FEC FORM 3X	AN	EPORT ( ID DISB Other Than	URSEN	IENTS	ee	C	Dffice Use Only
1. NAME OF COMMITTEE (in fu		FEC MAILING		xample:If typing ver the lines	, type		
		EALTH UNDER		(HUPAC)			] 
ADDRESS (number and	street)						
Check if differ than previousl reported. (AC	У , A	RLINGTON					22201
2. FEC IDENTIFICAT	ION NUMBER	₩	CITY 🛦		S	STATE 🛋	ZIPCODE
C00283135			3. IS THIS REPOR		NEW N) <b>OR</b>	AME (A)	NDED
July 15 Quarterly October Quarterly January 2 Quarterly July 31 M Report(N Year Only	rts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election	(b) Monthly Report Due On: (c) 12-Day <b>PRE</b> -Ele Report f (d) 30-Day <b>Post</b> -E Report f	er the:	3)	12C)	Aug 20 Sep 20 Oct 20 General (12 Special (12) Runoff (30F	(M9) (M9) (M9) (M10)
5. Covering Period	0 6		0 1 1	through	0 6		2011
Type or Print Name of T		Jennifer Murphy	,				
Signature of Treasurer	Electronically	y Filed by Jenr	ifer Murphy		Da	ate 07	17 2011
	alse, erroneous	s, or incomplete in	nformation may s	ubject the pers	on signing this	Report to the port	enalties of 2 U.S.C 437g.
Office Use Only							FEC FORM 3X (Rev. 12/2004)

6.

# SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC) ММ DD YY ММ D Y Y D Υ 01 06 2011 06 30 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2011<sup>°</sup> 111303.33 January 1 (b) Cash on Hand at 97367.46 Begining of Reporting Period ..... 35074.24 250882.13 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 132441.70 362185.46 6(a) and 6(c) for Column B) ..... 37259.39 267003.15 Total Disbursements (from Line 31) ..... 7. Cash on Hand at Close of 8. **Reporting Period** 95182.31 95182.31 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed то 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) .....

X 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. 06/2004) Page 3 Write or Type Committee Name NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC) м м 06 01 м м 06 30 D 2011 D 2011 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 22321.70 130604.20 (i) Itemized (use Schedule A) ..... 12752.43 120273.50 (ii) Unitemized ..... (iii) TOTAL (add 35074.13 250877.70 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 35074.13 250877.70 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 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.11 4.43 (Dividends, Interest, etc.) ..... 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) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 35074.24 250882.13 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts 35074.24 250882.13 (subtract Line 18(c) from Line 19) .....

of Disbursements

COLUMN A

FEC Form 3X (Rev. 02/2003)

## **II. DISBURSEMENTS**

		II. DISBURSEMENTS					
21.	Ope (a)	erating Expenditures: Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share					
		(ii) Non-Federal Share					
	(b)	Other Federal Operating	1				
		Expenditures					
	(c)	Total Operating Expenditures	F				
		(add 21(a)(i), (a)(ii) and (b)) 🕨					
22.	Tra	nsfers to Affiliated/Other Party	F				
23.	Cor	nmittees htributions to leral Candidates/Committees l Other Political Committees					
24.							
25.	(use Schedule E)						
26.	. Loan Repayments Made						
27. 28.							
	(b) (c)	Political Party Committees Other Political Committees (such as PACs)					
	(d)	Total Contribution Refunds (add Lines 28(a), (b), and (c)) <b>&gt;</b>					

29.	Other Disbursements
23.	

30. Federal Election Activity (2 U.S.C 431(20))
(a) Shared Federal Election Activity (from Schedule H6)
(i) Federal Share ......

(ii) "Levin" Share .....

- (b) Federal Election Activity Paid Entirely With Federal Funds .....
- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....
- Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
- Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

Total This Period				
	0.00			
	0.00			
	1759.39			
	1759.39			
	0.00			
	35500.00			
	0.00			
	0.00			
	0.00			
	0.00			
	0.00			
	0.00			
	0.00			
	0.00			
	0.00			

Calendar Year-to-Date					
	0.00				
	0.00				
	13828.15				
	13828.15				
	0.00				
	252750.00				
	0.00				
	0.00				
	0.00				
	0.00				
	425.00				
	0.00				
	0.00				
	425.00				
	0.00				

Page 4

COLUMN B

			0.00
			0.00
			0.00
			0.00

37259.39

37259.39

0.00
0.00
0.00

0.00

267003.15

267003.15

## DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	35074.13	250877.70	
34.	Total Contribution Refunds (from Line 28(d))	0.00	425.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	35074.13	250452.70	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1759.39	13828.15	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1759.39	13828.15	

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 6 / 84
	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
	> NATIONAL ASSOCIATION OF HEALT	H UNDERWRITERS PAC (HUPAC)	
Α.	Full Name (Last, First, Middle Initial) Jeff Ahrendsen		Date of Receipt
	Mailing Address 3830 Wakefield Dr		0 6 2 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 11366-P47492
	Colorado Springs	CO 80906-4393	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Benefit Resources, Inc.	Occupation	Payroll Deduction
	Receipt For:	Agent Aggregate Year-to-Date V	-1
	Primary General	525.00	(\$100.00 Monthly)
	Other (specify)		
в.	Full Name (Last, First, Middle Initial) Terry Allard		Date of Receipt
	Mailing Address 11619 Brook Hill Ct		0 6 / 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47349
	Anchorage	AK 99516-1970	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer The Wilson Agency, LLC	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	Aggregate Year-to-Date ▼	-
	Primary     General       Other (specify) ▼	300.00	(\$50.00 Monthly)
C.	Full Name (Last, First, Middle Initial) Kirk Andonian		Date of Receipt
0.	Mailing Address 4423 Point Fosdick Dr	NW Ste 306	0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47163
	<u>Gig Harbor</u>	WA 98335-1794	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Berg Andonian	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	900.00	(\$150.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)		300.00
	<b>TOTAL</b> This Period (last page this line number	<b>·</b>	
		•/	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 7 / 84           (check only one)
	Any information copied from such Reports and S r for commercial purposes, other than using the	statements ma	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL		VRITERS PAC (HUPAC)	
Ľ	Full Name (Last, First, Middle Initial) Catherine M. Antonie			Date of Receipt
	Mailing Address W190 S7238 Lochcres	st Blvd		0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47576
	Muskego	WI	53150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Planned Futures LLC	Occupatio		Payroll Deduction
	Receipt For: Primary General		e Benefit Consultant → Year-to-Date ▼ 300.00	(\$50.00 Monthly)
	Other (specify) <b>v</b>	0 0		
	Full Name (Last, First, Middle Initial) Elizabeth Ashmore			Date of Receipt
	Mailing Address 6102 82nd St Ste 6			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47745
	Lubbock FEC ID number of contributing federal political committee.	TX C	79424-0803	Amount of Each Receipt this Period 170.00
	Name of Employer Ashmore & Associates Insu- rance Agency Receipt For: Primary General Other (specify) ▼	Occupatio agent Aggregate	n 9 Year-to-Date 🔻 1030.00	<ul> <li>Payroll Deduction</li> <li>(\$170.00 Monthly)</li> </ul>
	Full Name (Last, First, Middle Initial) Virginia T. Ashton-Vernon			Date of Receipt
	Mailing Address 3702 Alton Rd SW			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47814
	Roanoke	VA	24014-3004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		- Payroll Deduction
	Name of Employer Lewis-Gale Medical Center	Occupatio Director	<sup>n</sup> of Provider Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 248.00	(\$42.00 Monthly)
_	SUBTOTAL of Receipts This Page (optional)	1		262.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	and Statements may not be sold or used by any persor	FOR LINE NUMBER:       PAGE 8 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17         n for the purpose of soliciting contributions
	ng the name and address of any political committee to s	solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) Kimberly L. Auclair Mailing Address 6873 Raccoon Ct		Date of Receipt
<u></u>		06 23 2011
City Viera	State Zip Code FL 32940-6869	Transaction ID: 11366-P47264 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30.00
Name of Employer Pineapple Financial Servi- ces, LLC	Occupation Agent	Payroll Deduction
Receipt For: Primary General Other (specify) <b>▼</b>	Aggregate Year-to-Date ▼ 1180.00	(\$30.00 Monthly)
Full Name (Last, First, Middle Initial) Rick D. Bailey Mailing Address 117 Royal Oaks I	Dr	Date of Receipt
01		06 23 2011
City Canton	State Zip Code GA 30115-6587	Transaction ID: 11366-P47341 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Rick Bailey & Company, In- <u>c.</u>	Occupation agent	Payroll Deduction
Receipt For: Primary General Other (specify) <b>v</b>	Aggregate Year-to-Date  985.00	(\$125.00 Monthly)
Full Name (Last, First, Middle Initial) Kimberly L Ball		Date of Receipt
Mailing Address 711 E Ashlan Ave	3	0 6 2 3 Y Y Y Y 0 1 1
City	State Zip Code	Transaction ID: 11366-P47400
Fresno	CA 93704-3705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Blue Shield of California	Occupation Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	(\$50.00 Monthly)
SUBTOTAL of Receipts This Page (option	nal)	205.00
TOTAL This Period (last page this line nu	Imber only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 9 / 84         (check only one)       X       11a       11b       11c       12         X       11a       11b       11c       12         13       14       15       16       1
	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso a name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	angle NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
	Full Name (Last, First, Middle Initial) Kathryn A. Beals		Date of Receipt
	Mailing Address 5151 W River Rd		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11368-P47987
	Waunakee	WI 53597-9523	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	170.00
	Name of Employer Dean Health Plan	Occupation Agent	Payroll Deduction
	Receipt For: Primary General	Aggregate Year-to-Date	(#470.00.04
	Other (specify) ▼	970.00	(\$170.00 Monthly)
_	Full Name (Last, First, Middle Initial) Bruce D. Benton		Date of Receipt
	Mailing Address 20161 Delita Dr		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11368-P47857
	Woodland Hills	CA 91364-3521	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	170.00
	Name of Employer Genesis SmithBenton Insur- ance & Finan	Occupation Agent	Payroll Deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify)     ▼	1145.00	(\$170.00 Monthly)
_	Full Name (Last, First, Middle Initial) David A Berman	I	Date of Receipt
	Mailing Address 6510 N Shadeland Av	e	M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11368-P47698
	Indianapolis	IN 46220-4369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Neace Lukens Holding Comp- any, Inc.	Occupation agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 635.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1	425.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 10 / 84         (check only one)       X       11a       11b       11c       12         X       11a       11b       11c       12         13       14       15       16       1
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
. Z	Full Name (Last, First, Middle Initial) Thomas Besselman			Date of Receipt
	Mailing Address 6421 Perkins Rd Bldg	A # 2B		M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47134
	Baton Rouge	LA	70808-6200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Besselman & Little Agency	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	1 <b>–</b> – – – – – – – – – – – – – – – – – –	Year-to-Date ▼ 1625.00	(\$250.00 Monthly)
	Full Name (Last, First, Middle Initial) Robert J Bishop Mailing Address 2785 E Desert Inn Rd	I Ste 260		Date of Receipt
			Zin Code	06 23 2011
	City Las Vegas	State NV	Zip Code 89121-3693	Transaction ID: 11366-P47162 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer KIA Insurance	Occupatio Presiden		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 600.00	(\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) James C. Bosier	I		Date of Receipt
•	Mailing Address 6410 N Butler Rd			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47344
	Cedar Falls	IA	50613-9317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer The Accel Group	Occupatio Ins Desig	n yn and Sales	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 510.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)			435.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 11 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person a name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
⊻ A.	Full Name (Last, First, Middle Initial) Scott T. Buie		Date of Receipt
	Mailing Address 2819 E 4215 S		0 6 / D D / Y Y Y Y 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11368-P47990
	Salt Lake City	UT 84124-2900	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Buie Insurance Services	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	(\$50.00 Monthly)
- B.	Full Name (Last, First, Middle Initial) Patrick Burns		Date of Receipt
	Mailing Address 5653 Maxwelton Rd		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11366-P47575
	Oakland	CA 94618-2654	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Burns Employee Benefits Insurance Ser	Occupation Managing Member	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
- C.	Full Name (Last, First, Middle Initial) Joseph W. Buyalos		Date of Receipt
•	Mailing Address 9051 Major Smith Ln		0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47083
	Frederick	MD 21704-7831	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer The Insurance Exchange, Inc.	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
ſ	SUBTOTAL of Receipts This Page (optional)	·	220.00
ŀ	TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 12/84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         1
	Any information copied from such Reports and s or for commercial purposes, other than using th	Statements may	v not be sold or used by any per dress of any political committee	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
Z	Full Name (Last, First, Middle Initial) Kareim R. Cade			Date of Receipt
	Mailing Address 1544 Pebble Beach D	r		0 6 / D D / Y Y Y Y 0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47978
	Pontiac	MI	48340-1367	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Great Lakes Benefit Group	Occupation CEO	1	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) David A. Cagliola			Date of Receipt
	Mailing Address 71 Quail Dr S			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: 11366-P47345
	Phoenixville FEC ID number of contributing federal political committee.	PA	19460-1075	Amount of Each Receipt this Period 85.00
	Name of Employer Radnor Benefits Group, In-	Occupation Senior Vi	n ce President	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Louie L. Cason			Date of Receipt
	Mailing Address 2920 Gervais St			
	City	State	Zip Code	Transaction ID: 11366-P47242
	Columbia	SC	29204-3345	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer The Cason Group, Inc.	Occupation Agent	1	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .			255.00

	SCHEDULE A (FEC Form 3X)	)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 84 (check only one)
	ITEMIZED RECEIPTS		for each category of the	$X$ 11a $\Box$ 11b $\Box$ 11c $\Box$ 12
			Detailed Summary Page	
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not not addre	ot be sold or used by any perso ss of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	> NATIONAL ASSOCIATION OF HEAL	LTH UNDERWF	RITERS PAC (HUPAC)	
<i>А</i> .	Full Name (Last, First, Middle Initial) Russell B. Childers			Date of Receipt
	Mailing Address 402 Rawley Rd			0 6 / D D / Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47979
	Americus	GA	31719-2150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Russ Childers, CLU	Occupation President		Payroll Deduction
	Receipt For:		ear-to-Date 🔻	-1
	Primary General	Aggregate it		(\$85.00 Monthly)
	Other (specify)	0 0 0	510.00	
в.	Full Name (Last, First, Middle Initial) Dorothy M. Cociu			Date of Receipt
	Mailing Address PO Box 1941			M = M         /         D = D         /         Y = Y = Y         Y           0 6         2 3         2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47545
	<u>Big Bear Lake</u>	CA	92315-1941	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Advanced Benefit Consulti-	Occupation		Payroll Deduction
	ng & Insuran Receipt For:	Agent	ear-to-Date 🔻	-
	Primary General	Aggregate Y	ear-to-Date •	(\$85.00 Monthly)
	Other (specify)	0 0 0	510.00	
С.	Full Name (Last, First, Middle Initial) Teresa Conto			Date of Receipt
	Mailing Address 145 Polaris Dr			0 6 / 2 3 / Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47717
	Walkersville	MD	21793-9123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Independent Benefit	Occupation Agent		<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	Aggregate Y	ear-to-Date 🔻	
	Other (specify)		510.00	(\$85.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)		<b>\</b>	255.00
			<b>r</b>	
	TOTAL This Period (last page this line number	er oniy)		

