period: 121.00  
Payroll Deduction (\$121.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 421.00

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

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

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

FOR LINE NUMBER: PAGE 115 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Sam Smith  
 Mailing Address 13025 Erwin Street  
 City State Zip Code  
Valley Glen CA 91401-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Genesis Financial President  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 595.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 3 / 2 0 1 1  
**Transaction ID:** 11503-P48789  
 Amount of Each Receipt this Period  
 85.00  
 Payroll Deduction  
 (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Teresa A. Smith  
 Mailing Address 2828 Lily St  
 City State Zip Code  
Anchorage AK 99508-4771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Premera BlueCross BlueShield of Alaska agent  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 3 / 2 0 1 1  
**Transaction ID:** 11501-P48321  
 Amount of Each Receipt this Period  
 30.00  
 Payroll Deduction  
 (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Thomas E. Snell  
 Mailing Address 1201 Wilkins Dr  
 City State Zip Code  
Sanford NC 27330-7238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Benefit Edge of the Carolinas, Inc. Managing Director  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 210.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 3 / 2 0 1 1  
**Transaction ID:** 11503-P48638  
 Amount of Each Receipt this Period  
 30.00  
 Payroll Deduction  
 (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Scott D. Snowden

Mailing Address 6701 Tallwood Ct

City State Zip Code  
Prospect KY 40059-9417

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

Name of Employer Occupation  
Snowden & Associates, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48737

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Sheryl M. Soileau

Mailing Address 6421 Perkins Rd Bldg A # 2B

City State Zip Code  
Baton Rouge LA 70808-6200

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

Name of Employer Occupation  
Besselman & Little Agency Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 495.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11501-P48279

Amount of Each Receipt this Period  
10.00

Payroll Deduction  
(\$10.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Tamela L. Southan

Mailing Address 8431 San Leandro Dr

City State Zip Code  
Dallas TX 75218-4320

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

Name of Employer Occupation  
Benefit Solutions By Design Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48772

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Jim Spahr  
Mailing Address 1457 Capri Ave

City State Zip Code  
Petaluma CA 94954-1458

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

Name of Employer Occupation  
Jackie & Jim Spahr Insurance Services Agent  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 595.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48773

Amount of Each Receipt this Period  
85.00

Payroll Deduction  
(\$85.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Sher Sparano  
Mailing Address 7020 108th St # 5-0

City State Zip Code  
Forest Hills NY 11375-4449

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

Name of Employer Occupation  
Benefits Advisory Service President  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 565.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48574

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Anne P. Sperling  
Mailing Address 25 Antigua Rd

City State Zip Code  
Santa Fe NM 87508-2201

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

Name of Employer Occupation  
Daniels Insurance, Inc. Employee Benefits Manager  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 525.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48791

Amount of Each Receipt this Period  
40.00

Payroll Deduction  
(\$40.00 Monthly)

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

155.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Jackie L. Spragins

Mailing Address 2009 Speedway Ave

City State Zip Code  
Wichita Falls TX 76301-6067

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

Name of Employer Allred-Thompson-Mason-Daugherty Insur  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11501-P48222

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$50.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Zachary Stafford

Mailing Address 6421 Perkins Rd Bldg A # 2B

City State Zip Code  
Baton Rouge LA 70808-6200

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

Name of Employer Besselman & Little Agency  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11503-P48996

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Delvin L. Stahl

Mailing Address PO Box 388

City State Zip Code  
Sutton NE 68979-0388

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

Name of Employer Insurance Plus, Inc.  
Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	1

**Transaction ID:** 11501-P48315

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **120.00**

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

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

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

FOR LINE NUMBER: PAGE 119 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Eugene A Starks

Mailing Address 408 Oakleigh Cir

City State Zip Code  
Brandon MS 39047-5079

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

Name of Employer: Benefit Administration Services, Ltd. Occupation: Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48184  
Amount of Each Receipt this Period: 95.00  
Payroll Deduction: (\$95.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Peter F Stehr

