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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Other Than I	An Authorized (Committee	Office	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ple: If typing, type he lines.	12FE4M5	
Health Underwriters P	Political Action C	Committee			
ADDRESS (number and street) Check if different than previously	Suite 1100 Washington	e		DC 20	0005
reported. (ACC) 2. FEC IDENTIFICATION N	UMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00283135		3. IS THIS REPORT	NEW (N) OR	AMENDE (A)	ED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Compared to the compared to	Q1) (c) 12-Day PRE-Ele Report f Q3) YE) (d) 30-Day POST-E Report f	ection for the: C	May 20 (Ms Jun 20 (M6 Jul 20 (M7) rimary (12P) onvention (12C) eneral (30G)		(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period 0		2017	through 01		2017
I certify that I have examined the Type or Print Name of Treasure	Murphy, Jennifer,		edge and belief it is	rue, correct and com	plete.
Signature of Treasurer	phy, Jennifer, , ,	[E	Electronically Filed]	Date 02 /	09 / 2017
NOTE: Submission of false, error	neous, or incomplete in	nformation may subj	ect the person signing	this Report to the per	nalties of 52 U.S.C. § 30109
Office Use Only				FI	EC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Health Underwriters Political Action Committee 01 01 2017 01 31 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 166294.99 January 1. 2017 (b) Cash on Hand at 166294.99 Beginning of Reporting Period..... 46793.00 46793.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 213087.99 213087.99 6(a) and 6(c) for Column B)..... 41625.83 41625.83 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 171462.16 171462.16 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Health Underwriters Political Action Committee

2017 01 31 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 8540.00 8540.00 (i) Itemized (use Schedule A)..... 38253.00 38253.00 (ii) Unitemized (iii) TOTAL (add 46793.00 46793.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 46793.00 46793.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (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))....... 46793.00 46793.00 20. Total Federal Receipts 46793.00 46793.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disburse		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures (a) Allocated Federal/N 	lon-Federal		
Activity (from Sche	· ·	0.00	0.00
(i) Federal Share		0.00	0.00
(ii) Non-Federal S	Share	0.00	0.00
(b) Other Federal Ope	rating		
Expenditures		1125.83	1125.83
(c) Total Operating Ex			1405.00
	, and (b))▶	1125.83	1125.83
Transfers to Affiliated/O Committees	•	0.00	0.00
Contributions to		4 4	4 4
Federal Candidates/Con and Other Political Con	nmittees nmittees	40500.00	40500.00
Independent Expenditur	es	4 4 4	4 4
(use Schedule E) Coordinated Party Expe	enditures	0.00	0.00
(52 U.S.C. § 30116(d))		0.00	
(use Schedule F)		0.00	0.00
Loan Repayments Mad	e	0.00	0.00
May monto Mad		4	0.00
Loans Made		0.00	0.00
Refunds of Contribution (a) Individuals/Persons			
Than Political Com		0.00	0.00
	-		
(b) Political Party Com		0.00	0.00
(c) Other Political Con			
(such as PACs)		0.00	0.00
(d) Total Contribution			
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (I	ncluding		
Non-Federal Donations)		0.00	0.00
	(== 11 0 0 0 0 0 0 10 1 (0 0))	45 45	Apr. Apr. Apr. Apr.
	/ (52 U.S.C. § 30101(20))		
(a) Allocated Federal (from Schedule H6	•		
(i) Federal Share		0.00	0.00
(., . 545/4/ 5/14/5		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election A		4 4	4 4
Entirely With Fede		0.00	0.00
(c) Total Federal Elect			
Lines 30(a)(i), 30(a	a)(ii) and 30(b))	0.00	0.00
T. I. D. I.			
Total Disbursements (ac			
23, 24, 25, 26, 27, 28(a), 29 and 30(c))	41625.83	41625.83
Total Federal Disburser	nents		
(subtract Line 21(a)(ii)			
from Line 31)		41625.83	44005.00
,		71025.05	41625.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46793.00	46793.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46793.00	46793.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1125.83	1125.83
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1125.83	1125.83