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 14/84
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	ay not be sold or used by any per dress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	> NATIONAL ASSOCIATION OF HEALT	TH UNDER	WRITERS PAC (HUPAC)	
Α.	Full Name (Last, First, Middle Initial) Troy J. Cook			Date of Receipt
	Mailing Address 6600 Westown Pkwy #	250		06 23 Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47695
	West Des Moines	IA	50266-7724	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Krist Insurance Services	Occupation AGENT	on	Payroll Deduction
	Receipt For:		e Year-to-Date 🔻	
	Primary General		400.00	(\$85.00 Monthly)
-	Other (specify)	0 0		
В.	Full Name (Last, First, Middle Initial) Catherine L. Cooper			Date of Receipt
	Mailing Address 17232 Brookview Dr			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 11366-P47596
	Livonia	MI	48152-4543	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Health Care Administrators	Occupation agent	on	Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		403.00	(\$42.00 Monthly)
С.	Full Name (Last, First, Middle Initial) Steven G. Cosby			Date of Receipt
•	Mailing Address 27 W Boscawen St			
	City	State	Zip Code	Transaction ID: 11366-P47109
	Winchester	VA	22601-4740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Cosby Insurance Group	Occupation Agent	on	Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	510.00	(\$85.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			212.00
	SUBIUTAL OF RECEIPTS THIS Page (optional)			
	TOTAL This Period (last page this line number	only)		•

l A	CHEDULE A (FEC Form 3X) <b>FEMIZED RECEIPTS</b> Any information copied from such Reports and	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER:         PAGE 15 / 84           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         1           on for the purpose of soliciting contributions         11         11         11         11
	r for commercial purposes, other than using th NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			o solicit contributions from such committee.
<u>ل</u> ا م.	Full Name (Last, First, Middle Initial) Reed Damron Mailing Address 4642 Riveredge Dr			Date of Receipt
				06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47104
	Duluth	GA	30096-2987	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		Payroll Deduction
	Name of Employer HIRE Benefits, Inc.	Occupatio Agent	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		510.00	(\$85.00 Monthly)
. –	Full Name (Last, First, Middle Initial) John A Davidson			Date of Receipt
	Mailing Address 25 Rolling Oaks Dr S	ite 110		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         2 3         2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47159
	Thousand Oaks	CA	91361-1003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Davidson Insurance & fina- ncial Servic	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 510.00	(\$85.00 Monthly)
. —	Full Name (Last, First, Middle Initial) Johnny Lee Dawkins			Date of Receipt
	Mailing Address 122 Thorncliff Dr			M · M         /         D · D         /         Y · Y · Y · Y         Y           0 6         2 3         2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47388
	Fayetteville	NC	28303-5268	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Ebenconcepts		Consultant	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date 630.00	(\$100.00 Monthly)
Γ				270.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	() Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 16 / 84         (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	ALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) Craig R Dawson		Date of Receipt
Mailing Address 2010 Coleman Ct		0 6 2 3 Y Y Y Y 0 1 1
City	State Zip Code	Transaction ID: 11366-P47172
Midland	TX 79705-1719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Insurance One Management,	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
Inc / Don C Receipt For:	Aggregate Year-to-Date ▼	_
Primary     General       Other (specify)     ▼	300.00	(\$50.00 Monthly)
Full Name (Last, First, Middle Initial) <b>3.</b> Teresa F DeBruin	I	Date of Receipt
Mailing Address 5441 Edgerton Dr		0 6 / 2 3 / Y Y Y Y 0 1 1
City	State Zip Code	Transaction ID: 11366-P47566
Norcross	GA 30092-2185	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer DeBruin Benefit Services, Inc./ The L	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
Receipt For:	Aggregate Year-to-Date 🔻	
Other (specify)	403.00	(\$42.00 Monthly)
Full Name (Last, First, Middle Initial) James F. Deese		Date of Receipt
Mailing Address 2811 Lenoir Dr		06 / 23 / Y Y Y Y 011
City	State Zip Code	Transaction ID: 11366-P47569
Greensboro	NC 27408-5212	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		40.00
Name of Employer Carolina Benefit Administ- rators	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	230.00	(\$40.00 Monthly)
SUBTOTAL of Receipts This Page (optiona	I	132.00
	ber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 17/84           (check only one)
		Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
. Z	Full Name (Last, First, Middle Initial) Rush D. Dixon		Date of Receipt
	Mailing Address 1375 Piccard Dr		0 6 2 3 Y Y Y Y Y 0 1 1
	City Declaritie	State Zip Code MD 20850-4311	Transaction ID: 11366-P47206
	Rockville FEC ID number of contributing federal political committee.	MD 20850-4311	Amount of Each Receipt this Period 170.00
	Name of Employer Early Cassidy and Schilli-	Occupation	- Payroll Deduction
	Receipt For: Primary General Other (specify) ♥	VP of Employee Benefits Aggregate Year-to-Date ▼ 1145.00	(\$170.00 Monthly)
	Full Name (Last, First, Middle Initial) Steven H. Dodder Mailing Address PO Box 2069		Date of Receipt
	-	01-1- 7'- 01-	06 23 2011
	City <u>Monument</u>	State Zip Code CO 80132-2069	Transaction ID: 11366-P47214 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Assurant Health	Occupation Regional Sales Director	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 685.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Michael A. Embry	1	Date of Receipt
	Mailing Address 26240 Wacker Dr		M M / D D / Y Y Y Y 06 23 2011
	City New Baltimore	State Zip Code MI 48051-3306	Transaction ID: 11366-P47504
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 85.00
	Name of Employer Comerica Insurance Servic- es, Inc.	Occupation VP - Group Benefits Division	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	L	340.00

Ary information copied from such Reports and Statements may not be add or used by any person for the purpose of soliciting contributions of for commendia purposes, where there use that may not the any political committee.       NAME CF COMMITTEE (in Full)         NAME CF COMMITTEE (in Full)       NAME OF COMMITTEE (in Full)       Date of Receipt         India Kernession       Date of Receipt       0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0 (0		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 18 / 84         (check only one)       11c       12         X       11a       11b       11c       12         13       14       15       16       17
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)         Full Name (Last, First, Middle Initial)         Initial M. Effoributing         City         Aurora         OH       4202.8438         FEC ID number of contributing         Identification         Initial M. Effoributing         Identification         Name of Engloyee         Initial Arts Inc.         Benefits Consultant         Recipt For:         Initial Arts Inc.         Pagregate Yeer-to-Date ▼         Oty         State       Zp Code         Initial Arts Inc.         Aggregate Yeer-to-Date ▼         City       State         Name of Engloyee         Initial Arts Inc.         Aggregate Yeer-to-Date ▼         Occupation         Initial Arts Inc. </th <th></th> <th>Any information copied from such Reports and S or for commercial purposes, other than using the</th> <th>Statements may not be sold or used by any person e name and address of any political committee to</th> <th>n for the purpose of soliciting contributions solicit contributions from such committee.</th>		Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.       Linda M. Erlenbach       Date of Receipt         Mailing Address       151 Belcourt Ln       Difference         City       State       Zip Code         Aurora       OH       44202-8438         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer       Occupation       Payroll Deduction         Numer of Employer       Occupation       State       V         Primary       General       Aggregate Yeer-loc-Date ▼       Oth         Other (specify) ▼       State       Zip Code       Notice Face         Mailing Address       PO Box 19       State       Zip Code       Notice Face         Demotte       IN       4510-0019       Payroll Deduction       Payroll Deduction         Name of Employer       In       4510-0019       Payroll Deduction       Payroll Deduction         Name of Employer       Aggregate Yeer-loc-Date ▼       In       Aggregate Yeer-loc-Date ▼       Payroll Deduction         Name of Employer       Aggregate Yeer-loc-Date ▼       In       46062-9075       Partice Receipt His Period         City       State       Zip Code       Nobidescille       No 46062-9075       Pareiod         Nobide Faitbairn<			TH UNDERWRITERS PAC (HUPAC)	
City     State     Zip Code       Aurora     OH     44202-8438       FEC ID number of contributing federal political committee.     C       Name of Employee Primary     Cecupation       Name (Last, First, Middle Initial)     Agergate Year-to-Date ▼       Admout of Each Receipt this Period     State       City     State       Demotifies     Cocupation       B.     Admout of Each Receipt this Period       City     State       Demotifies     State       City     State       Demotifies     Cocupation       Name of Employee     C       Primary     General       Other (specify)     State       City     State       Demotifies     Cocupation       Receipt Fre:     Agergate Year-to-Date       Primary     General       Occupation     Receipt this Period       Receipt Fre:     Agergate Year-to-Date       Primary     General       Okole Faitbain     Agergate Year-to-Date       Payroll Deduction     Receipt this Period       Receipt Fre:     Agergate Year-to-Date       Primary     General       Nocle Faitbain     Maling Address       Planter (seefly)     State       Nocole Faitbain       <	۷ A.			Date of Receipt
Aurora       OH       44202-8438       Amount of Each Receipt this Period         FEC 10 number of contributing federal policid committee.       C       85.00         Name of Employer L.M. Entendach, Inc.       Occupation Benefits Consultant       Payroll Deduction         Receipt For: Other (specify) ♥       Other (specify) ♥       State       Zip Code         John G. Fagen       Mailing Address       PO Box 19       State       Zip Code         City       State       Zip Code       Parroll Deduction       State       Payroll Deduction         Receipt For: Other (specify) ♥       Occupation Aggregate Year-to-Date       Payroll Deduction       State       Zip Code         Name of Employer Financial Arts Inc.       Occupation Aggregate Year-to-Date       Payroll Deduction       Payroll Deduction         Receipt For: Other (specify) ♥       Occupation Aggregate Year-to-Date       Imageregate Year-to-Date       Imageregate Year-to-Date       Payroll Deduction         Name of Employer Financial Arts Inc.       Aggregate Year-to-Date       Imageregate Year-to-Date       I		Mailing Address 151 Belcourt Ln		
FEC 1D number of contributing federal political committee.       C       Payroll Deduction         Name of Employer LM. Entendach, Inc.       Benefits Consultant       Payroll Deduction         B.       Full Name (Last, First, Middle Initial) John G. Fagen       Aggregate Year-to-Date ▼       S85.00 Monthly)         B.       Full Name (Last, First, Middle Initial) John G. Fagen       Date of Receipt       Transaction ID: 11366-P47259         Demostre       IN       46310-0019       Amount of Each Receipt Hore: B 85.00       Payroll Deduction         FEC 1D number of contributing federal political committee.       C       Payroll Deduction       Receipt For: B 85.00       Payroll Deduction         Name of Employer Fransactia Mts Inc.       Aggregate Year-to-Date ▼       Payroll Deduction       Receipt For: B 9 2 3 2 0 1 1         C.       Full Name (Last, First, Middle Initial)       Aggregate Year-to-Date ▼       Payroll Deduction         Name of Employer Fransactia Mts Inc.       Aggregate Year-to-Date ▼       Payroll Deduction         Noblescyllle       IN 49062-9075       For ID number of contributing federal political committee.       C         Fig. ID number of contributing federal political committee.       C       In 49062-9075       Payroll Deduction         Noblescyllle       IN 49062-9075       For ID number of contributing federal political committee.       Qurrey of 20 2 2 0 1 1		City	State Zip Code	Transaction ID: 11368-P47973
rederal political committee.       0         Name of Employer LML.Enblach, Inc.       Benefits Consultant         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       510.00         B.       Join G. Fagon         Maling Address       PO Box 19         City       State         Demotte       IN         48310-0019       Fect Do number of contributing federal political committee.         Primary       General Other (specify) ▼         City       State         Zip Code       Aggregate Year-to-Date ▼         Mailing Address       PO Box 19         City       State         Primary       General         Occupation       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       State         Aggregate Year-to-Date ▼       (\$85.00 Monthly)         C.       Nooblesville       Int Aggregate Year-to-Date ▼         Other (specify) ▼       General       State       Zip Code         Noblesville       Int Aggregate Year-to-Date ▼       (\$85.00 Monthly)       Date of Receipt         C.       Noblesville       Int Aggregate Year-to-Date ▼       (\$30.00         Noblesville       Int Aggre		Aurora	OH 44202-8438	Amount of Each Receipt this Period
Late of Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         B.       Full Name (Last, First, Middle Initial)         John G. Fagen       Date of Receipt         Mailing Address       PO Box 19         City       State       Zip Code         Demotite       IN       46310-0019         FEC ID number of contributing federal political committee.       Occupation         Name of Employer       Agent         Receipt For:       Agent         Agent       Agent         Mailing Address       213 Dakota Dr         City       State       Zip Code         Name of Employer       Agent         Primary       General         Other (specify) ▼       State       Zip Code         Name of Employer       Agent         Receipt For:       Agent       Agent         Mailing Address       213 Dakota Dr       (\$85.00 Monthly)         City       State       Zip Code       Mailing Address         Name of Employer       Occupation       Precident       State         Nablesville       IN       49662-9075       Precid         Primar			C	
Receipt For:       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         B.       John G. Fagen       Date of Receipt         Mailing Address       PO Box 19       Date of Receipt         City       State       Zip Code         Demotte       IN       46310-0019         FEC ID number of contributing federal political committee.       Occupation         Name of Employer       Occupation         Primary       General       Aggregate Year-to-Date         Primary       General       Occupation         Aggregate Year-to-Date       Image: State       State         Primary       General       Occupation         Aggregate Year-to-Date       Image: State       State         Primary       General       Occupation         Aggregate Year-to-Date       Image: State       State         Primary       General       Occupation         Nicole Fairbaim       Aggregate Year-to-Date       Image: State         Primary       General       Occupation       Page: State         Other (specify)       State       Zip Code       Amount of Each Receipt this Period         Receipt For:       Noblesville       Image: State       Zip Code       Amount of Each Receipt this Period      <		Name of Employer L.M. Erlenbach, Inc.		<ul> <li>Payroll Deduction</li> </ul>
Primary       General       St0.00       (\$85.00 Monthly)         B.       Full Name (Last, First, Middle Initial)       John G. Fagen       Date of Receipt         Mailing Address       PO Box 19       Transaction ID: 11366-P47259         Demotte       IN       45310-0019       Transaction ID: 11366-P47259         Permotte       IN       45310-0019       Payroll Deduction         FEC ID number of contributing tederal political committee.       Occupation Agent       Ageregate Year-to-Date ▼       (\$85.00 Monthly)         Name of Employer       Frinancial Arts Inc.       Aggregate Year-to-Date ▼       (\$85.00 Monthly)       Payroll Deduction         C.       Nicole Tarbiain       Date of Receipt       Date of Receipt       Sto0         Mailing Address       2113 Dakota Dr       C       Transaction ID: 11366-P47573         Noblesville       IN       46062-9075       Amount of Each Receipt His Period         FEC ID number of contributing tederal political committee.       C       State       Zip Code         Noblesville       IN       46062-9075       Amount of Each Receipt His Period       State         FEC ID number of contributing tederal political committee.       Occupation       Payroll Deduction       30.00         Payroll Deduction       State       Zip Code		Receipt For:		-
B.       John G. Fagen       Date of Receipt         Mailing Address       PO Box 19         City       State       Zip Code         Demotte       IN       46310-0019         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer Financial Afs Inc.       Aggregate Year-to-Date ▼       Payroll Deduction         Primary       General       Occupation Agent       State       Zip Code         Name of Employer Financial Afs Inc.       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         C.       Nicole Fairbaim Mailing Address       2113 Dakota Dr       Date of Receipt         City       State       Zip Code       Transaction ID: 11366-P47573         Noblesville       IN       46062-9075       Transaction ID: 11366-P47573         Noblesville       IN       46062-9075       Payroll Deduction         FEC ID number of contributing federal political committee.       Occupation President       Payroll Deduction         Name of Employer Creative Insurance Concep- ts.In.C.       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         SubtrotAL of Receipts This Page (optional)       355.00       (\$30.00 Monthly)				(\$85.00 Monthly)
Mailing Address       PO Box 19         City       State       Zip Code         Demotte       IN       46310-0019         FEC ID number of contributing rederal political committee.       C       Amount of Each Receipt this Period         Mailing Address       C       85.00         Name of Employeer Financial Arts Inc.       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         C.       Full Name (Last, First, Middle Initial)       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         C.       Full Name (Last, First, Middle Initial)       Date of Receipt       201.1         Mailing Address       2113 Dakota Dr       510.00       Payroll Deduction         Receipt For:       Onumber of contributing federal political committee.       Date of Receipt       201.1         City       State       Zip Code       Transaction ID: 11366-P47573       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       30.00       Payroll Deduction         Name of Employer f. Inc.       Aggregate Year-to-Date ▼       (\$30.00 Monthly)       (\$30.00 Monthly)         SubtrotAL of Receipt This Page (optional)       Aggregate Year-to-Date ▼       (\$30.00 Monthly)       (\$30.00 Monthly)	- В.		1	Date of Receipt
City       State       Zip Code         Demotte       IN       46310-0019         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Period       C       Occupation Aggregate Year-to-Date       Payroll Deduction         Name of Employer Financial Arts thc.       Aggregate Year-to-Date       Image: Committee.       Payroll Deduction         Primary       General       0100       510.00       State       State       State         Ctiv       Water (specify) ▼       State       Zip Code       State       State <td></td> <td></td> <td></td> <td>M M / D D / Y Y Y Y</td>				M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.       C       85.00         Name of Employer Financial Arts Inc.       Occupation Agent       Payroll Deduction         Receipt For: Primary       General       510.00       \$85.00 Monthly)         C.       Full Name (Last, First, Middle Initial) Nicole Fairbairn       Date of Receipt       06         Mailing Address       2113 Dakota Dr       06       23       2011         City       State       Zip Code       Transaction ID: 11366-P47573         Noblesville       IN       46062-9075       Payroll Deduction         FEC ID number of contributing federal political committee.       C       30.00         Name of Employer Creative Insurance Concep- Is. Inc.       Occupation President       Payroll Deduction         Receipt For: Primary       General Other (specify) ♥       Occupation President       \$355.00         SUBTOTAL of Receipts This Page (optional)       \$200.00       200.00		City	State Zip Code	
federal political committee.       C       33.00         Name of Employer Financial Arts Inc.       Occupation Agent       Payroll Deduction         Receipt For:       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         C.       Full Name (Last, First, Middle Initial)       Date of Receipt         Mailing Address       2113 Dakota Dr       0 6         City       State       Zip Code         Noblesville       IN       46062-9075         FEC ID number of contributing federal political committee.       C         Name of Employer Creative Insurance Concep- Is, Inc.       Occupation President         Is, Inc.       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Occupation President         SuBTOTAL of Receipts This Page (optional)       \$355.00		Demotte	IN 46310-0019	Amount of Each Receipt this Period
Name of Employer       Occupation         Agent       Agent         Agent       Aggregate Year-to-Date ▼         Other (specify) ▼       510.00         C.       Full Name (Last, First, Middle Initial)         Nicole Fairbairn       Date of Receipt         Mailing Address       2113 Dakota Dr         City       State       Zip Code         Noblesville       IN       46062-9075         FEC ID number of contributing federal political committee.       C         Name of Employer Creative Insurance Conceptions       Aggregate Year-to-Date ▼         Inc.       Aggregate Year-to-Date ▼         Receipt For:       Aggregate Year-to-Date ▼         Primary       General       Occupation         Primary       General       Occupation         Primary       General       Occupation         Primary       General       Occupation         Primary       General       355.00       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00			C	
Primary       General         Other (specify) ▼       510.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Mailing Address       2113 Dakota Dr         City       State       Zip Code         Noblesville       IN       46062-9075         FEC ID number of contributing federal political committee.       C         Name of Employer creative Insurance Concepts, Inc.       Occupation President         Receipt For:       Occupation President         Primary       General       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00		Name of Employer Financial Arts Inc.	'	<ul> <li>Payroll Deduction</li> </ul>
Other (specify) ▼       510.00       (400.00 Monthiny)         Full Name (Last, First, Middle Initial) Nicole Fairbairn       Date of Receipt         Mailing Address       2113 Dakota Dr       06       23       2011         City       State       Zip Code       Mofile - 23       200.00         Noblesville       IN       46062-9075       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       30.00         Name of Employer Creative Insurance Concep- ts, Inc.       Occupation President       Payroll Deduction         Receipt For:       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00		Receipt For:		_
C.       Nicole Fairbairn       Date of Receipt         Mailing Address       2113 Dakota Dr       Date of Receipt         City       State       Zip Code         Noblesville       IN       46062-9075         FEC ID number of contributing federal political committee.       C       30.00         Name of Employer Creative Insurance Concepts, Inc.       Occupation President       Primary         Receipt For:       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00			510.00	(\$85.00 Monthly)
Mailing Address       2113 Dakota Dr         Mailing Address       2113 Dakota Dr         City       State       Zip Code         Noblesville       IN       46062-9075         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer Creative Insurance Concepts, Inc.       Occupation President       President         Receipt For:       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00	- C.		1	Date of Receipt
City       State       Zip Code       Transaction ID: 11366-P47573         Noblesville       IN       46062-9075       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       30.00         Name of Employer Creative Insurance Conceptits, Inc.       Occupation President       President         Receipt For:       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00		Mailing Address 2113 Dakota Dr		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.       C       30.00         Name of Employer Creative Insurance Concepts, Inc.       Occupation President       President         Receipt For:       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         Other (specify) ▼       355.00       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       L       200.00				Transaction ID: 11366-P47573
federal political committee.       SUBTOTAL of Receipts This Page (optional)         General       C         SUBTOTAL of Receipts This Page (optional)       SUBTOTAL of Receipts This Page (optional)		Noblesville	IN 46062-9075	Amount of Each Receipt this Period
Name of Employer     Occupation       Creative Insurance Concepts, Inc.     President       Receipt For:     Aggregate Year-to-Date ▼       Other (specify) ▼     355.00       SUBTOTAL of Receipts This Page (optional)			C	
Receipt For:       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         Other (specify) ▼       355.00       (\$30.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00		Creative Insurance Concep-		- Payroll Deduction
Other (specify) ▼       355.00       (000.00 Michaely)         SUBTOTAL of Receipts This Page (optional)       200.00		Receipt For:	Aggregate Year-to-Date 🔻	
			355.00	(\$30.00 Monthly)
	ſ	SUBTOTAL of Receipts This Page (ontional)	l	200.00
	┢		-	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 19 / 84         (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HE	EALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial) A. Cheryl S Farmer		Date of Receipt
Mailing Address 56114 C. R. 23		0 6 / <sup>D</sup> D J / <sup>Y</sup> Y Y Y Y 0 6 2 3 2 0 1 1
City	State Zip Code	Transaction ID: 11366-P47320
Bristol	IN 46507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Health Resources Inc.	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
Full Name (Last, First, Middle Initial) 3. Jennifer Liane Farrell		Date of Receipt
Mailing Address 6958 W Juniper Av	ve	0 6 / 2 3 / Y Y Y Y 0 1 1
City	State Zip Code	Transaction ID: 11366-P47321
Peoria	AZ 85382-3999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Black, Gould & Associates	Occupation Sr. Account Executive	<ul> <li>Payroll Deduction</li> </ul>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	(\$40.00 Monthly)
Full Name (Last, First, Middle Initial) Robert Mark Fitzgerald		Date of Receipt
Mailing Address 2842 Landing Way	/	0 6 / D / Y Y Y Y 0 2 3 / 2 0 1 1
City	State Zip Code	Transaction ID: 11366-P47522
Marietta	GA 30066-2362	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Robert Fitzgerald Insuran- ce Agency, I	Occupation Agent	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	(\$30.00 Monthly)
SUBTOTAL of Receipts This Page (option	al)	155.00
	nber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 20 / 84           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERW	RITERS PAC (HUPAC)	
∡ ٩.	Full Name (Last, First, Middle Initial) Linda K. Friedrich			Date of Receipt
	Mailing Address 3011 Crown Pointe Ro	d		0 6 2 3 Y Y Y Y 0 6 2 1 0 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47969
	Lincoln	NE	68506-5168	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer UNICO Financial Services, Inc.	Occupation Agent		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	(\$50.00 Monthly)
- 3.	Full Name (Last, First, Middle Initial) Kelly Don Fristoe			Date of Receipt
	Mailing Address 807 8th St Ste 300			0 6 / 2 3 / Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47701
	Wichita Falls	TX	76301-3317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00 Payroll Deduction
	Name of Employer Financial Partners	Occupation Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 805.00	(\$30.00 Monthly)
- ;.	Full Name (Last, First, Middle Initial) Bruce E. Frizen			Date of Receipt
	Mailing Address 1706 Grayscroft Dr			M         M         /         D         D         /         Y
	City Waxhaw	State NC	Zip Code	Transaction ID: 11366-P47604
	FEC ID number of contributing federal political committee.	C	28173-6678	Amount of Each Receipt this Period 45.00
	Name of Employer Horizon Benefits Consulta- nte Lee	Occupation Agent		Payroll Deduction
	nts, Inc Receipt For: Primary General Other (specify) ▼	1 <sup>1</sup> <sup>2</sup>	Year-to-Date ▼ 255.00	(\$45.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)			125.00