Mailing Address 13636 Seward St

City State Zip Code  
Omaha NE 68154-3823

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

Name of Employer: Peter Stehr Insurance Services, Inc. Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48215  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
James R Stenger

Mailing Address 381 Victoria Drive

City State Zip Code  
Bridgewater NJ 07936-

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

Name of Employer: BenefitMall Occupation: Director of Business Developme

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2545.00

Date of Receipt: 07 / 14 / 2011  
Transaction ID: 11448  
Amount of Each Receipt this Period: 900.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1025.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
James R Stenger

Mailing Address 381 Victoria Drive

City State Zip Code  
Bridgewater NJ 07936

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

Name of Employer Occupation  
BenefitMall Director of Business Developme

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2715.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48196

Amount of Each Receipt this Period

170.00

Payroll Deduction

(\$170.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Marilyn A. Stenger

Mailing Address 381 Victoria Drive

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Occupation  
MVS Consulting Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2220.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48083

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
James R. Stephens

Mailing Address 1607 Lower Union Hill Rd

City State Zip Code  
Canton GA 30115-8435

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

Name of Employer Occupation  
Wellcare Health Plans, Inc Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48057

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) .....

285.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Kirk D. Stoddard

Mailing Address 5237 Barron Park Dr

City State Zip Code  
San Jose CA 95136-2810

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

Name of Employer Occupation  
Kirk Stoddard & Associates Agent/Broker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 635.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48794

Amount of Each Receipt this Period  
10.00

Payroll Deduction  
(\$10.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Ulrich S. Storz

Mailing Address 987 University Ave Ste 14

City State Zip Code  
Los Gatos CA 95032-7640

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

Name of Employer Occupation  
Storz Insurance Services, Inc. Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48523

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Rodney Stuart

Mailing Address 9755 Randall Dr

City State Zip Code  
Indianapolis IN 46280-2951

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

Name of Employer Occupation  
Benefit Innovations, LLP Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48276

Amount of Each Receipt this Period  
50.00

Payroll Deduction  
(\$50.00 Bi-Weekly)

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

90.00

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

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

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

FOR LINE NUMBER: PAGE 122 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
James L. Sugden  
Mailing Address 544 Wild Ridge Lane  
City State Zip Code  
Lafayette CO 80026-2583  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Employee Benefit Solutions, Inc. Agent  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 720.00  
Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011  
Transaction ID: 11501-P48166  
Amount of Each Receipt this Period  
85.00  
Payroll Deduction  
(\$85.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Mark W. Sulpizio  
Mailing Address 1630 Riverton Rd  
City State Zip Code  
Cinnaminson NJ 08077-2343  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Innovative Benefit Planning Partner  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00  
Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011  
Transaction ID: 11503-P48778  
Amount of Each Receipt this Period  
85.00  
Payroll Deduction  
(\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
James F. Summers  
Mailing Address 15316 Pine St  
City State Zip Code  
Omaha NE 68144-5117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Senior Market Sales, Inc. Agent  
Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 875.00  
Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2011  
Transaction ID: 11501-P48125  
Amount of Each Receipt this Period  
125.00  
Payroll Deduction  
(\$125.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 295.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
William L Sutherland

Mailing Address 19126 Kristen Way

City State Zip Code  
San Antonio TX 78258-3618

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

Name of Employer Occupation  
Wortham Insurance & Risk Management Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11499

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
William L Sutherland

Mailing Address 19126 Kristen Way

City State Zip Code  
San Antonio TX 78258-3618

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

Name of Employer Occupation  
Wortham Insurance & Risk Management Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48715

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$100.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Ernie Sweat

Mailing Address 393 W Gordon Ave Ste 1

City State Zip Code  
Layton UT 84041-2391

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

Name of Employer Occupation  
Fringe Benefit Analysts, Inc. Dba Frin Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 222.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48798

Amount of Each Receipt this Period

42.00

Payroll Deduction

(\$42.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

242.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Ryan R. Swinton

Mailing Address 9931 N 151st St

City State Zip Code  
Waverly NE 68462-1611

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

Name of Employer: Midlands Financial Benefits  
Occupation: Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 07 / 23 / 2011  
**Transaction ID:** 11503-P48799  
 Amount of Each Receipt this Period: 85.00  
 Payroll Deduction: (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Marsha L. Tellesbo