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

Use separate schedule(s)

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kite, William, , , Date of Receipt Mailing Address PO Box 629 2017 City Zip Code State Transaction ID: 10994988 VA 24004-0629 Roanoke Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **D&S Agency Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schneider, Chad, P., , Date of Receipt Mailing Address 111 W Illinois St 2017 5th Floor City State Zip Code Transaction ID: 10995014 IL Chicago 60654-4505 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Code SixFour Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 85.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Davis, Brad, , , Date of Receipt Mailing Address 622 Main St. 05 2017 City State Zip Code Transaction ID: 10996783 CA Woodland 95695-3405 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wraith, Scarlett, & Randolph Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1385.00 SUBTOTAL of Receipts This Page (optional).....

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

Use separate schedule(s)

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaelin, Bobbi, , , Date of Receipt Mailing Address 6180 Quail Valley Court 09 2017 City State Zip Code Transaction ID: 10997095 CA Riverside 92507-0704 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PavPro Administrators **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 30.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brown, Carey, H., , Date of Receipt Mailing Address Six Concourse Parkway 01 2017 Suite 2750 City State Zip Code Transaction ID: 10997318 GA Atlanta 30328-6243 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Benefit Company Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hearn, John, A.,, Date of Receipt Mailing Address Six Concourse Parkway 11 2017 Suite 2750 City State Zip Code Transaction ID: 10997319 GΑ Atlanta 30328-6243 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Benefit Company Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1030.00 SUBTOTAL of Receipts This Page (optional).....

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Farrell, Jennifer, Liane, , Date of Receipt Mailing Address 3800 North Central Avenue 9th Floor 18 2017 City Zip Code State Transaction ID: 10997849 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 63.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McMahon, Daniel, W., , Date of Receipt Mailing Address 501 N. Riverpoint Blvd., Ste 125 01 2017 City State Zip Code Transaction ID: 10999065 WA Spokane 99202-1649 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PayneWest Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 85.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Wild, Trei, , , Date of Receipt Mailing Address 3724 Hearst Castle Way 22 2017 City State Zip Code Transaction ID: 10999292 TX Plano 75025-3719 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Protect Plans **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General

85.00

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Health Underwriters Political A	ction Committee	
Full Name of Individual (Last, First, Middle Ir Brown, Carey, H., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address Six Concourse Parkway Suite 2750 City Atlanta	State Zip Code GA 30328-6243	01 23 2017 Transaction ID : 10999318 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) The Benefit Company Receipt For: Primary General	Occupation (for Individual) Broker Aggregate Year-to-Date ▼	Memo Item
Other (specify) ▼	550.00	
Full Name of Individual (Last, First, Middle Ir Embry, Michael, A., , Mailing Address 26555 Evergreen Road Suite 535		Date of Receipt O1 23 2017
City Southfield EEC ID number of contributing	State Zip Code MI 48076-4213	Transaction ID : 10999393 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	415.00
Name of Employer (for Individual) Comprehensive Benefits	Occupation (for Individual) Broker	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	
Full Name of Individual (Last, First, Middle Ir Reents, Joni, Robin, ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5760 W. 120th Avenue Suite 260 City	State Zip Code	01 25 2017 Transaction ID : 11029654
Broomfield	CO 80020-6939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer (for Individual) Reents Insurance Agency Receipt For:	Occupation (for Individual) Broker	Memo Item
Primary General Other (specify)	Aggregate Year-to-Date ▼ 42.00	
SUBTOTAL of Receipts This Page (optional)		507.00
TOTAL This Period (last page this line number	only).	