Use segarate schedule(s) TreMZED RECEIPTS           (check only one) (check o		SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 21/84
Think Lib Trial       110 <th></th> <th>· · ·</th> <th colspan="2">. ,</th> <th>(check only one)</th>		· · ·	. ,		(check only one)
Avery information copied from such Reports and Statements may not be sold or used or u					
A.       MationAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)         Full Name (Last, First, Middle Initial)       Mating Address: 38 Cascade Cv         City       State       Zip Code         Petal       MS       39465-5805         FEC ID number of contributing federal political committee       Occupation         Name of Engloyer       Occupation         Name (Last, First, Middle Initial)       Magregate Veen-Date ▼         Optice (repeatify the formary       General         Otive (specify)       State       Zip Code         Partice (specify)       State       Zip Code         Maling Address       3342 Kori Rd       General       General         City       State       Zip Code       Annount of Each Receipt         Maling Address       3342 Kori Rd       Date of Receipt         Gity       State       Zip Code       Annount of Each Receipt         Maling Address       Aggregate Veen-to Date       Nonunt of Each Receipt		Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	Ay not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
A.       Full Name (Last, First, Middle Initial)         Maing Address 36 Cascade Cv       Date of Receipt         City       State       Zip Code         Patal       MS       39465-5805         Receipt For:       Occupation       Payroll Deduction         Pointary       General       Occupation         Primary       General       Occupation         Other (specify) ▼       State       Zip Code         Maing Address       330.00       Payroll Deduction         Partial       MS       39465-5805         Receipt For:       Occupation       Payroll Deduction         Primary       General       Occupation         Other (specify) ▼       General       Occupation         JackSconville       FL       State       Zip Code         JackSconville       FL       32.00       Monthly         Etc ID number of contributing federal policial committice       Occupation       Payroll Deduction         Maing Address       3342 Kori Rd       Occupation       Payroll Deduction         Payroll Deduction       C       Site       Zip Code         JackSconville       FL       Site       Zip Code         Payroll Deduction       Aggregate Year-to-Date <th></th> <th></th> <th></th> <th></th> <th></th>					
A.       Mailing Address       36 Cascade Cv         City       State       Zip Code         Petal       MS       39465-5005         FEC ID number of contributing       C       Amount of Each Receipt this Period         State       Zip Code       Amount of Each Receipt this Period         State       Zip Code       Amount of Each Receipt this Period         Name of Employer       Occupation       Yice President, Advisor         Name of Employer       Aggregate Year-to-Date       (\$30.00 Monthly)         B.       Full Name (Last, First, Middle Initial)       Jacksonville       FL         Jacksonville       FL       32257-883       Payroll Deduction         Period       Aggregate Year-to-Date       State       Zip Code         Name of Employer       Aggregate Year-to-Date       State       Zip Code         Nem of Employer       Aggregate Year-to-Date       State       Zip Code		NATIONAL ASSOCIATION OF HEAL	TH UNDER	WRITERS PAC (HUPAC)	
City     State     Zip Code       Petal     MS     39455-5805       FEC ID number of contributing     C       referred political committee.     C       Name of Employer     General       City     General       City     General       City     State       Date of Receipt       Petal Maing Address     3342 Kori Rd       City     State       Juacksonville     FL       Petal Address     3342 Kori Rd       City     State       Juacksonville     FL       State     Zip Code       Juacksonville     FL       State     Zip Code       Juacksonville     FL       State     Zip Code       Name of Employer     Aggregate Year-to-Date       Quere (specify)     State       Address     3342 Kori Rd       City     State       Jacksonville     FL       State     Zip Code       Namer (specify in framer (specify)     Aggregate Year-to-Date       Perred (specify)     Aggregate Year-to-Date       Perred (specify)     State     Zip Code       Namer (specify)     State     Zip Code       Ornaha     NE     Sigige-40ge       Perred (specify) <th>Α.</th> <th></th> <th></th> <th></th> <th>Date of Receipt</th>	Α.				Date of Receipt
Petal     MS     39465-5805     Amount of Each Receipt this Period       FEC ID number of contributing federal policial committee.     C     Amount of Each Receipt this Period       Name of Employer Stewart Sneed Hewes/Banco- mboard in the Receipt For:     Occupation Vice President, Advisor     Payroll Deduction       Receipt For:     Aggregate Year-to-Date ▼     (\$30.00 Monthly)       B.     Full Name (Last, First, Middle Initial)     Date of Receipt       Jan L Galletta     FL     32257-8833       PEC ID number of contributing federal policial committee.     C       Diff     State     Zip Code       Jacksonville     FL     32257-8833       Perry Insurance, Inc.     Occupation Agent     Payroll Deduction       Name (Last, First, Middle Initial)     Occupation Agent     Payroll Deduction       Primary     General     Occupation Agent     State       Primary     General     Occupation Agent     Payroll Deduction       Name (Last, First, Middle Initial)     State     Zip Code       James 2. Gathina     NE     68136-4038       FEC ID number of contributing federal policial committee.     C     Transaction ID: 11368-P47396       Amount of Each Receipt this Period     State     Zip Code       Name of Engloyer Primary     General     Occupation Agent     Payroll Deduction    <		Mailing Address 36 Cascade Cv			06 23 2011
FEC ID number of contributing Indered political committies.       C       30.00         Payroll Deduction       30.00         Payroll Deduction       Payroll Deduction         Payroll Deduction       9         Payroll Deduction       9 <td< th=""><th></th><th>-</th><th></th><th></th><th></th></td<>		-			
federal political committee.       0.00         Name of Employer Biswart Sneed HeweyBanco- prosouth Insu Receipt For: 		Petal	MS	39465-5805	Amount of Each Receipt this Period
Status of Schedul Flowers Banco- proSouth Insu.       Occupation Primary       Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼       (\$30.00 Monthly)         B.       Full Name (Last, First, Middle Initial) Joan L. Galletta       Date of Receipt         Mailing Address       3342 Kori Rd       Date of Receipt         City       State       Zip Code         Jacksonville       FL       32257-8883         FEC ID number of contributing federal political committee.       Occupation Aggregate Year-to-Date ▼         Name of Employer PP Primary       General       Occupation Aggregate Year-to-Date ▼         Primary       General       Occupation Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼         Primary       General       Occupation Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼         Primary       General       State       Zip Code         James S. Garbina       NE       68136-4038       Amount of Each Receipt this Period         Ctiv       State       Zip Code       Transaction ID: 11368-P47996         Amount of Each Receipt this Period       Each Receipt this Period       State         FeC ID number of contributing federal political committee. <th></th> <th></th> <th>C</th> <th></th> <th></th>			C		
PSouth Insu       Pille President, Advisor         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       485.00         B.       Janes (Last, First, Middle Initial)         JackSonville       FL         FEC ID number of contributing       C         rederify for:       Aggregate Year-to-Date         Name (Last, First, Middle Initial)       Date of Receipt         JackSonville       FL         FEC ID number of contributing       C         rederify For:       Occupation         Aggregate Year-to-Date       V         Name of Employer       State         P Perry Instrance, Inc.       Aggregate Year-to-Date       V         Receipt For:       Aggregate Year-to-Date       V         Other (specify) ▼       State       State       State         C.       Full Name (Last, First, Middle Initial)       Janes S. Garbina       Date of Receipt         Mailing Address       16510 Summit Dr       (\$85.00 Monthly)       Date of Receipt is Period         City       State       Zip Code       Anount of Each Receipt this Period         Mailing Address       16510 Summit Dr       (\$8136-4038       Anount of Each Receipt this Period         Receipt For:       Aggregate Year-to-Date		Name of Employer	Occupatio	on	Payroll Deduction
<sup>indegregation</sup> (\$30.00 Monthly) <sup></sup>		rpSouth Insu	Vice Pre	esident, Advisor	
Other (specify) ▼       485.00         B.       Full Name (Last, First, Middle Initial) Joan L. Galletta       Date of Receipt         Mailing Address       3342 Kori Rd       0         City       State       Zip Code         Jacksonville       FL       32257-883         FEC ID number of contributing federal political committee.       0       0         Name of Employer Primary       General       0       0         Other (specify) ▼       0       510.00       0         C.       Full Name (Last, First, Middle Initial) James S. Garbina       Date of Receipt       0         Mailing Address       16510 Summit Dr       0			Aggregat	e Year-to-Date 🔻	
B.       Joan L. Galietta       Date of Receipt         Mailing Address       3342 Kori Rd       Image: State       Zip Code         Jacksonville       FL       32257-8883       Amount of Each Receipt His Period         FEC ID number of contributing tederal political committee.       C       Amount of Each Receipt His Period         Name of Employer JP Perry Insurance, Inc.       Occupation Agent       Payroll Deduction         Receipt For:       Occupation Agent       State       State         Other (specify) ▼       State       Zip Code       State of Receipt         C.       James S. Garbina       Date of Receipt       State of Receipt         Mailing Address       16510 Summit Dr       State       Zip Code         City       State       Zip Code       Amount of Each Receipt His Period         Mailing Address       16510 Summit Dr       State       Zip Code         Omaha       NE       68136-4038       Amount of Each Receipt His Period         FEC ID number of contributing televal political committee.       Aggregate Year-to-Date ▼       Payroll Deduction         Name of Employer       Aggregate Year-to-Date ▼       State       State       State         Name of Employer       Aggregate Year-to-Date ▼       State       State       State			0 0	485.00	(\$30.00 Monthly)
City       State       Zip Code         JackSonville       FL       32257-8883         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer JP Perry Insurance, Inc.       Occupation Agent       Payroll Deduction         Receipt For:       Occupation Aggregate Year-to-Date ▼       (\$85.00 Monthly)         C.       James S. Garbina       James S. Garbina         Mailing Address       16510 Summit Dr       (\$85.00 Monthly)         City       State       Zip Code Omaha       Date of Receipt         FEC ID number of contributing federal political committee.       C       Transaction ID: 11368-P47996         Mailing Address       16510 Summit Dr       Transaction ID: 11368-P47996         Ornaha       NE       68136-4038         FEC ID number of contributing federal political committee.       C       Transaction ID: 11368-P47996         Name of Employeer Hary A, Koch Co.       Occupation Agent       Payroll Deduction         Name of Employeer Primary       General       State       Zip Code         Mairy G. Koch Co.       Aggregate Year-to-Date       (\$85.00 Monthly)         SubtrotAL of Receipts This Page (optional)       510.00       (\$85.00 Monthly) <th>- В.</th> <th></th> <th></th> <th></th> <th>Date of Receipt</th>	- В.				Date of Receipt
Jacksonville       FL       32257-8883       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       85.00         Name of Employer performance, Inc.       Occupation Agent       Payroll Deduction         Receipt For:       Occupation Agent       (\$85.00 Monthly)         C.       Full Name (Last, First, Middle Initial) James S. Garbina       Date of Receipt         Mailing Address       16510 Summit Dr       (\$85.00 Monthly)         City       State       Zip Code         Omaha       NE       68136-4038         FEC ID number of contributing federal political committee.       C         Mailing Address       16510 Summit Dr       0         City       State       Zip Code         Omaha       NE       68136-4038         FEC ID number of contributing federal political committee.       C         Name of Employer Other (specify) ▼       Aggregate Year-to-Date ▼       Payroll Deduction         Aggregate Year-to-Date       State       \$10.00       \$85.00 Monthly)         SubtrottaL of Receipts This Page (optional)       \$10.00       \$85.00 Monthly)       \$200.00		Mailing Address 3342 Kori Rd			
FEC ID number of contributing federal political committee.       C       85.00         Name of Employer JP Perry Insurance, Inc.       Occupation Agent       Payroll Deduction         Receipt For: D Other (specify) ♥       Aggregate Year-to-Date ♥       (\$85.00 Monthly)         C.       Full Name (Last, First, Middle Initial) James S. Garbina       Date of Receipt         Mailing Address       16510 Summit Dr       06       23       2.0.1.1         City       State       Zip Code       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation Agent       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation Agent       Aggregate Year-to-Date ♥       Payroll Deduction         Name of Employer Harry A. Koch Co.       Occupation Agent       Aggregate Year-to-Date ♥       (\$85.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       510.00       (\$85.00 Monthly)				Zip Code	Transaction ID: 11366-P47126
federal political committee.       C       0 <t< th=""><th></th><th>Jacksonville</th><th>FL</th><th>32257-8883</th><th>Amount of Each Receipt this Period</th></t<>		Jacksonville	FL	32257-8883	Amount of Each Receipt this Period
JP Perry Instrance, Inc.       Agent         Agent       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       510.00         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         Agent       Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       C			C		
Primary       General         Other (specify) ▼       510.00         James S. Garbina       Date of Receipt         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 Harry A. Koch Co.       Occupation Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       510.00		Name of Employer JP Perry Insurance, Inc.	· · ·	n	Payroll Deduction
Other (specify) ▼       510.00       (\$85.00 Moltility)         Full Name (Last, First, Middle Initial) James S. Garbina       Date of Receipt         Mailing Address       16510 Summit Dr       Date of Receipt         City       State       Zip Code         Omaha       NE       68136-4038         FEC ID number of contributing federal political committee.       C       85.00         Name of Employer       Occupation Agent       Payroll Deduction         Receipt For:       Other (specify) ▼       (\$85.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       510.00       200.00			Aggregat	e Year-to-Date 🔻	
C.       James S. Garbina       Date of Receipt         Mailing Address       16510 Summit Dr       0 6 2 3 2 0 1 1         City       State       Zip Code         Omaha       NE       68136-4038         FEC ID number of contributing tederal political committee.       C       Amount of Each Receipt this Period         Name of Employer       Occupation       Agent       85.00         Receipt For:       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       510.00       (\$85.00 Monthly)			0 0	510.00	(\$85.00 Monthly)
City       State       Zip Code         Omaha       NE       68136-4038         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer       Occupation       85.00         Harry A. Koch Co.       Agent       Primary         Primary       General       510.00       (\$85.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       1000       200.00	- C.		I		Date of Receipt
Omaha       NE       68136-4038       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       85.00         Name of Employer Harry A. Koch Co.       Occupation Agent       Payroll Deduction         Receipt For:       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         Other (specify) ▼       510.00       \$85.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       L       200.00		Mailing Address 16510 Summit Dr			
FEC ID number of contributing federal political committee.       C       85.00         Name of Employer Harry A. Koch Co.       Occupation Agent       Payroll Deduction         Receipt For:       Aggregate Year-to-Date ▼       (\$85.00 Monthly)         Other (specify) ▼       510.00       (\$85.00 Monthly)         SUBTOTAL of Receipts This Page (optional)       200.00		-		•	
federal political committee.       0         Name of Employer       Occupation         Harry A. Koch Co.       Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       510.00         SUBTOTAL of Receipts This Page (optional)       200.00			NE	68136-4038	Amount of Each Receipt this Period
Name of Employer Harry A. Koch Co.     Occupation Agent       Receipt For: Primary     Aggregate Year-to-Date ▼       Other (specify) ▼     510.00       SUBTOTAL of Receipts This Page (optional)			C		
Primary       General         Other (specify) ▼       510.00         SUBTOTAL of Receipts This Page (optional)       1		Name of Employer Harry A. Koch Co.		n	Payroll Deduction
Other (specify) ▼     510.00     (\$00.00 Working)       SUBTOTAL of Receipts This Page (optional)     200.00			Aggregate	e Year-to-Date 🔻	(#05.00 Marship)
			0 0	510.00	
	ſ	SUBTOTAL of Receipts This Page (optional)			200.00
TOTAL This Period (last page this line number only)	ŀ				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 22 / 84           (check only one)
	Any information copied from such Reports and s or for commercial purposes, other than using th	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
∠ 4.	Full Name (Last, First, Middle Initial) Joy K. Gardner			Date of Receipt
	Mailing Address 10605 Sterling Ridge	Way		M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47997
	Reno	NV	89521-5199	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Comstock Insurance Agenci-	Occupatio	n	Payroll Deduction
	es, Inc. Receipt For:	Agent	e Year-to-Date 🔻	-
	Primary General Other (specify) $ earrow$		390.00	(\$40.00 Monthly)
 3.	Full Name (Last, First, Middle Initial) Charles T. Gartlan			Date of Receipt
•	Mailing Address 19 Tarworth Ter			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47323
	Manchester	NJ	08759-6671	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00 Payroll Deduction
	Name of Employer Emerson, Reid & Co.	Occupatio Agent	n	
	Receipt For: Primary General Other (specify) ▼	-1 <sup>+</sup>	e Year-to-Date V 600.00	(\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) James David Gibson			Date of Receipt
•	Mailing Address 93 Hollenbeck Rd			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47153
	Irmo	SC	29063-8076	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		170.00
	Name of Employer Gibson & Associates, Inc.	Occupatio Agent	n	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 850.00	(\$170.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional).			310.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 23 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEALT	TH UNDERWRITERS PAC (HUPAC)	
۷ A.	Full Name (Last, First, Middle Initial) Michael Gibson		Date of Receipt
	Mailing Address 308 Beulah Ln		0 6 / <sup>D</sup> D / <u>Y</u> Y Y Y 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47508
	Irmo	SC 29063-9573	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Gibson & Associates	Occupation Agent	Payroll Deduction
	Receipt For:	Aggregate Year-to-Date V	1
	Primary General Other (specify) ▼	510.00	(\$85.00 Monthly)
– В.	Full Name (Last, First, Middle Initial) Richard R Girdler	l	Date of Receipt
	Mailing Address 400 Sims Ln		0 6 / <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>Y</sup>
	City	State Zip Code	Transaction ID: 11366-P47541
	Franklin	TN 37069-1890	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Cowan Benefit Services	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	Aggregate Year-to-Date V	_
	Primary     General       Other (specify)     ▼	660.00	(\$85.00 Monthly)
– C.	Full Name (Last, First, Middle Initial) Patrice Goldfarb	1	Date of Receipt
	Mailing Address 442 Teaneck Rd		
	City	State Zip Code	Transaction ID: 11366-P47327
	Ridgefield Park	NJ 07660-1516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer The Employee Benefits Adv- isors Group	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary     General       Other (specify) ▼	360.00	(\$60.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	·····	230.00
	TOTAL This Period (last page this line number		