Mailing Address 22887 NE 127th Way

City State Zip Code  
Redmond WA 98053-5657

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

Name of Employer: Tellesbo & Company  
Occupation: Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt: 07 / 14 / 2011  
**Transaction ID:** 11449  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Marsha L. Tellesbo

Mailing Address 22887 NE 127th Way

City State Zip Code  
Redmond WA 98053-5657

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

Name of Employer: Tellesbo & Company  
Occupation: Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt: 07 / 23 / 2011  
**Transaction ID:** 11503-P48747  
 Amount of Each Receipt this Period: 85.00  
 Payroll Deduction: (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 150  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
David J. Terpening

Mailing Address 424 Avenue E

City Redondo Beach State CA Zip Code 90277-5141

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

Name of Employer Dave Terpering Insurance Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48784

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Harry P. Thal

Mailing Address PO Box 2137

City Kernville State CA Zip Code 93238-2137

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

Name of Employer Harry P. Thal Insurance Agency Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11503-P48612

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Ryan P. Thorn

Mailing Address 10342 Springcrest Ln

City South Jordan State UT Zip Code 84095-4538

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

Name of Employer Ryan P. Thorn Insurance Planning, Inc. Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 23 / 2011

Transaction ID: 11501-P48336

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Helen M. Todd

Mailing Address 54 Belle Meadow Ln

City State Zip Code  
Little Rock AR 72210-3714

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

Name of Employer The Todd Agency, Inc. Occupation Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2011

Transaction ID: 11450

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Helen M. Todd

Mailing Address 54 Belle Meadow Ln

City State Zip Code  
Little Rock AR 72210-3714

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

Name of Employer The Todd Agency, Inc. Occupation Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11503-P48729

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Daniel R. Tompkins

Mailing Address 7555 Brookstead Xing

City State Zip Code  
Duluth GA 30097-1953

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

Name of Employer Admin America Occupation Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

Transaction ID: 11501-P48105

Amount of Each Receipt this Period  
42.00

Payroll Deduction  
(\$42.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **222.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Jennifer L. Toups

Mailing Address 4521 Laurel St

City State Zip Code  
New Orleans LA 70115-1538

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

Name of Employer Business Insurance Group Occupation Director of Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48749  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction: (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Janet Trautwein

Mailing Address 7212 Redlac Dr

City State Zip Code  
Clifton VA 20124-1948

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

Name of Employer NAHU Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1190.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48137  
Amount of Each Receipt this Period: 170.00  
Payroll Deduction: (\$170.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
C. Louanne Trebing

Mailing Address 1806 Patton Dr

City State Zip Code  
Garland TX 75042-8205

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

Name of Employer Trebing Insurance Services Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 07 / 20 / 2011  
Transaction ID: 11478  
Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 355.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 150

(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)

C. Louanne Trebing

Mailing Address 1806 Patton Dr

City State Zip Code  
Garland TX 75042-8205

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

Name of Employer Occupation  
Trebing Insurance Services Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11501-P48248

Amount of Each Receipt this Period

50.00

Payroll Deduction

(\$50.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)

Mark Turley

Mailing Address 1440 E Valley Forge Dr

City State Zip Code  
Fresno CA 93720-1465

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

Name of Employer Occupation  
LISI Small Group/District Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48642

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

John E. Ulness

Mailing Address 214 N Superior St

City State Zip Code  
Appleton WI 54911-4774

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

Name of Employer Occupation  
self Self-employed

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 23 / 2011

Transaction ID: 11503-P48756

Amount of Each Receipt this Period

10.00

Payroll Deduction

(\$10.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

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



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

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

FOR LINE NUMBER: PAGE 129 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
David R. Van Ahn  
Mailing Address 821 17th St  
City West Des Moines State IA Zip Code 50265-3452  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Van Ahn Insurance Services Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48730  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Catherine Van Zant  
Mailing Address 11916 W Highway 156  
City West Fork State AR Zip Code 72774-9378  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Rogers Benefit Group Occupation Sales Representative  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48138  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Robert B. Vernon  
Mailing Address 3702 Alton Rd SW  
City Roanoke State VA Zip Code 24014-3004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Southwind Health Partners Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48257  
Amount of Each Receipt this Period 40.00  
Payroll Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Rand R. Wall