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NAME OF COMMITTEE (In Full)		
Health Underwriters Political Act	tion Committee	
Full Name of Individual (Last, First, Middle Initi	ial) or Full Organization Name	Date of Receipt
Mailing Address 5951 Canoga Avenue		01 27 2017
City Woodland Hills	State Zip Code CA 91367-5010	Transaction ID : 11096969 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer (for Individual) Underhill Insurance Agency, Inc.	Occupation (for Individual) Broker	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	30.00	
Full Name of Individual (Last, First, Middle Initi	ial) or Full Organization Name	Date of Receipt
Mailing Address 6180 Quail Valley Court	Chate 7:n Co.d.	01 31 2017
City Riverside	State Zip Code CA 92507-0704	Transaction ID : 4331382
	32301-0104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer (for Individual) PayPro Administrators	Occupation (for Individual) Broker	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	230.00	
Full Name of Individual (Last, First, Middle Initi	ial) or Full Organization Name	Date of Receipt
Mailing Address 405 Mark Twain Way		01 31 2017
City	State Zip Code	Transaction ID: 4334729
Mahwah	NJ 07430-3404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer (for Individual) Emerson Reid	Occupation (for Individual) Vice President	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)		530.00
TOTAL This Period (last page this line number of	only)	

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Use separate schedule(s)

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McMahon, Daniel, W.,, Date of Receipt Mailing Address 501 N. Riverpoint Blvd., Ste 125 31 2017 City Zip Code State Transaction ID: 4371388 WA Spokane 99202-1649 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PavneWest Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 285.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gadinas, Kathy, M., , Date of Receipt Mailing Address 16325 Boones Ferry Rd., #204 01 2017 City State Zip Code Transaction ID: 4376591 Lake Oswego OR 97035-4297 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Columbia Benefit Solutions, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 215.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Davis, Brad, , , Date of Receipt Mailing Address 622 Main St. 31 2017 City State Zip Code Transaction ID: 4376949 CA Woodland 95695-3405 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wraith, Scarlett, & Randolph Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Miles, Bradley, , , Date of Receipt Mailing Address 420 N 4th St 31 2017 City Zip Code State Transaction ID: 5023374 Coeur D Alene ID 83814-2929 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Brad Miles Insurance Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pedersen, Jill, L., , Date of Receipt Mailing Address 16325 Boones Ferry Rd #204 2017 City State Zip Code Transaction ID : PR433177415378 Lake Oswego OR 97035-4297 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Columbia Benefit Solutions, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 242.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Watts, Jessica, J., Date of Receipt Mailing Address 401 Congress Ave 2017 City State Zip Code Transaction ID : PR433425115378 TX Austin 78701-4071 Amount of Each Receipt this Period FEC ID number of contributing C 230.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Frost Insurance VP, Benefits Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 230.00 Other (specify)

1430.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Underhill, Elizabeth, J.,, Date of Receipt Mailing Address 5951 Canoga Avenue 2017 City Zip Code State Transaction ID: PR433762515378 CA 91367-5010 Woodland Hills Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Underhill Insurance Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Weekly) 330.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Besselman, Thomas, , , Date of Receipt Mailing Address 6421 Perkins Rd., # 2B, Bldg A 2017 City State Zip Code Transaction ID : PR436824615378 LA **Baton Rouge** 70808-6200 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gallagher Benefit Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Wild, Trei, , , Date of Receipt Mailing Address 3724 Hearst Castle Way 31 2017 City State Zip Code Transaction ID: PR436824815378 TX Plano 75025-3719 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Protect Plans Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 210.00 Other (specify) 675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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	Statements may not be sold or used by any perse name and address of any political committee to						
NAME OF COMMITTEE (In Full) Health Underwriters Political Ad	ction Committee						
Full Name of Individual (Last, First, Middle In Patton, Jesse, A., ,	itial) or Full Organization Name	Date of Receipt					
Mailing Address 1112 Maple Street	01 31 2017						
City West Des Moines	Transaction ID : PR436829515378 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	EC ID number of contributing						
Name of Employer (for Individual) Associations Marketing Group, Inc.	Occupation (for Individual) Broker	Memo Item					
Receipt For: Primary General Other (specify) ▼							
Full Name of Individual (Last, First, Middle In Seifert, Greg, , , Mailing Address P.O. Box 189	itial) or Full Organization Name	Date of Receipt					
916 Main Street City Vancouver	State Zip Code WA 98666-0189	Transaction ID : PR436941615378 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	210.00					
Name of Employer (for Individual) Biggs Insurance Services	Occupation (for Individual) Broker	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$85.00 Monthly)					
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt					
Mailing Address 807 8th Street, Suite 300	State 7in Code	01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Wichita Falls	State Zip Code TX 76301-3317	Transaction ID : PR437002315378 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	230.00					
Name of Employer (for Individual) Financial Partners	Occupation (for Individual) Broker	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$30.00 Monthly)					
SUBTOTAL of Receipts This Page (optional)	•	790.00					
TOTAL This Period (last page this line number	only)						