A. F C C C C C C C C C C C C C	information copied from such Reports and r commercial purposes, other than using the IAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA Full Name (Last, First, Middle Initial) Michael D. Gray Mailing Address 8230 Rockledge Roa Dity Lincoln EC ID number of contributing ederal political committee. Name of Employer The Harry A. Koch Company Receipt For: Primary General Other (specify) ♥	Intername and add LTH UNDERV Id #123 State NE C Occupation Agent	dress of any political committee to VRITERS PAC (HUPAC) Zip Code 68506-7519	Date of Receipt M M / D D / Y Y Y Y 0 6 / D D / Y Y Y Y Transaction ID: 11368-P47977 Amount of Each Receipt this Period 100.00 Payroll Deduction
A. F F F f f	JAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEA Full Name (Last, First, Middle Initial) Michael D. Gray Mailing Address 8230 Rockledge Roa City Lincoln EEC ID number of contributing ederal political committee.	LTH UNDERV d #123 State NE C Occupation Agent	VRITERS PAC (HUPAC) Zip Code 68506-7519	Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 1 Transaction ID: 11368-P47977 Amount of Each Receipt this Period 100.00
<b>Α.</b> <u>Μ</u> Ο Ε	Michael D. Gray Mailing Address 8230 Rockledge Roa Dity Lincoln EEC ID number of contributing ederal political committee. Vame of Employer The Harry A. Koch Company Receipt For: Primary General	State NE C Occupation Agent	68506-7519	M         M         /         D         D         /         Y
C L F fr	City Lincoln EC ID number of contributing ederal political committee. Jame of Employer The Harry A. Koch Company Receipt For: Primary General	State NE C Occupation Agent	68506-7519	0 6         2 3         2 0 1 1           Transaction ID: 11368-P47977           Amount of Each Receipt this Period           100.00
<u>ן</u> די די די	EC ID number of contributing ederal political committee.	NE C Occupation Agent	68506-7519	Transaction ID: 11368-P47977 Amount of Each Receipt this Period 100.00
- F f N 7	EC ID number of contributing ederal political committee.	C Occupation Agent		100.00
fo  	ederal political committee. Jame of Employer The Harry A. Koch Company Receipt For: Primary General	Occupation Agent	n	
_	Receipt For:	Agent	n	Payroll Deduction
F	Primary General			1
	Other (specify) 🖝		Year-to-Date ▼ 600.00	(\$100.00 Monthly)
				1
	Full Name (Last, First, Middle Initial) Patricia A Griffey			Date of Receipt
	Aailing Address 56294 Primrose Cir			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47326
-	Elkhart EC ID number of contributing	IN	46516-1509	Amount of Each Receipt this Period
	ederal political committee.	C		85.00
N F	lame of Employer Page 1 Benefits, Inc.	Occupation Agent	n	Payroll Deduction
F	Receipt For: Primary General Other (specify) ▼	· _ ~	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) I.B. Gross			Date of Receipt
-	Aailing Address 331 Clear Lake Ln			0 6 2 3 2 0 1 1
	Dity	State	Zip Code	Transaction ID: 11366-P47483
-	Neatherford EC ID number of contributing	TX	76087-9173	Amount of Each Receipt this Period
	ederal political committee.	C		85.00
N	lame of Employer J. B. Gross Insurance	Occupation Agent	n	Payroll Deduction
F	Receipt For: Primary General Other (specify) ▼	Ŭ	Year-to-Date <b>V</b> 510.00	(\$85.00 Monthly)
SU	BTOTAL of Receipts This Page (optional)		••••••	270.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 25 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports or for commercial purposes, other than usir	and Statements may not be sold or used by any person ng the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF H	EALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 331 Clear Lake Lr	1	0 6 / D D / Y Y Y Y 2 3 2 0 1 1
City	State Zip Code	Transaction ID: 11366-P47484
Weatherford	TX 76087-9173	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer J. B. Gross Insurance	Occupation Agent	Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	1
Primary     General       Other (specify) ▼	510.00	(\$85.00 Monthly)
Full Name (Last, First, Middle Initial) Robert A Grundman	I	Date of Receipt
Mailing Address 7412 Karl Dr		M M / D D / Y Y Y Y 06 23 2011
City	State Zip Code	Transaction ID: 11368-P47947
Lincoln	NE 68516-4368	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Senior Benefit Strategies	Occupation Agent	- Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	-
Primary     General       Other (specify) ▼	300.00	(\$50.00 Monthly)
Full Name (Last, First, Middle Initial) Craig G. Gussin		Date of Receipt
Mailing Address 843 Summersong	Ct	0 6 2 3 2 0 1 1
City	State Zip Code	Transaction ID: 11366-P47231
Encinitas	CA 92024-5447	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Auerbach & Gussin Insuran- ce and Finan	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	(\$85.00 Monthly)
SURTOTAL of Receipts This Page (aption	nal)	220.00
	mber only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 26 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       16
	r for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
~	Full Name (Last, First, Middle Initial) Teresa C. Gutierrez		Date of Receipt
	Mailing Address 12833 Riverdance Dr		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11366-P47518
	Raleigh FEC ID number of contributing federal political committee.	NC 27613-7093	Amount of Each Receipt this Period 85.00
	Name of Employer IBS/White Bear Group	Occupation	Payroll Deduction
	Receipt For: Primary General Other (specify)	Agent Aggregate Year-to-Date ▼ 290.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Christopher S. Harrison Mailing Address 921-C S McPherson C	Church Rd	Date of Receipt
	City	06 23 2011	
	Favetteville	State Zip Code NC 28303-5368	Transaction ID: 11366-P47097 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		410.00
	Name of Employer Ebenconcepts Company	Occupation President	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2460.00	(\$410.00 Monthly)
_	Full Name (Last, First, Middle Initial) Gerald G Hartman	1	Date of Receipt
	Mailing Address 3822 Gemini Cir		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11366-P47332
	Boise FEC ID number of contributing federal political committee.	ID 83709-4834	Amount of Each Receipt this Period
	Name of Employer Insurance Network America Inc	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	(\$50.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	·	545.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 27 / 84			
			Use separate schedule(s) for each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma name and ad	Ay not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions			
1	NAME OF COMMITTEE (In Full)	NAME OF COMMITTEE (In Full)					
	> NATIONAL ASSOCIATION OF HEALT	H UNDER	WRITERS PAC (HUPAC)				
Α.	Full Name (Last, First, Middle Initial) Matthew F. Hatfield			Date of Receipt			
	Mailing Address 2207 Springfield Ave			0 6 2 3 2 0 1 1			
	City	State	Zip Code	Transaction ID: 11366-P47487			
	Fort Wayne	IN	46805-1541	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		40.00			
	Name of Employer Self	Occupatio		Payroll Deduction			
		-	epresentative				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	(\$40.00 Marshbb)			
	Other (specify) ▼	0 0	240.00	(\$40.00 Monthly)			
В.	Full Name (Last, First, Middle Initial) Hedy S Hebert			Date of Receipt			
	Mailing Address 4816 Woodberry Ln			M M / D D / Y Y Y Y 06 23 2011			
	City	State	Zip Code	Transaction ID: 11366-P47526			
	Benton	LA	71006-9361	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Benefit Consulting Servic- es	Occupation Agent	n	Payroll Deduction			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	720.00	(\$30.00 Monthly)			
с.	Full Name (Last, First, Middle Initial) Dan M. Heffley			Date of Receipt			
	Mailing Address PO Box 50031			M M / D D / Y Y Y Y 06 23 2011			
	City	State	Zip Code	Transaction ID: 11366-P47608			
	Henderson	NV	89016-	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		10.00			
	Name of Employer Employer Benefit Source,I- nc.	Occupation Agent	n	Payroll Deduction			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	235.00	(\$10.00 Monthly)			
	SUBTOTAL of Receipts This Page (optional)			80.00			
	TOTAL This Period (last page this line number of	лпу)					