Mailing Address 1004 Sugardale Ct

City State Zip Code  
Sugar Land TX 77498-2760

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

Name of Employer Lone Star Health Plans, Ltd. Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48304  
Amount of Each Receipt this Period: 100.00  
Payroll Deduction: (\$100.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Doris Waller

Mailing Address 3701 W Plano Pkwy Ste 250

City State Zip Code  
Plano TX 75075-7848

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

Name of Employer USNow Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48212  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Timothy P. Walsh

Mailing Address 701 Oyster Catcher Dr

City State Zip Code  
Hampstead NC 28443-8340

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

Name of Employer Advanced Insurance Systems Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48074  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 160.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Jessica F Waltman  
Mailing Address 2000 14th St N Ste 450

City State Zip Code  
Arlington VA 22201-2573

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

Name of Employer NAHU Occupation VP, Policy and State Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt: 07 / 20 / 2011  
Transaction ID: 11479  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Jessica F Waltman  
Mailing Address 2000 14th St N Ste 450

City State Zip Code  
Arlington VA 22201-2573

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

Name of Employer NAHU Occupation VP, Policy and State Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48164  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
M. Hughes Waren  
Mailing Address 1109 Princeton Dr

City State Zip Code  
Wilmington NC 28403-2528

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

Name of Employer Ebenconcepts, Inc. Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11501-P48071  
Amount of Each Receipt this Period: 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.00

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

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

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

FOR LINE NUMBER: PAGE 132 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Stephen C. Warner  
Mailing Address 16110 39th PI N  
City State Zip Code  
Minneapolis MN 55446-1371  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Warner & Associates Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48643  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
John L. Warwick  
Mailing Address PO Box 272  
City State Zip Code  
Chico CA 95927-0272  
FEC ID number of contributing federal political committee. **C**  
Name of Employer John Warwick Insurance Se- rvices Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48644  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mark A Waugh  
Mailing Address 125 Powell Rd  
City State Zip Code  
Newport NC 28570-3706  
FEC ID number of contributing federal political committee. **C**  
Name of Employer EbenConcepts Occupation AGENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48151  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 150  
(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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.**

Full Name (Last, First, Middle Initial)  
Dan Webb

Mailing Address 5251 Office Park Dr

City State Zip Code  
Bakersfield CA 93309-0404

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

Name of Employer Occupation  
The Webb Insurance Group Marketing Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1190.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48227

Amount of Each Receipt this Period  
170.00

Payroll Deduction  
(\$170.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Daryl D. Webster

Mailing Address 355 Addie Way

City State Zip Code  
Lynchburg VA 24501-7294

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

Name of Employer Occupation  
Premier Access Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11503-P48999

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Jason Scott Weilage

Mailing Address 3800 Flowering Grove Ct

City State Zip Code  
Louisville KY 40241-3044

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

Name of Employer Occupation  
Brown and Brown Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2011

**Transaction ID:** 11501-P48269

Amount of Each Receipt this Period  
30.00

Payroll Deduction  
(\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 230.00

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

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

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

FOR LINE NUMBER: PAGE 134 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Joshua R. Weinstein

Mailing Address 2550 Denali St Ste 1502

City Anchorage State AK Zip Code 99503-2753

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

Name of Employer Northrim Benefits Group, LLC Occupation Employee Benefits Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48570  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Charles L. Westmoreland

Mailing Address PO Box 925

City Jackson State MS Zip Code 39205-0925

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

Name of Employer American Public Life Insurance Company Occupation Director of Agency Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48443  
Amount of Each Receipt this Period 60.00  
Payroll Deduction (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Lisa Wetherton