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Koehler, Linda Rose, , , Date of Receipt Mailing Address 235 Main Street 2017 City Zip Code State Transaction ID: PR437090115378 CA Pleasanton 94566-8206 Amount of Each Receipt this Period FEC ID number of contributing C 210.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Herzog Insurance Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 210.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Braden, Victoria, J., , Date of Receipt Mailing Address 3875 Johns Creek Parkway, Suite C 2017 City State Zip Code Transaction ID : PR437201915378 GA Suwanee 30024-1294 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Braden Benefit Strategies, Inc Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Farrell, Jennifer, Liane, , Date of Receipt Mailing Address 3800 North Central Avenue 2017 9th Floor City State Zip Code Transaction ID: PR437358815378 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 213.00 Other (specify) 610.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Reents, Joni, Robin, , Date of Receipt Mailing Address 5760 W. 120th Avenue 31 2017 Suite 260 City State Zip Code Transaction ID: PR437564415378 CO 80020-6939 Broomfield Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Reents Insurance Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 242.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

3. Schneider, Chad, P., ,	Schneider, Chad, P., ,						
Mailing Address 111 W Illinois St	Mailing Address 111 W Illinois St 5th Floor						
City	State	Zip Code	01 31 2017				
Chicago	IL	60654-4505	Transaction ID : PR437566815378				
	12	00034-4303	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		200.00				
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Mailing Address 200 Galleria Pkwy SE Ste 1950			01 31 2017				
City	State	Zip Code	Transaction ID : PR437671115378				
Atlanta	GA	30339-5946	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		200.00				
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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rock, Deidre, Dover, , Date of Receipt Mailing Address P.O. Box 151 31 2017 City Zip Code State Transaction ID: PR437715215378 GA Camilla 31730-0151 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dover Insurance Agency Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Monthly) 310.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... 8540.00