SCHEDULE A (FEC For ITEMIZED RECEIPTS	<b>THE SET USE</b> Separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $28 / 84$ (check only one)(check only one)X11a11b1314151617on for the purpose of soliciting contributions
or for commercial purposes, other that NAME OF COMMITTEE (In Full)	DF HEALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle Initia A. John Heinz	al)	Date of Receipt
Mailing Address 413 Roslyn F	Rd	0 6 2 3 Y Y Y Y 0 1 1
City	State Zip Code	Transaction ID: 11366-P47543
Dundee	IL 60118-1024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer INSource Benefits Consult- ants	Occupation President	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	(\$20.00 Monthly)
Full Name (Last, First, Middle Initia B. Timothy Hendricks	al)	Date of Receipt
Mailing Address 1605 S Euca		06 / 23 / Y Y Y Y 011 / 2011
City	State Zip Code	Transaction ID: 11368-P47780
Broken Arrow FEC ID number of contributing federal political committee.	OK 74012-5995	Amount of Each Receipt this Period
Name of Employer Business Planning Group Of OK	Occupation Agent	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	(\$100.00 Monthly)
Full Name (Last, First, Middle Initia C. Thomas L. Henry	al)	Date of Receipt
Mailing Address 19310 Sonor	na Hwy Ste A	M M         /         D D         Y         Y Y         Y </td
City	State Zip Code	Transaction ID: 11366-P47121
Sonoma FEC ID number of contributing federal political committee.	CA 95476-5454	Amount of Each Receipt this Period 85.00
Name of Employer RealCare Insurance Market- ing. Inc. Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 510.00	Payroll Deduction (\$85.00 Monthly)
SUBTOTAL of Receipts This Page	(optional)	205.00
	ine number only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 29 / 84           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			
. Z	Full Name (Last, First, Middle Initial) William S. Hepscher			Date of Receipt
	Mailing Address 38176 Medical Center	Ave		0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47252
	Zephyrhills	FL	33540-1380	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer The Canadian Drugstore	Occupatio	n	Payroll Deduction
	Receipt For:	Agent Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼		455.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Jimmy C Hinson			Date of Receipt
	Mailing Address 4951 Forsyth Rd			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47733
	Macon	GA	31210-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer BB&T Insurance Services, Inc.	Occupatio Agent	n	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 210.00	(\$10.00 Monthly)
	Full Name (Last, First, Middle Initial) Al Hombroek			Date of Receipt
	Mailing Address 1185 Montclair Way			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47436
	Snellville	GA	30078-7327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Multiple Benefits Corpora- tion	Occupatio Agent	n	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date <b>V</b> 550.00	(\$100.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		195.00

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 30 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         16
А 0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
~	Full Name (Last, First, Middle Initial) Kymberly J. Hopwood			Date of Receipt
	Mailing Address 1955 Las Colinas Dr			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47491
	Brentwood	CA	94513-6601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Dealey, Renton & Associat-		n Executive	Payroll Deduction
	es Receipt For:	- 1 · · · · · · · · · · · · · · · · · ·	Year-to-Date V	
	Primary General Other (specify) ▼		340.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) David L Hunt			Date of Receipt
	Mailing Address 110 Mallard Ln			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47952
	Madison	MS	39110-8799	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		35.00
	Name of Employer Hunt Insurance Agency	Occupation Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.00	(\$35.00 Monthly)
	Full Name (Last, First, Middle Initial)			Dete of Descipt
	Julia A. Jennings Mailing Address 2 Lady Slipper Ln			Date of Receipt
	City	State	Zip Code	0 6 2 3 2 0 1 1 Transaction ID: 11366-P47348
	Marion	MA	02738-1294	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Sylvia & Co. Ins. Agency, Inc.	Occupation Vice Pres	n sident, Employee Benef	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date V 635.00	(\$85.00 Monthly)
	SUBTOTAL of Receipts This Page (optional).	1		205.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 31 / 84           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			
. Z	Full Name (Last, First, Middle Initial) Arthur C. Jetter			Date of Receipt
	Mailing Address 13624 Parker Cir			M M / D D / Y Y Y Y 06 13 2011
	City	State	Zip Code	Transaction ID: 11342
	<u>Omaha</u>	NE	68154-3829	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer Art Jetter & Company	Occupatio FLMI, LT		
	Receipt For: Primary General Other (specify) ▼	Aggregate	• Year-to-Date <b>V</b> 5000.00	]
_	Full Name (Last, First, Middle Initial) David S Johnson			Date of Receipt
	Mailing Address 1482 Baron Ct	0 6 / D D / Y Y Y Y 0 6 2 3 2 0 1 1		
	City	State	Zip Code	Transaction ID: 11366-P47494
	Stone Mountain	GA	30087-3037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		180.00
	Name of Employer David S. Johnson Insurance	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1070.00	(\$180.00 Monthly)
_	Full Name (Last, First, Middle Initial) Suzanne K. Johnson			Date of Receipt
	Mailing Address 6235 Morrison Blvd St	e 302		0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47778
	Charlotte	NC	28211-3508	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Strategic Employee Benefit Services	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	(\$40.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			5220.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 32 / 84           (check only one)
A o	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			
. Z	Full Name (Last, First, Middle Initial) George R Keeling			Date of Receipt
	Mailing Address 1875 N Highway 385			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47956
	Levelland	ТХ	79336-9493	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer George R. Keeling Insuran-	Occupatio	n	Payroll Deduction
	ce Agency Receipt For:	Agent	e Year-to-Date ▼	_
	Primary   General     Other (specify) ▼		510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Dianne M. Kelley			Date of Receipt
	Mailing Address 7320 N La Cholla Blvd	1		M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P48013
	Tucson	AZ	85741-2309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Sandbrook Business Benefi- ts Group	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	PYear-to-Date 260.00	(\$50.00 Monthly)
	Full Name (Last, First, Middle Initial) Tamara P Kennedy			Date of Receipt
	Mailing Address 9414 E Sera Brisa			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47150
	Scottsdale	AZ	85255-6054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Rogers Benefit Group, Inc.	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	1 <sup>1</sup> <sup>2</sup>	Year-to-Date ▼ 1085.00	(\$200.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	I		335.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 33 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       11
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may r	not be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERW	RITERS PAC (HUPAC)	
∠ 4.	Full Name (Last, First, Middle Initial) Laurie J Kirkland			Date of Receipt
	Mailing Address 6601 Glacier Ct			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47305
	Yakima FEC ID number of contributing federal political committee.	C	98908-2382	Amount of Each Receipt this Period 85.00
	Name of Employer Conover Insurance, Inc.	Occupation Agent		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	- <b>I</b> - <sup>©</sup>	/ear-to-Date ▼ 510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Linda Rose Koehler	1		Date of Receipt
	Mailing Address 516 Shelley St			06 / D / Y Y Y Y 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47938
	Livermore FEC ID number of contributing federal political committee.	CA	94550-2368	Amount of Each Receipt this Period 85.00
	Name of Employer Herzog Insurance Agency		nefits Insurance Specialist	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Mark Kolterman	I		Date of Receipt
	Mailing Address PO Box 426			0 6 / D D / Y Y Y Y 0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47124
	Seward FEC ID number of contributing federal political committee.	C	68434-0426	Amount of Each Receipt this Period
	Name of Employer Kolterman Agency, Inc.	Occupation Agent		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 210.00	(\$35.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		205.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	
ہ د	Any information copied from such Reports and s r for commercial purposes, other than using th	Statements may not be sold or used by any p	13     14     15     16       berson for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL		
. Z	Full Name (Last, First, Middle Initial) Susanne Kolterman		Date of Receipt
	Mailing Address PO Box 426		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11368-P48014
	Seward FEC ID number of contributing federal political committee.	NE 68434-0426	Amount of Each Receipt this Period 50.00
	Name of Employer Kolterman Agency, Inc.	Occupation	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Agent Aggregate Year-to-Date ▼ 300.00	(\$50.00 Monthly)
	Full Name (Last, First, Middle Initial) Mary B. Kramer		Date of Receipt
	Mailing Address 2120 Nelsons Creek	0 6 2 3 Y Y Y Y 0 1 1	
	City	State Zip Code	Transaction ID: 11368-P47834
	Omaha FEC ID number of contributing federal political committee.	NE 68116-5135	Amount of Each Receipt this Period 40.00
	Name of Employer Holmes Murphy and Associa- tes. Inc.	Occupation Vice President	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	(\$40.00 Monthly)
_	Full Name (Last, First, Middle Initial) Daniel C LaBroad	<b>I</b>	Date of Receipt
	Mailing Address 710 Farmers Market V	Vay	0 6 / D D / Y Y Y Y 0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47457
	Dallas FEC ID number of contributing federal political committee.	TX 75201-8451	Amount of Each Receipt this Period 85.00
	Name of Employer Ovation Health & Life Ser- vices, Inc.	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1	175.00

ITE	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 35 / 84         (check only one)       11c       12         X       11a       11b       11c       12         13       14       15       16       17         son for the purpose of soliciting contributions       17		
or f	ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r 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)					
	Full Name (Last, First, Middle Initial) Andrew M. LaRocco	Date of Receipt				
	Mailing Address 84 Dartmouth Ave	M M / D D / Y Y Y Y 06 23 2011				
-	City	State Zip Code				
	Avondale Estates	GA	30002-1410	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		40.00		
-	Name of Employer The LaRocco Companies	Occupation Presiden		Payroll Deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	(\$40.00 Monthly)		
<b>3.</b>	Full Name (Last, First, Middle Initial) Emma S Leigh			Date of Receipt		
	Mailing Address 5101 Peachtree Rd			0 6 / 2 3 / Y Y Y Y 2 0 1 1		
	City	State	Zip Code	Transaction ID: 11366-P47143		
	Atlanta FEC ID number of contributing federal political committee.	GA	30341-2715	Amount of Each Receipt this Period 50.00		
Ī	Name of Employer Alliant Health Systems	Occupation	n s Executive	Payroll Deduction		
-	Receipt For: Primary General Other (specify) ▼	1 1	a Year-to-Date ▼ 375.00	(\$50.00 Monthly)		
	Full Name (Last, First, Middle Initial) Karen B. Leonard			Date of Receipt		
	Mailing Address 8 Shakespeare Rd			0 6 / D / Y Y Y Y 0 1 1		
	City	State	Zip Code	Transaction ID: 11366-P47586		
	Hackettstown	NJ	07840-4707	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		85.00		
	Name of Employer Leonard Financial Group, LLC	Occupation Agent		Payroll Deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 510.00	(\$85.00 Monthly)		
				175.00		