Mailing Address 2150 Imperial Dr

City Gainesville State GA Zip Code 30501-1306

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

Name of Employer Benefit Design Strategies Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48646  
Amount of Each Receipt this Period 20.00  
Payroll Deduction (\$20.00 Monthly)

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

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

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

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

FOR LINE NUMBER: PAGE 135 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Cynthia K Whaley  
Mailing Address 24522 Choptank Blvd  
City State Zip Code  
Denton MD 21629-2355  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Avery Hall Benefit Solutions, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48647  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Robert H. White  
Mailing Address 218 W 6th St  
City State Zip Code  
Tulsa OK 74119-1004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CommunityCare HMO Plans of OK Occupation Marketing Representative  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48095  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Dale Whiteis  
Mailing Address 7820 S Granite Ave  
City State Zip Code  
Tulsa OK 74136-8456  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Whiteis Benefits Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48049  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

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

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

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

FOR LINE NUMBER: PAGE 136 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
David V. Wilcox  
Mailing Address 1624 Sunflower Ln  
City State Zip Code  
Twin Falls ID 83301-3670  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Magic Valley Insurance, Inc. President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 222.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48795  
Amount of Each Receipt this Period 42.00  
Payroll Deduction (\$42.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Trei Wild  
Mailing Address 2745 Dallas Pkwy  
City State Zip Code  
Plano TX 75093-8731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Assurant Employee Benefits Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48607  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Zach J. Wilding  
Mailing Address 712 Kingston Cir  
City State Zip Code  
Brownsburg IN 46112-8337  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
OneAmerica Sales Representative  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48796  
Amount of Each Receipt this Period 10.00  
Payroll Deduction (\$10.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 137.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 137 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
George Williams  
Mailing Address 4109 Woodway Dr  
City Monroe State LA Zip Code 71201-2218  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Financial Planning Resources Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48262  
Amount of Each Receipt this Period 30.00  
Payroll Deduction (\$30.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Michael R Williams  
Mailing Address 302 S 36th St Ste 105  
City Omaha State NE Zip Code 68131-3845  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Williams Deras & Associates Occupation Sales  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48480  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Paula L Wilson  
Mailing Address 31930 Daniel Way  
City Temecula State CA Zip Code 92591-2129  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Paula Wilson, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11501-P48293  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Bi-Weekly)

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Steven L. Wilson

Mailing Address 1151 Red Mile Rd

City Lexington State KY Zip Code 40504-2649

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

Name of Employer Benefit Insurance Marketing Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11502-P48401

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Tammy Winn

Mailing Address 5940 Hartson

City Kyle State TX Zip Code 78640-8827

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

Name of Employer Pro Insurance Services Occupation Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11501-P48311

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Shelly K Winson

Mailing Address 2491 W Binner Dr

City Chandler State AZ Zip Code 85224-4112

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

Name of Employer OptumHealth Financial Services Occupation Business Development Director,

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 23 / 2011

**Transaction ID:** 11503-P48734

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

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

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

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

FOR LINE NUMBER: PAGE 139 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Dennis C Woehler

Mailing Address 5318 Westhaven Dr.

City State Zip Code  
Evansville IN 47720-

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

Name of Employer: ONB Insurance Group, Inc. Occupation: Group Benefits Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48753  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Rosanne Wolfe

Mailing Address 4600 E Swans Nest Rd

City State Zip Code  
Tucson AZ 85718-6248

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

Name of Employer: Wolfe Insurance & Consultants, LLC Occupation: Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48787  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
DianaLou Wolff

Mailing Address 106 Main St

City State Zip Code  
Kingston NY 12401-4410

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

Name of Employer: Benefit Counseling Associates Occupation: Group & Health Benefit Special