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Detailed Summary Page 28 28 28 28 28 28 28 2	ITEMIZED DISBURSEMENTS			(CITCON C	k only one)					
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_	NAME OF COMMITTEE (In Full)						
١.	Health Underwriters Political Action	n Commi	ttee				
	Full Name (Last, First, Middle Initial)				Date of Disbursement		
Α.	McConnell for Majority Leader				M M / D D / Y Y Y Y		
	Mailing Address PO Box 1496				01 23 2017		
	Louisville	State KY	Zip Code 40201		FEC Identification Number		
_	Purpose of Disbursement 1/12 Breakfast			011	C Transaction ID : 11000077		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
ī	Office Sought: House Disburser	nent For:		Туре	1000.00		
	Senate	Primary	General		1/12 Breakfast		
	President State: District:	Other (spec	eify) 🔻		Memo Item		
	Full Name (Last, First, Middle Initial)						
	Ann Wagner For Congress				Date of Disbursement		
İ	Mailing Address PO Box 50	01 23 2017					
	,	State MO	Zip Code 63022		FEC Identification Number		
	Purpose of Disbursement	1010	03022		C C00495846		
	1/11 Dinner			011	Transaction ID : 11000080		
	Candidate Name Wagner, Ann, , Rep.,			Category/ Type	Amount of Each Disbursement this Period		
		nent For: 2	2018	Турс	1000.00		
		Primary	General		1/11 Dinner		
!	President State: MO District: 02	Other (spec	eify)		Memo Item		
	Full Name (Last, First, Middle Initial)				Date of Disbursement		
C.	Scalise Leadership Fund				M M / D D / Y Y Y Y		
-	Mailing Address 317 15TH ST NE Suite 1100				01 23 2017		
		State	Zip Code 20005		FEC Identification Number		
	Washington Purpose of Disbursement		C				
i	1/24 Dinner Candidate Name			011 Category/	Transaction ID : 11000081 Amount of Each Disbursement this Period		
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	Senate	Primary	General		1/24 Dinner		
	President	Other (spec	sify) ▼		Memo Item		
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s	(onesit only one)					
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NAME OF COMMITTEE (In Full) Health Underwriters Political Action	•						
Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN CONGF	RESSIONAL COMI	MITTEE	Date of Disbursement				
Mailing Address 320 FIRST STREET			01 25 2017				
WASHINGTON	State Zip Code 20003		FEC Identification Number				
Purpose of Disbursement 2017 Membership Dues		011	C C00075820 Transaction ID : 11029669				
Candidate Name NATIONAL REPUBLICAN CONGRESSION		Category/ Type	Amount of Each Disbursement this Period 15000.00				
Office Sought: House Disbursen Senate President State: District:	ment For: Primary General Other (specify) ▼		2017 Membership Dues Memo Item				
Full Name (Last, First, Middle Initial) B. MODERATE DEMOCRATS PAC Mailing Address 303 MASSACHUSETTS AVENUE		Date of Disbursement O1 26 2017					
City SWASHINGTON	State Zip Code DC 20002		FEC Identification Number				
Purpose of Disbursement 2017 Membership Dues		011	C C00436022 Transaction ID : 11030324				
Candidate Name MODERATE DEMOCRATS PAC	Category/ Type		Amount of Each Disbursement this Period				
	ment For: Primary General Other (specify)		5000.00 2017 Membership Dues Memo Item				
Full Name (Last, First, Middle Initial) 5- Johnson For Congress			Date of Disbursement				
Mailing Address PO Box 906	Mailing Address PO Box 906						
City Marietta Purpose of Disbursement 1/31 Lunch	State Zip Code OH 45750	011	FEC Identification Number C C00476820				
Candidate Name Johnson, Bill, , Rep.,	Transaction ID: 11030325 Amount of Each Disbursement this Period						
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SCHEDULE B (FEC Form 3X)		EOD LINIE N	NUMBER: PAGE 21 OF 21			
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NE NOMBEN.			
	for each category of the Detailed Summary Page	21b				
	Dotallou Guillilary 1 ago	28a	28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)	The state of the s					
Health Underwriters Political Action	Committee					
Full Name (Last, First, Middle Initial)						
A. NATIONAL REPUBLICAN SENATO	ORIAL COMMITTEE		Date of Disbursement			
Mailing Address 425 SECOND STREET NE			01 31 2017			
,	State Zip Code DC 20002		FEC Identification Number			
Purpose of Disbursement	20002		C C00027466			
2017 Membership Dues		011				
Candidate Name		Category/	Transaction ID: 11107280 Amount of Each Disbursement this Period			
NATIONAL REPUBLICAN SENATOR		Type	45000.00			
Office Sought: House Disbursem			15000.00 2017 Membership Dues			
	Primary General Other (specify) ▼					
State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)						
В.			Date of Disbursement			
			M = M / D = D / Y = Y = Y			
Mailing Address						
City	itate Zip Code		FEC Identification Number			
Purpose of Disbursement						
Talpood of Biobardonicin		· · · · · ·	C			
Candidate Name		Category/	Amount of Each Disbursement this Period			
		Type				
Office Sought: House Disbursem			7 7 7			
	Primary General		_			
State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)						
C.			Date of Disbursement			
A .::			M = M / D = D / Y = Y = Y			
Mailing Address						
City	State Zip Code		FEC Identification Number			
Purpose of Disbursement			C			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:	:750				
Senate	Primary General		7 7 7			
	Other (specify) ▼		Memo Item			
State: District:						
SUBTOTAL of Disbursements This Page (optional)			15000.00			
The or biobardomento This Lage (optional)			7 7 7			
TOTAL This Period (last page this line number only).			40500.00			