ç	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 36 / 84
			Use separate schedule(s) for each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	> NATIONAL ASSOCIATION OF HEAL	TH UNDER	VRITERS PAC (HUPAC)	
۹.	Full Name (Last, First, Middle Initial) Robert M. Lindsay	Date of Receipt		
	Mailing Address 220 Emerson Pl	M · M         /         D · D         Y         Y · Y · Y         Y           0 6         2 3         2 0 1 1		
	City	State	Zip Code	Transaction ID: 11366-P47612
	Davenport	IA	52801-1624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Trissel Graham & Toodle	Occupatio Agent	n	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	1 <b>- - -</b>	e Year-to-Date 🔻	-
	PrimaryGeneralOther (specify)		340.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial)			
3.	Juan R. Lopez			Date of Receipt
	Mailing Address 27 Banstead			0 6 / D D / Y Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47460
	Trabuco Canyon	CA	92679-3740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Kaiser Permanente	Occupatio Manager		<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	1 · · · · · ·	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	510.00	(\$85.00 Monthly)
-	Full Name (Last, First, Middle Initial) Kate Ludwigson			Date of Receipt
•	Mailing Address 4274 Mill Ridge Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	06 23 2011
	Eau Claire	WI	54703-	Transaction ID: 11366-P47309 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer Area Financial Services	Occupatio Agent	n	Payroll Deduction
	Inc. Receipt For:	1	e Year-to-Date 🔻	1
	Primary     General       Other (specify) ▼		210.00	(\$10.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		180.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 37 / 84           (check only one)         X           X         11a           11b         11c           12         13           14         15
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not not not statements may not statement and address and address and address and statements an	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAD	LTH UNDERWR	ITERS PAC (HUPAC)	
.∠	Full Name (Last, First, Middle Initial) Joseph L Lunenschloss			Date of Receipt
	Mailing Address 1976 Willeo Creek Pt	0 6 2 3 2 0 1 1		
	City	State	Zip Code	Transaction ID: 11366-P47310
	Marietta	GA	30068-1554	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Digital Insurance, Inc.	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Agent Aggregate Ye	ear-to-Date 225.00	(\$25.00 Monthly)
_	Full Name (Last, First, Middle Initial) Maurice Lyons			Date of Receipt
	Mailing Address 301 Madison Ave Fl	M         M         /         D         D         /         Y		
	City	State	Zip Code	Transaction ID: 11366-P47226
	New York	NY	10017-8103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00 Payroll Deduction
	Name of Employer The Medical Link, Inc.	Occupation President		
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1625.00	(\$250.00 Monthly)
	Full Name (Last, First, Middle Initial) Jim Malone			Date of Receipt
	Mailing Address 124 Main Ave N			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47123
	Fayetteville FEC ID number of contributing	TN	37334-3056	Amount of Each Receipt this Period
	federal political committee.	C		30.00
	Name of Employer The Malone Company	Occupation President		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date 🛡 660.00	(\$30.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			305.00

S	CHEDULE A (FEC Form 3)		FOR LINE NUMBER: PAGE 38 / 84
	•	Use separate schedule(s) for each category of the	(check only one)
	<b>TEMIZED RECEIPTS</b>	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 1
A	ny information copied from such Reports an	d Statements may not be sold or used by any persor	n for the purpose of soliciting contributions
0	r for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
$\nabla$	NAME OF COMMITTEE (In Full)		
	NATIONAL ASSOCIATION OF HE	ALTH UNDERWRITERS PAC (HUPAC)	
~	Full Name (Last, First, Middle Initial)		
۱.	Kimberly C. Martin		Date of Receipt
	Mailing Address 6 Rasada Dr		06 23 2011
	City	State Zip Code	Transaction ID: 11368-P47835
	Weaverville	NC 28787-9306	
	weaverville	NC 28787-9306	Amount of Each Receipt this Period
	FEC ID number of contributing	C	40.00
	federal political committee.		
	Name of Employer	Occupation	Payroll Deduction
	Ebenconcepts	Agent	
	Receipt For:	Aggregate Year-to-Date V	-
	Primary General		(\$40.00 Monthly)
	Other (specify)	240.00	
	Full Name (Last, First, Middle Initial)		
3_	Matthew L. Masone		Date of Receipt
	Mailing Address 367 Sheffield Rd		M M / D D / Y Y Y
			06 23 2011
	City	State Zip Code	Transaction ID: 11366-P47448
	Severna Park	MD 21146-1647	Amount of Each Receipt this Period
	FEC ID number of contributing		45.00
	federal political committee.	C	45.00
			Payroll Deduction
	Name of Employer Lincoln Financial Group	Occupation	
	-	Agent	_
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General	270.00	(\$45.00 Monthly)
	Other (specify)		
_			
	Full Name (Last, First, Middle Initial) Michael E. Matznick		Date of Receipt
•		+	- '
	Mailing Address 3207 Cottingham C	l	0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47462
	Greensboro	NC 27410-8362	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer	Occupation	Payroll Deduction
	EbenConcepts Company	Agent	
	Receipt For:	Aggregate Year-to-Date ▼	1
			(\$85.00 Monthly)
	Primary General		
	Primary General Other (specify) ▼	510.00	
		510.00	
Г		510.00	
	Other (specify)	)	170.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 39 / 84           (check only one)         X           X         11a           11b         11c           12         13           14         15           16         17
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions	
	/	LTH UNDERWRITERS PAC (HUPAC)	
Α.	Full Name (Last, First, Middle Initial) H. Luke McDermott		Date of Receipt
	Mailing Address 1044 Park Palisade I	Dr	0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47312
	South Jordan	UT 84095-2229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer McDermott Company & Assoc- iates	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) $\bigtriangledown$	Aggregate Year-to-Date ▼ 300.00	(\$50.00 Monthly)
- B.	Full Name (Last, First, Middle Initial) Susan Marie McGinnis		Date of Receipt
	Mailing Address 9905 S Maplewood A	0 6 2 2 2 2 1 1	
	City	State Zip Code	Transaction ID: 11360
	Tulsa	OK 74137-5534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer BenEx Insurance Agency	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
- C.	Full Name (Last, First, Middle Initial) Susan Marie McGinnis		Date of Receipt
	Mailing Address 9905 S Maplewood A	lve	M M / D D / Y Y Y Y 06 / 23 / 2011
	City	State Zip Code	Transaction ID: 11368-P47914
	Tulsa	OK 74137-5534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00 Payroll Deduction
	Name of Employer BenEx Insurance Agency	Occupation Vice President	
	Receipt For: Primary General Other (specify) $rightarrow$	Aggregate Year-to-Date ▼ 1330.00	(\$30.00 Monthly)
Γ			110.00

	<b>I</b>					
SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 84				
	for each category of the	(check only one)				
	Detailed Summary Page	X 11a 11b 11c 12				
		13 14 15 16 17				
	ny information copied from such Reports and Statements may not be sold or used by any perso r for commercial purposes, other than using the name and address of any political committee to					
NAME OF COMMITTEE (In Full)						
NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)					
Full Name (Last, First, Middle Initial) Ward McKalson		Date of Receipt				
Mailing Address 22365 Ferdinand Ct		M M / D D / Y Y Y Y 06 23 2011				
City	State Zip Code	Transaction ID: 11366-P47453				
Salinas	CA 93908-1106	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		85.00				
Name of Employer Leavitt Central Coast Ins-	Occupation	Payroll Deduction				
Leavitt Centr'al Coast Ins- urance Servi	Agent					
Receipt For:	Aggregate Year-to-Date V					
Primary General		(\$85.00 Monthly)				
Other (specify)	510.00					
Full Name (Last, First, Middle Initial) Keith H. McNeil						
City	State Zip Code	06232011 Transaction ID: 11366-P47461				
Novato	CA 94945-3249	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		100.00				
Name of Employer Elite Brokerage Services,	Occupation	Payroll Deduction				
Elite Brokerage Services, Inc.	Agent					
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify) ▼	500.00	(\$100.00 Monthly)				
Full Name (Last, First, Middle Initial)						
Griffin L. Meredith		Date of Receipt				
Mailing Address 2518 Wendell Ave		06 23 Y Y Y Y 06 23 2011				
City	State Zip Code	Transaction ID: 11366-P47303				
Louisville	KY 40205-3012	Amount of Each Receipt this Period				
FEC ID number of contributing						
federal political committee.		85.00				
Name of Employer FSAB Benefits	Occupation Insurance Broker	<ul> <li>Payroll Deduction</li> </ul>				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General		(\$85.00 Monthly)				
Other (specify)						
	1	270.00				
Primary General	340.00	(\$85.00 Monthly) 270.00				

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 84 (check only one)
	ITEMIZED RECEIPTS		for each category of the	X 11a $11b$ 11c $12$
			Detailed Summary Page	
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma ne name and ad	y not be sold or used by any persol dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	> NATIONAL ASSOCIATION OF HEAI	LTH UNDER\	WRITERS PAC (HUPAC)	
Α.	Full Name (Last, First, Middle Initial) Dennis F. Mobley			Date of Receipt
	Mailing Address 459 Pimlico Pl			$\begin{array}{c c} M & M \\ 0 & 6 \end{array} \begin{array}{c} D & D \\ 2 & 3 \end{array} \begin{array}{c} Y & Y \\ 2 & 0 & 1 & 1 \end{array}$
	City	State	Zip Code	Transaction ID: 11368-P47837
	Jackson	MS	39211-4030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer	Occupatio	n	Payroll Deduction
	Mobley Insurance Agency, LLC	Office M	anager	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		300.00	(\$50.00 Monthly)
_	Other (specify)	0 0		
Р	Full Name (Last, First, Middle Initial)			Data of Dessint
В.	Sandra V Mobley Mailing Address 5454   55 N Ste B			Date of Receipt
				06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47705
	Jackson	MS	39211-4027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Sandra Mobley Agency LLC	Occupatio Agent	on	Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		300.00	(\$50.00 Monthly)
- C.	Full Name (Last, First, Middle Initial) David R. Moore			Date of Receipt
0.	Mailing Address 605 Truitt Dr			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47936
	Elon	NC	27244-9262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer David R. Moore, CLU & Ass- ociates	Occupatio Agent	pn	Payroll Deduction
	Receipt For:	1 1 -	e Year-to-Date 🔻	1
	Primary General Other (specify) ▼		510.00	(\$85.00 Monthly)
ſ	SUBTOTAL of Receipts This Page (optional)			185.00
ŀ				
	TOTAL This Period (last page this line number	er only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 42 / 84           (check only one)
	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			
. Z	Full Name (Last, First, Middle Initial) Joseph C. Moss			Date of Receipt
	Mailing Address 14202 Chimney Hous	e Rd		0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47901
	Midlothian	VA	23112-4304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer M&T Bank	Occupatio HSA Spe		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	- · · · · ·	e Year-to-Date ▼ 235.00	(\$10.00 Monthly)
_	Full Name (Last, First, Middle Initial) Ray M. Musser			Date of Receipt
	Mailing Address 404 N 2nd Ave Ste B			0 6 / D D / Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47255
	Upland FEC ID number of contributing federal political committee.	CA	91786-4793	Amount of Each Receipt this Period 85.00
	Name of Employer Ray Musser & Assoc. Insur- ance Services	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) John J. Nelson			Date of Receipt
	Mailing Address 32110 Agoura Rd			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47204
	Westlake Village	CA	91361-4026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		416.70
	Name of Employer Warner Pacific Insurance Services	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.20	(\$416.70 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		511.70