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 07 / 23 / 2011  
Transaction ID: 11503-P48788  
Amount of Each Receipt this Period: 30.00  
Payroll Deduction: (\$30.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 140 / 150  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
Barbara Wright  
Mailing Address 318 Calash Run  
City Fort Wayne State IN Zip Code 46845-2104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Intrahealthsolutions, Inc. Occupation Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 595.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48844  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Dennis E. Wright  
Mailing Address 318 Calash Run  
City Fort Wayne State IN Zip Code 46845-2104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer IntraHealth Solutions, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 860.00  
Date of Receipt 07 / 20 / 2011  
Transaction ID: 11480  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Dennis E. Wright  
Mailing Address 318 Calash Run  
City Fort Wayne State IN Zip Code 46845-2104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer IntraHealth Solutions, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 945.00  
Date of Receipt 07 / 23 / 2011  
Transaction ID: 11503-P48651  
Amount of Each Receipt this Period 85.00  
Payroll Deduction (\$85.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 / 150
	<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)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Luann S. Yarberry		Date of Receipt
	Mailing Address 4500 Bermuda Ln		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Wichita Falls	TX	76308-2443
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Allred-Thompson-Mason-Daugherty Ins.		Occupation Agent	Transaction ID: 11503-P48735
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="210.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
		Payroll Deduction	
			(\$30.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) M. Zach Zinser		Date of Receipt
	Mailing Address 144 N Hite Ave		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Louisville	KY	40206-2312
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Zinser Benefit Service, Inc.		Occupation Agent	Transaction ID: 11503-P48841
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="210.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="30.00"/>
		Payroll Deduction	
			(\$30.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="60.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="31720.93"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 142 / 150

(check only one)

<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS		Date of Receipt
	Mailing Address PO BOX 1924		<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	MUSKOGEE	OK	74402
	FEC ID number of contributing federal political committee.		<input type="text" value="C000410829"/>
Name of Employer		Occupation	Transaction ID: 11386
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="7000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Candidacy withdrawn			

<b>B.</b>	Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS		Date of Receipt
	Mailing Address PO BOX 1924		<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	MUSKOGEE	OK	74402
	FEC ID number of contributing federal political committee.		<input type="text" value="C000410829"/>
Name of Employer		Occupation	Transaction ID: 11387
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="7000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="1000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS		Date of Receipt
	Mailing Address PO BOX 1924		<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	MUSKOGEE	OK	74402
	FEC ID number of contributing federal political committee.		<input type="text" value="C000410829"/>
Name of Employer		Occupation	Transaction ID: 11388
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="7000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="2000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 143 / 150
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS		Date of Receipt
	Mailing Address PO BOX 1924		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 06 / 2011
	City	State	Zip Code
	MUSKOGEE	OK	74402
	FEC ID number of contributing federal political committee.		Transaction ID: 11389
	C C00410829		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/> 3000.00	
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 7000.00		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 7000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 11555 Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="07"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="414.76"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 11557 Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="07"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement Collection Fee Candidate Name	<input type="text" value="4.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Regions Bank	Transaction ID: 11556 Date of Disbursement
	Mailing Address 4701 N Keystone Ave # 100	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Indianapolis State IN Zip Code 46205	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Fees Candidate Name	<input type="text" value="882.44"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1302.15"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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 checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)

Regions Bank

Mailing Address 4701 N Keystone Ave # 100

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement  
Banking Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 11554

Date of Disbursement

07 / 11 / 2011

Amount of Each Disbursement this Period

349.36

SUBTOTAL of Disbursements This Page (optional) .....