	CHEDULE A (FEC Form 3X TEMIZED RECEIPTS	d Statements may not be sold or used by any perso	FOR LINE NUMBER:         PAGE 43 / 84           (check only one)         11c         12           X         11a         11b         11c         12           13         14         15         16         1 <sup>2</sup> n for the purpose of soliciting contributions         11         11         11
0	r for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to	solicit contributions from such committee.
لا م.	Full Name (Last, First, Middle Initial) Ron J. Nezat		Date of Receipt
	Mailing Address 2632 Ducharme Rd		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: 11366-P47232
	Opelousas	LA 70570-8630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Global Financial Resource- s, Inc.	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	(\$250.00 Monthly)
. –	Full Name (Last, First, Middle Initial) Terri M. Olson		Date of Receipt
	Mailing Address PO Box 21479		$ \begin{array}{c} M & M \\ 0 & 6 \end{array} \left( \begin{array}{c} D & D \\ 2 & 3 \end{array} \right) \left( \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array} \right) \\ \end{array} $
	City	State Zip Code	Transaction ID: 11368-P47743
	Keizer	OR 97307-1479	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Olson Insurance	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate Year-to-Date ▼ 390.00	(\$50.00 Monthly)
. —	Full Name (Last, First, Middle Initial) John C. Parker		Date of Receipt
	Mailing Address 47 Laurel Hill Dr		M         M         /         D         D         Y
	City	State Zip Code	Transaction ID: 11368-P47917
	Niantic	CT 06357-1536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		100.00 Payroll Deduction
	Name of Employer Parker Agency	Occupation Principal	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	(\$100.00 Monthly)
Γ			400.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 44 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persone and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
⊻ A.	Full Name (Last, First, Middle Initial) Jesse A. Patton		Date of Receipt
	Mailing Address 701 Grand Ave		06 / Y Y Y Y 23 2011
	City	State Zip Code	Transaction ID: 11366-P47281
	West Des Moines	IA 50265-3625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Associations Marketing Gr- oup, Inc.	Occupation CEO/President	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary     General       Other (specify) ▼	2100.00	(\$350.00 Monthly)
- В.	Full Name (Last, First, Middle Initial) Ross W. Pendergraft	1	Date of Receipt
	Mailing Address 16622 Calahan St		0 6 / 2 3 / Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47429
	North Hills FEC ID number of contributing federal political committee.	CA 91343-3602	Amount of Each Receipt this Period 85.00
	Name of Employer Arroyo Insurance Services	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
- C.	Full Name (Last, First, Middle Initial) David R. Perry		Date of Receipt
	Mailing Address 2003 Charvais Dr		M = M         /         D = D         Y         Y = Y         <
	City Lake Charles	State Zip Code LA 70601-5605	Transaction ID: 11366-P47443
	FEC ID number of contributing	LA 70601-5605	Amount of Each Receipt this Period 60.00
	federal political committee. Name of Employer The Perry Agency, Inc.	Occupation	Payroll Deduction
		President	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	(\$30.00 Monthly)
Γ		L	495.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 45/84
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	ay not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	NATIONAL ASSOCIATION OF HEALT		WRITERS PAC (HUPAC)	
Α.	Full Name (Last, First, Middle Initial) Susan R. Pittman			Date of Receipt
	Mailing Address 32418 51st Ave SW			0 6 / 2 3 / Y Y Y Y 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47761
	Federal Way	WA	98023-1936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Insure NW Inc.	Occupatio	on	Payroll Deduction
	Receipt For:	Agent	e Year-to-Date 🔻	
	Primary General	, iggi egale	300.00	(\$50.00 Monthly)
	Other (specify)	0 0		
в.	Full Name (Last, First, Middle Initial) Tom G. Polenzani			Date of Receipt
	Mailing Address 1120 Atchison St			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47284
	Pasadena	CA	91104-1319	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		170.00
	Name of Employer Polenzani Benefits & Ins.	Occupation Agent	on	Payroll Deduction
	<u>Svcs., Inc.</u> Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		1145.00	(\$170.00 Monthly)
с.	Full Name (Last, First, Middle Initial) John G. Prue			Date of Receipt
0.	Mailing Address 12713 S Edinburgh St			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47827
	<u>Olathe</u>	KS	66062-1300	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Humana, Inc.	Occupation Agent	on	Payroll Deduction
	Receipt For:	-	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	510.00	(\$85.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			305.00
	TOTAL This Period (last page this line number of			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 46 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         16
	Any information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		
	NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
	Full Name (Last, First, Middle Initial) Kathy M. Rainwater		Date of Receipt
	Mailing Address 3809 Silverwood Dr		0 6 / <sup>D</sup> 0 / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>
	City	State Zip Code	Transaction ID: 11368-P47923
	Tyler	TX 75701-9336	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		85.00
	Name of Employer Threlkeld & Company Insur-	Occupation	Payroll Deduction
	ance Receipt For:	Executive Vice President         Aggregate Year-to-Date	
	Other (specify) ▼	510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Susan Maley Rash		Date of Receipt
	Mailing Address 2519 Kettlewell Ct		0 6 / Y Y Y Y 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47286
	Midlothian	VA 23113-6726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer BB&T Benefit Consultants of Virginia,	Occupation Vice President	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Jon C Rauser	I	Date of Receipt
	Mailing Address 949 Lamplighter Ln		M M / D D / Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11366-P47287
	Grafton	WI 53024-9314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00 Payroll Deduction
	Name of Employer The Rauser Agency, Inc.	Occupation Agent	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date 1500.00	(\$250.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)		420.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	for De	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER:       PAGE 47 / 84         (check only one)
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	e name and address o	of any political committee to	
A.	Full Name (Last, First, Middle Initial) Kenneth L. Ray			Date of Receipt
	Mailing Address 110 Beaver Bnd			0 6 / 2 3 / Y Y Y Y 0 1 1
	City		ip Code	Transaction ID: 11366-P47288
	<u>Canton</u>	MS 3	39046-9296	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Stewart Sneed Hewes/Banco-	Occupation Director of Ma	rketing - Life/H	Payroll Deduction
	rpSouth Insu Receipt For: Primary General Other (specify) ♥	Aggregate Year-	<b>U</b>	(\$40.00 Monthly)
	Full Name (Last, First, Middle Initial)	0 0 0 0	0 0 0 0 0 0	
В.	Dennis J. Recker Mailing Address 971 N Perry St			Date of Receipt
	City	State Z	ip Code	Transaction ID: 11368-P47758
	Ottawa	OH 4	5875-1218	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Fawcett, Lammon, Recker <u>&amp; Associates</u> Receipt For:	Occupation Registered Re Aggregate Year-	•	<ul> <li>Payroll Deduction</li> </ul>
	Primary General Other (specify) ▼		355.00	(\$30.00 Monthly)
С.	Full Name (Last, First, Middle Initial) Michael S. Reddy			Date of Receipt
	Mailing Address 13800 Jackson Rd			0 6 2 3 2 0 1 1
	City	State Z	ip Code	Transaction ID: 11366-P47131
	Mishawaka	IN 4	6544-9195	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Synergy Insurance Group	Occupation Agent		<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 340.00	(\$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) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 48 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
∠ A.	, Full Name (Last, First, Middle Initial) Patrick Reuszer		Date of Receipt
	Mailing Address 312 Elm Sreet		0 6 / <sup>D</sup> D / <sup>Y</sup> Y Y Y Y 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47195
	Cincinnati	OH 45202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Assurant Employee Benfits	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	(\$50.00 Monthly)
– B.	Full Name (Last, First, Middle Initial) R Dane Rianhard		Date of Receipt
	Mailing Address 1 N Charles St		0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47618
	Baltimore	MD 21201-3740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer FranklinMorris	Occupation Agent	Payroll Deduction
	Receipt For: Primary General	Aggregate Year-to-Date ▼	(\$85.00 Monthly)
	Other (specify)	510.00	
C.	Full Name (Last, First, Middle Initial) John M. Rice		Date of Receipt
	Mailing Address 1401 S Westward Ho	PI	M M / D D / Y Y Y Y 06 22 2011
	City	State Zip Code	Transaction ID: 11361
	Sioux Falls	SD 57105-0155	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Rice Insurance Agency, In- c.	Occupation Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
ſ	SUBTOTAL of Receipts This Page (optional)	·	1135.00
ŀ	TOTAL This Period (last page this line number	r only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 49 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         1
A C	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
. Z	Full Name (Last, First, Middle Initial) Shan Ricketts			Date of Receipt
	Mailing Address 3900 Halisport Dr NW	/		M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47372
	Kennesaw	GA	30152-4077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Purchasing Alliance Solut-	Occupatio	n	Payroll Deduction
	ions, Inc.	Executive	e Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 635.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Susan M. Rider			Date of Receipt
	Mailing Address 45 Apple Tree Cir			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47445
	Fishers	IN	46038-1111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		72.00
	Name of Employer Gregory & Appel Insurance	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 348.00	(\$42.00 Monthly)
_	Full Name (Last, First, Middle Initial) Elizabeth E Rios-Carl			Date of Receipt
	Mailing Address 6841 Pino Real Dr			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47828
	El Paso	TX	79912-2803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Goodman Financial Group	Occupatio VP - Em	n ployee Benefits	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 300.00	(\$50.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional).			207.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 50 / 84         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       1
	Any information copied from such Reports and sor for commercial purposes, other than using th	Statements may e name and add	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
∠ \.	Full Name (Last, First, Middle Initial) Michael A. Rivera			Date of Receipt
	Mailing Address 12200 Northwest Fwy	Ste 662		0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47090
	Houston FEC ID number of contributing federal political committee.	TX C	77092-4927	Amount of Each Receipt this Period 85.00
	Name of Employer Northwest General Insuran- ce	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 635.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Sharon L. Robbins Mailing Address PO Box 530	<b>I</b>		Date of Receipt
		Ctata	Zin Codo	06 23 2011
	City Asheville	State NC	Zip Code 28802-0530	Transaction ID: 11368-P47795 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Insurance Service of Ashe- ville Receipt For:	Occupatio Agent		<ul> <li>Payroll Deduction</li> </ul>
	Primary General Other (specify) ▼		e Year-to-Date ▼ 510.00	(\$85.00 Monthly)
-	Full Name (Last, First, Middle Initial) Joseph K. Roberts			Date of Receipt
	Mailing Address 4000 S 36th St			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47908
	Lincoln FEC ID number of contributing federal political committee.	C	68506-4809	Amount of Each Receipt this Period
	Name of Employer Midlands Financial Benefi- ts	Occupatio Registere	n ed Representative	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1020.00	(\$170.00 Monthly)
	SUBTOTAL of Receipts This Page (optional) .			340.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 51 / 84         (check only one)       11a         X       11a         13       14         15       16
	ny information copied from such Reports and s r for commercial purposes, other than using th	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			
. K	Full Name (Last, First, Middle Initial) William T. Robinson			Date of Receipt
	Mailing Address 401 S El Cielo Rd Apt	66		0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47926
	Palm Springs	CA	92262-7922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Palm Canyon Insurance Age-	Occupatio	n	Payroll Deduction
	ncy Receipt For:	Agent Aggregate	e Year-to-Date 🔻	_
	Other (specify)		635.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Francis A. Ruggiero			Date of Receipt
	Mailing Address 15 Kennedy Dr			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47292
	Budd Lake	NJ	07828-1438	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer John J. Slattery Associat-	Occupatio Director	n of Broker Development	<ul> <li>Payroll Deduction</li> </ul>
	es Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 510.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Gregory S. Sailer			Date of Receipt
	Mailing Address 9721 Wellington Rdg			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47297
	Woodbury	MN	55125-9592	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Sailer Benefit Services, Inc.	Occupatio Agent	n	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date <b>V</b> 510.00	(\$85.00 Monthly)
	SUBTOTAL of Receipts This Page (optional) .	1		255.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 52 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	tatements may not be sold or used by any person name and address of any political committee to TH UNDERWRITERS PAC (HUPAC)	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Stephen J. Salamon		Date of Receipt
	Mailing Address PO Box 4252		06 23 Y Y Y Y 06 23 2011
	City	State Zip Code	Transaction ID: 11366-P47188
	Timonium	MD 21094-4252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Landmark Insurance & Fina- ncial Group	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	(\$85.00 Monthly)
— В.	Full Name (Last, First, Middle Initial) Raymer M. Sale	I	Date of Receipt
	Mailing Address 2135 Enclave Mill Dr		M         M         /         D         D         Y
	City	State Zip Code	Transaction ID: 11366-P47298
	Dacula FEC ID number of contributing federal political committee.	GA 30019-3290	Amount of Each Receipt this Period
	Name of Employer E2E Benefits Services, In- c.	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	(\$150.00 Monthly)
– c.	Full Name (Last, First, Middle Initial) Rose P. Sandoval		Date of Receipt
	Mailing Address 2 Main St Ste 340		06 / 23 / Y Y Y Y 011 / 23 / 2011
	City	State Zip Code	Transaction ID: 11366-P47243
	Stoneham FEC ID number of contributing federal political committee.	MA 02180-3336	Amount of Each Receipt this Period
	Name of Employer Benefit Strategy Partners, LLC	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	(\$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)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 53 / 84 (check only one)
	ITEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and S or for commercial purposes, other than using the			on for the purpose of soliciting contributions
			WRITERS PAC (HUPAC)	
A.	Full Name (Last, First, Middle Initial) Alfonso C. Schiebel			Date of Receipt
	Mailing Address 706 Trailwood Lane			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: 11366-P47299
	<u>Marietta</u>	GA	30064-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer	Occupatio	on	Payroll Deduction
	Name of Employer Schiebel & Associates, LLC dba Shopbe	Agent		
	Receipt For:	, I – Ŭ – – –	e Year-to-Date 🔻	
	Primary General			(\$35.00 Monthly)
	Other (specify)	0 0	210.00	
в.	Full Name (Last, First, Middle Initial) Kenneth L. Schmidt			Date of Receipt
	Mailing Address 1332 Hunters Hollow C	Ct		M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: 11302
	Eureka	MO	63025-1051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Mengel, Surdyke, Murphy	Occupatio		
	and Finke	Benefits	Consultant	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0.0	600.00	]
- C.	Full Name (Last, First, Middle Initial) Kenneth L. Schmidt			Date of Receipt
	Mailing Address 1332 Hunters Hollow C	Ct		M M / D D / Y Y Y Y 06 29 2011
	City	State	Zip Code	Transaction ID: 11372
	Eureka	MO	63025-1051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Mengel, Surdyke, Murphy	Occupatio		7
	Mengel, Surdyke, Murphy and Finke	Benefits	Consultant	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	650.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	I		185.00
ŀ				
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 54 / 84         (check only one)       X       11a       11b       11c       12         X       11a       11b       11c       12         13       14       15       16       1
/ c	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAD	LTH UNDERV	VRITERS PAC (HUPAC)	
	Full Name (Last, First, Middle Initial) Alan R. Schulman			Date of Receipt
	Mailing Address 10010 Colesville Rd	Ste A		0 6 2 3 Y Y Y Y 0 6 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code	Transaction ID: 11368-P47750
	Silver Spring	MD	20901-2348	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Insurance Benefits & Advi- sors	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 470.00	(\$50.00 Monthly)
	Full Name (Last, First, Middle Initial) James D. Schulz			Date of Receipt
	Mailing Address 7101 S 82nd St			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47207
	Lincoln FEC ID number of contributing federal political committee.	NE C	68516-6584	Amount of Each Receipt this Period 85.00
	Name of Employer Midlands Financial Benefi-	Occupatio	n	Payroll Deduction
	ts Receipt For: Primary General Other (specify) ▼	Agent Aggregate	e Year-to-Date ▼ 425.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Ronald C. Segal			Date of Receipt
	Mailing Address 3621 Deauvilla Ct			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47392
	Calabasas	CA	91302-3047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00 Payroll Deduction
	Name of Employer Ron Segal Insurance Servi- ces, Inc.	Occupatio Agent	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	(\$60.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)			195.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 55 / 84           (check only one)         X           X         11a           13         14           15         16
	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		
	Gregory J. Seifert Mailing Address 3311 NE 115th Street		Date of Receipt
	City	State Zip Code	Transaction ID: 11366-P47394
	Vancouver	WA 98686-3945	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	170.00
	Name of Employer Biggs Insurance Services	Occupation Agent	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  1060.00	(\$170.00 Monthly)
_	Full Name (Last, First, Middle Initial) Scott A Shalek		Date of Receipt
	Mailing Address PO Box 67		06 / 23 / Y Y Y 2011
	City	State Zip Code	Transaction ID: 11366-P47176
	Ringwood	IL 60072-0067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Shalek Financial Services	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
_	Full Name (Last, First, Middle Initial) Douglas W Sheffer	1	Date of Receipt
	Mailing Address 2425 Malabar Dr		M M / D D / Y Y Y Y 0 6 2 3 2 0 1 1
	City	State Zip Code OR 97403-1893	Transaction ID: 11366-P47407
	Eugene FEC ID number of contributing federal political committee.	OR 97403-1893	Amount of Each Receipt this Period 30.00
	Name of Employer PacificSource Health Plans	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 355.00	(\$30.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .	·	285.00

SCHEDULE A (FEC F ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 56 / 84           (check only one)         11a           X         11a         11b           I         11b         11c         12           I         13         14         15         16         17
Any information copied from such or for commercial purposes, other	Reports and Statements ma r than using the name and ad	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (IN F NATIONAL ASSOCIATIO	,	WRITERS PAC (HUPAC)	
Full Name (Last, First, Middle A. Kenneth A. Sherlin	Initial)		Date of Receipt
Mailing Address 8 1st St			M M / D D / Y Y Y Y 06 23 2011
City	State	Zip Code	Transaction ID: 11368-P47911
Asheville	NC	28803-1414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Keystone Financial & Bene-	Occupatio	on g Partner	Payroll Deduction
fit Resources Receipt For:		e Year-to-Date V	
Primary Gener Other (specify) ▼		204.00	(\$42.00 Monthly)
Full Name (Last, First, Middle           David M. Sherrill	Initial)		Date of Receipt
Mailing Address 2844 Reg	al Ln		M M / D D / Y Y Y Y 06 23 2011
City	State	Zip Code	Transaction ID: 11366-P47438
Oviedo	FL	32765-7573	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Sherrill Insurance Broker- age, Inc.	Occupatio Vice Pre	m sident/Life & LTC Mgr	Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary   Gener     Other (specify)   The second	al	220.00	(\$30.00 Monthly)
Full Name (Last, First, Middle Anya Y. Simpson	Initial)		Date of Receipt
Mailing Address 82 N Boxy	wood St		0 6 2 3 2 0 1 1
City	State	Zip Code	Transaction ID: 11366-P47416
Hampton	VA	23669-2464	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Benefit Plans, Inc.	Occupatio Agent	n	Payroll Deduction
Receipt For: Primary Gener	Aggregate	e Year-to-Date 🔻	
Other (specify) ▼		485.00	(\$30.00 Monthly)
SUBTOTAL of Receipts This Pa	age (optional)		102.00
TOTAL This Period (last page th	nis line number only)		