349.36

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

1651.51

# 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

**A.** Full Name (Last, First, Middle Initial)  
AUSTIN SCOTT FOR CONGRESS INC

Mailing Address PO BOX 27750

City MACON State GA Zip Code 31221

Purpose of Disbursement  
Breakfast 7.27

Candidate Name  
JAMES AUSTIN SCOTT

Office Sought:  House  
 Senate  
 President

State: GA District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 11518

Date of Disbursement

07 / 27 / 2011

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
BASS VICTORY COMMITTEE

Mailing Address P.O. BOX 3451

City CONCORD State NH Zip Code 03302

Purpose of Disbursement  
Dinner 7.6

Candidate Name  
CHARLES F. BASS

Office Sought:  House  
 Senate  
 President

State: NH District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 11402

Date of Disbursement

07 / 08 / 2011

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CARPER FOR SENATE

Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR

City NEW CASTLE State DE Zip Code 19720

Purpose of Disbursement  
Lunch 7.27

Candidate Name  
THOMAS R CARPER

Office Sought:  House  
 Senate  
 President

State: DE District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 11504

Date of Disbursement

07 / 27 / 2011

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5500.00

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

# 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JOE HECK</p> <p>Mailing Address PO BOX 750114</p> <p>City LAS VEGAS State NV Zip Code 89136</p> <p>Purpose of Disbursement Dinner 7.13</p> <p>Candidate Name JOE HECK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 11377 <b>Date of Disbursement</b> 07 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) HELLER FOR SENATE</p> <p>Mailing Address PO BOX 371907</p> <p>City LAS VEGAS State NV Zip Code 89137</p> <p>Purpose of Disbursement Dinner 6.12</p> <p>Candidate Name DEAN HELLER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 11378 <b>Date of Disbursement</b> 07 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO BOX 87</p> <p>City UWCHLAND State PA Zip Code 19480</p> <p>Purpose of Disbursement Lunch 7.15</p> <p>Candidate Name JIM GERLACH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 11382 <b>Date of Disbursement</b> 07 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4500.00

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) KIRK FOR SENATE <hr/> Mailing Address P.O. BOX 8 <hr/> City WINNETKA State IL Zip Code 60093 <hr/> Purpose of Disbursement Lunch 7.20 Candidate Name MARK STEVEN KIRK <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 00	Transaction ID: 11383 Date of Disbursement 07 / 20 / 2011
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) LYNN JENKINS FOR CONGRESS <hr/> Mailing Address P.O. BOX 1441 <hr/> City TOPEKA State KS Zip Code 66601 <hr/> Purpose of Disbursement Lunch 7.7 Candidate Name LYNN JENKINS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 02	Transaction ID: 11380 Date of Disbursement 07 / 07 / 2011
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) NEUGEBAUER CONGRESSIONAL COMMITTEE <hr/> Mailing Address PO BOX 54175 <hr/> City LUBBOCK State TX Zip Code 79453 <hr/> Purpose of Disbursement Lunch 7.26 Candidate Name RANDY HONORABLE NEUGEBAUER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 19	Transaction ID: 11516 Date of Disbursement 07 / 26 / 2011
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) <b>NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC</b> Mailing Address 700 13TH STREET, NW City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement Happy Hour 7.7 Candidate Name NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 11381 Date of Disbursement 07 / 07 / 2011	Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) <b>RICHARD HANNA FOR CONGRESS COMMITTEE</b> Mailing Address 2308 GENESEE STREET City UTICA State NY Zip Code 13502 Purpose of Disbursement Lunch 7.27 Candidate Name RICHARD L HANNA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Transaction ID: 11505 Date of Disbursement 07 / 27 / 2011	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) <b>VOLUNTEERS FOR SHIMKUS</b> Mailing Address PO BOX 661 City COLLINSVILLE State IL Zip Code 62234 Purpose of Disbursement Dinner 7.25 Candidate Name JOHN M SHIMKUS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19	Transaction ID: 11517 Date of Disbursement 07 / 25 / 2011	Amount of Each Disbursement this Period 2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**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	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) WALDEN FOR CONGRESS <hr/> Mailing Address PO BOX 1091 <hr/> City HOOD RIVER State OR Zip Code 97031 <hr/> Purpose of Disbursement Dinner 6.13 Candidate Name GREGORY P MR. WALDEN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11379 Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2011
	Amount of Each Disbursement this Period 500.00 <hr/> Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC <hr/> Mailing Address 175 SOUTH WEST TEMPLE SUITE 650 <hr/> City SALT LAKE CITY State UT Zip Code 84101 <hr/> Purpose of Disbursement Breakfast 6.30 Candidate Name ORRIN G HATCH <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00 <hr/> Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11365 Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2011
	Amount of Each Disbursement this Period 2500.00 <hr/> Category/Type 011 [MEMO ITEM] Previous Contribution Re-designated to General Election 2012

SUBTOTAL of Disbursements This Page (optional) ..... ►

500.00

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

2500.00