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 57 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         16
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEALT	TH UNDERV	VRITERS PAC (HUPAC)	
Z	Full Name (Last, First, Middle Initial) Desmond X. Slattery			Date of Receipt
	Mailing Address 1800 State Route 34			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47209
	Wall	NJ	07719-9168	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer John J. Slattery Associat-	Occupation Agent	1	Payroll Deduction
	es, Inc. Receipt For:	, I – <sup>v</sup> – – – –	Year-to-Date 🔻	
	Other (specify)		510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Deirdre Slattery Fallon			Date of Receipt
	Mailing Address PO Box 256			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47127
	Spring Lake	NJ	07762-0256	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer John J. Slattery Associat- es, Inc.	Occupation Agent	1	Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 340.00	(\$85.00 Monthly)
		0 0	0 0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial) Paul E. Smith			Date of Receipt
	Mailing Address 100 Queen St			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47142
	Southington	СТ	06489-2052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer AmeriBen Alliance, LLC	Occupation Agent	1	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date  400.00	(\$100.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	I		270.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports a	for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 58 / 84         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17         n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	g the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sam Smith		Date of Receipt
Mailing Address 13025 Erwin Stree		06 23 Y Y Y Y 06 23 2011
City	State Zip Code	Transaction ID: 11366-P47417
Valley Glen	CA 91401-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Genesis Financial	Occupation President	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
Full Name (Last, First, Middle Initial) Sheryl M. Soileau		Date of Receipt
Mailing Address 6421 Perkins Rd E	Bldg A # 2B	0 6 / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 1
City	State Zip Code	Transaction ID: 11368-P47797
Baton Rouge	LA 70808-6200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Besselman & Little Agency	Occupation Agent	- Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	(\$10.00 Monthly)
Full Name (Last, First, Middle Initial) Jim Spahr		Date of Receipt
Mailing Address 1457 Capri Ave		06 / 23 / Y Y Y Y 011 / 23 / 2011
City	State Zip Code	Transaction ID: 11366-P47398
Petaluma	CA 94954-1458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00 Payroll Deduction
Name of Employer Jackie & Jim Spahr Insura- nce Services	Occupation Agent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
SUBTOTAL of Receipts This Page (option	al)	180.00
	nber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER:         PAGE 59 / 84           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not b e name and address o	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITI	ERS PAC (HUPAC)	
∠ A.	Full Name (Last, First, Middle Initial) Sher Sparano			Date of Receipt
	Mailing Address 7020 108th St # 5-0			M         /         D         /         Y
	City		ip Code	Transaction ID: 11366-P47205
	Forest Hills	NY 1	1375-4449	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Benefits Advisory Service	Occupation President		<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General	Aggregate Year-	to-Date ▼ 535.00	(\$30.00 Monthly)
_	Other (specify)			
В.	Full Name (Last, First, Middle Initial) Anne P. Sperling			Date of Receipt
	Mailing Address 25 Antigua Rd			0 6 2 3 2 0 1 1
	City	State Z	ip Code	Transaction ID: 11366-P47419
	Santa Fe	NM 8	37508-2201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Daniels Insurance, Inc.	Occupation Employee Ber	efits Manager	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 485.00	(\$40.00 Monthly)
– C.	Full Name (Last, First, Middle Initial) Jackie L. Spragins			Date of Receipt
	Mailing Address 2009 Speedway Ave			M M         /         D D         Y         Y Y         Y </td
	City		ip Code	Transaction ID: 11368-P47894
	Wichita Falls	<u> </u>	76301-6067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Allred-Thompson-Mason-Dau- gherty Insur	Occupation Agent	_	Payroll Deduction
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-	to-Date V 300.00	(\$50.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)		<b>b</b>	120.00
F	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 60 / 84           (check only one)         X           X         11a           11b         11c           13         14           15         16
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
. Ľ	Full Name (Last, First, Middle Initial) Zachary Stafford			Date of Receipt
	Mailing Address 6421 Perkins Rd Bldg	j A # 2B		06 23 Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47623
	Baton Rouge	LA	70808-6200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Besselman & Little Agency	Occupatio Agent	n	Payroll Deduction
	Receipt For:       Primary       General       Other (specify) ▼		e Year-to-Date V 295.00	(\$30.00 Monthly)
	Full Name (Last, First, Middle Initial) Delvin L. Stahl			Date of Receipt
	Mailing Address PO Box 388			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11368-P47819
	Sutton	NE	68979-0388	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Insurance Plus, Inc.	Occupatio Agent	n	<ul> <li>Payroll Deduction</li> </ul>
	Receipt For: Primary General Other (specify) ▼	- I - Š	e Year-to-Date ▼ 240.00	(\$40.00 Monthly)
_	Full Name (Last, First, Middle Initial) Eugene A Starks			Date of Receipt
	Mailing Address 408 Oakleigh Cir			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47870
	Brandon	MS	39047-5079	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Benefit Administration Se- rvices, Ltd.	Occupatio Partner	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 510.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .			155.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 61 / 84           (check only one)         X           X         11a           11b         11c
	Any information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pe	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL		
Z	Full Name (Last, First, Middle Initial) James R Stenger		Date of Receipt
	Mailing Address 381 Victoria Drive		0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11368-P47884
	Bridgewater	NJ 07936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	170.00
	Name of Employer BenefitMall	Occupation	Payroll Deduction
	Receipt For:	Director of Business Developme	
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 1645.00	(\$170.00 Monthly)
	Full Name (Last, First, Middle Initial) Marilyn A. Stenger		Date of Receipt
	Mailing Address 381 Victoria Drive		0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11368-P47707
	Bridgewater	NJ 08807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer MVS Consulting	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2135.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Kirk D. Stoddard		Date of Receipt
	Mailing Address 5237 Barron Park Dr		0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47421
	San Jose	CA 95136-2810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer Kirk Stoddard & Associates	Occupation Agent/Broker	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	(\$10.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	I	265.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 62 / 84           (check only one)         X           X         11a           113         14           15         16
A C	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may e name and add	/ not be sold or used by any pers dress of any political committee	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAI	TH UNDERV	VRITERS PAC (HUPAC)	
Ľ	Full Name (Last, First, Middle Initial) Rodney Stuart			Date of Receipt
	Mailing Address 9755 Randall Dr			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47370
	Indianapolis FEC ID number of contributing	IN	46280-2951	Amount of Each Receipt this Period
	federal political committee.	C		100.00
	Name of Employer Benefit Innovations, LLP	Occupatio	n	Payroll Deduction
	Receipt For:	Agent	Year-to-Date V	
	Primary General Other (specify) ▼		600.00	(\$50.00 Monthly)
	Full Name (Last, First, Middle Initial) James L. Sugden			Date of Receipt
	Mailing Address 544 Wild Ridge Lane			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47885
	Lafayette	CO	80026-2583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Employee Benefit Solution- s, Inc.	Occupation Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 635.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Mark W. Sulpizio			Date of Receipt
	Mailing Address 1630 Riverton Rd			 
	City	State	Zip Code	0 6 2 3 2 0 1 1 Transaction ID: 11366-P47404
	Cinnaminson	NJ	08077-2343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Innovative Benefit Planni- ng	Occupation Partner	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 340.00	(\$85.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	1		270.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 63 / 84           (check only one)
	Any information copied from such Reports and s or for commercial purposes, other than using th	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	
Z	Full Name (Last, First, Middle Initial) James F. Summers		Date of Receipt
	Mailing Address 15316 Pine St		0 6 / D D / Y Y Y Y 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11368-P47886
	Omaha FEC ID number of contributing	NE 68144-5117	Amount of Each Receipt this Period 125.00
	federal political committee.	Occupation	Payroll Deduction
	Name of Employer Senior Market Sales, Inc. Receipt For:	Agent Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	750.00	(\$125.00 Monthly)
_	Full Name (Last, First, Middle Initial) William L Sutherland	1	Date of Receipt
	Mailing Address 19126 Kristen Way		0 6 / 2 3 / Y Y Y Y 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47342
	San Antonio FEC ID number of contributing federal political committee.	TX 78258-3618	Amount of Each Receipt this Period
	Name of Employer Wortham Insurance & Risk Management	Occupation Agent	Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	(\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) Ryan R. Swinton		Date of Receipt
	Mailing Address 9931 N 151st St		
	City	State Zip Code	Transaction ID: 11366-P47426
	Waverly FEC ID number of contributing	NE 68462-1611	Amount of Each Receipt this Period 85.00
	federal political committee.	Occupation	Payroll Deduction
	Name of Employer Midlands Financial Benefi- ts Receipt For:	Agent Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	255.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1	310.00

[	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page ay not be sold or used by any persidress of any political committee to	FOR LINE NUMBER:       PAGE       64 / 84         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17         on for the purpose of soliciting contributions policit contributions from such committee.       17
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL			
لا A.	Full Name (Last, First, Middle Initial) Frank Todd Taylor Mailing Address 11 Millstone Bd			Date of Receipt
	Mailing Address 11 Millstone Rd			0 6 / 2 3 / Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47399
	Richmond	VA	23228-5407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Medical Society of Virgin- ia Insurance	Occupation Account	on Manager	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date <b>V</b> 510.00	(\$85.00 Monthly)
- B.	Full Name (Last, First, Middle Initial) Marsha Tellesbo			Date of Receipt
	Mailing Address 22887 NE 127th Way			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 11366-P47377
	Redmond	WA	98053-5657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Tellesbo & Company	Occupation Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 635.00	(\$85.00 Monthly)
- C.	Full Name (Last, First, Middle Initial) David J. Terpening			Date of Receipt
	Mailing Address 424 Avenue E			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: 11366-P47410
	Redondo Beach FEC ID number of contributing federal political committee.	CA	90277-5141	Amount of Each Receipt this Period 85.00
	Name of Employer Dave Terpening Insurance	Occupatio	on	Payroll Deduction
	Receipt For:	Agent Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		510.00	(\$85.00 Monthly)
ſ	SUBTOTAL of Receipts This Page (optional)		······	255.00
F	TOTAL This Period (last page this line number	only)		

		•
SCHEDULE A (FEC F	orm 3X)	FOR LINE NUMBER: PAGE 65 / 84
•		(check only one)
ITEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12
	Detailed Summary Page	
Any information copied from such	Reports and Statements may not be sold or used by any perso	
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 Fu		
	N OF HEALTH UNDERWRITERS PAC (HUPAC)	
Full Name (Last, First, Middle I Harry P. Thal	nitiai)	Date of Receipt
	107	
Mailing Address PO Box 21	137	0 6 2 3 2 0 1 1
City	State Zip Code	
		Transaction ID: 11366-P47244
Kernville	CA 93238-2137	Amount of Each Receipt this Period
FEC ID number of contributing	C	85.00
federal political committee.		00.00
		Payroll Deduction
Name of Employer Harry P. Thal Insurance	Occupation	
Agency	President	_
Receipt For:	Aggregate Year-to-Date 🔻	
Primary Genera		(\$85.00 Monthly)
Other (specify) 🔻	340.00	
Full Name (Last, First, Middle I	nitial)	
Jennifer L. Toups	,	Date of Receipt
Mailing Address 4521 Laure	el St	M M / D D / Y Y Y Y
0 10-1		06 23 2011
City	State Zip Code	Transaction ID: 11366-P47379
New Orleans	LA 70115-1538	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
rederal political committee.		
Name of Employer	Occupation	Payroll Deduction
Name of Employer Business Insurance Group	Director of Marketing	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary Genera		
Other (specify)	410.00	(\$85.00 Monthly)
	0 0 0 0 0 0 0 0 0	1
Full Name (Last, First, Middle I	nitial)	Data of Descript
Janet Trautwein	_	Date of Receipt
Mailing Address 7212 Redla	ac Dr	0 6 2 3 2 0 1 1
City	State Zip Code	Transaction ID: 11368-P47887
Clifton	VA 20124-1948	Amount of Each Receipt this Period
FEC ID number of contributing		170.00
federal political committee.	C	170.00
		Payroll Deduction
Name of Employer NAHU	Occupation	
	CEO	
Receipt For:	Aggregate Year-to-Date 🔻	
Primary Genera	1000.00	(\$170.00 Monthly)
Other (specify)	1020.00	
	· · · · · · · · · · · · · · · · · · ·	
SUBTOTAL of Receipts This Par	ge (optional)	340.00
TOTAL This Pariod (last page thi	is line number only)	

				FOR LINE NUMBER: PAGE 66 / 84
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Г				13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	ay not be sold or used by any perso Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	NATIONAL ASSOCIATION OF HEALT	TH UNDER	WRITERS PAC (HUPAC)	
Α.	, Full Name (Last, First, Middle Initial) C. Louanne Trebing			Date of Receipt
	Mailing Address 1806 Patton Dr			M + M         /         D + D         /         Y + Y + Y         Y           0 6         2 3         2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47888
	Garland	TX	75042-8205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Trebing Insurance Services	Occupatio	on	Payroll Deduction
	Trebing Insurance Services	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		300.00	(\$50.00 Monthly)
	Other (specify)			1
в.	Full Name (Last, First, Middle Initial) John E. Ulness			Date of Receipt
	Mailing Address 214 N Superior St			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47386
	Appleton	WI	54911-4774	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer self	Occupatio		Payroll Deduction
		Self=em		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	(\$10.00 Monthly)
	Other (specify) ▼		215.00	(\$10.00 Monthly)
C.	Full Name (Last, First, Middle Initial) Robert B. Vernon	1		Date of Receipt
0.	Mailing Address 3702 Alton Rd SW			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11368-P47889
	Roanoke	VA	24014-3004	Amount of Each Receipt this Period
	FEC ID number of contributing			40.00
	federal political committee.	C		
	Name of Employer Southwind Health Partners	Occupation Presiden		Payroll Deduction
	Receipt For:	_ <b>_</b>	e Year-to-Date 🔻	
	Primary General	- iggi ogut		(\$40.00 Monthly)
	Other (specify)		240.00	
		1		100.00
	SUBTOTAL of Receipts This Page (optional)		······	
	TOTAL This Period (last page this line number	only)		

A. R. N. Ci	commercial purposes, other than using the AME OF COMMITTEE (In Full) ATIONAL ASSOCIATION OF HEA Ill Name (Last, First, Middle Initial) and R. Wall ailing Address 1004 Sugardale Ct ty ugar Land EC ID number of contributing deral political committee.	LTH UNDERW State TX Occupation Agent	Iress of any political committee to IRITERS PAC (HUPAC) Zip Code 77498-2760	Date of Receipt 0 6 / 2 3 / 2 0 1 1 Transaction ID: 11368-P47877 Amount of Each Receipt this Period 100.00 Payroll Deduction
N Fr M Ci S Ff fe	ATIONAL ASSOCIATION OF HEA III Name (Last, First, Middle Initial) and R. Wall ailing Address 1004 Sugardale Ct ty ugar Land EC ID number of contributing deral political committee. ame of Employer one Star Health Plans, d. eceipt For: Primary General	State TX C Occupation Agent	Zip Code 77498-2760	M         M         /         D         D         /         Y
A. R. M M Ci S Ff fe	and R. Wall ailing Address 1004 Sugardale Ct ty ugar Land EC ID number of contributing deral political committee. ame of Employer one Star Health Plans, d. eceipt For: Primary General	TX C Occupation Agent	77498-2760	M         M         /         D         D         /         Y
Ci S Ff fe Li	ty ugar Land EC ID number of contributing deral political committee. ame of Employer one Star Health Plans, d. eceipt For: Primary General	TX C Occupation Agent	77498-2760	0 6         2 3         2 0 1 1           Transaction ID: 11368-P47877           Amount of Each Receipt this Period           100.00
S Ff fe Ni La	ugar Land         EC ID number of contributing deral political committee.         ame of Employer one Star Health Plans, d.         eceipt For:         Primary         General	TX C Occupation Agent	77498-2760	Amount of Each Receipt this Period 100.00
Ff fe Ni La	EC ID number of contributing deral political committee. ame of Employer one Star Health Plans, d. eceipt For: Primary General	C Occupation Agent		100.00
fe Ni La	deral political committee. ame of Employer one Star Health Plans, d. eceipt For: Primary General	Occupation Agent		
Lt	d. eceipt For: Primary General	Agent		Payroll Deduction
R	Primary General	Aggregate	Year-to-Date 🔻	
-				- 1
L			600.00	(\$100.00 Monthly)
	ull Name (Last, First, Middle Initial) essica F Waltman			Date of Receipt
M	ailing Address 2000 14th St N Ste 4	150		M         M         /         D         D         Y
C	•	State	Zip Code	Transaction ID: 11368-P47788
	rlington	VA	22201-2573	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		85.00 Payroll Deduction
N	ame of Employer AHU	- <u> </u>	y and State Affairs	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
	ıll Name (Last, First, Middle Initial) . Hughes Waren			Date of Receipt
М	ailing Address 1109 Princeton Dr			M         M         /         D         D         /         Y
Ci		State	Zip Code	Transaction ID: 11368-P47818
_	/ilmington	NC	28403-2528	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		85.00 Payroll Deduction
N; E	ame of Employer benconcepts, Inc.	Occupation Agent	1	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	(\$85.00 Monthly)
SUP	TOTAL of Receipts This Page (optional)			270.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 68 / 84           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         17
Any information copied from s or for commercial purposes, o	uch Reports and Statements m ther than using the name and a	ay not be sold or used by any pers ddress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE ( NATIONAL ASSOCIA	In Full) TION OF HEALTH UNDEF	WRITERS PAC (HUPAC)	
Full Name (Last, First, Mid A. John L. Warwick	dle Initial)		Date of Receipt
Mailing Address PO Bo	x 272		0 6 / D D / Y Y Y Y 2 3 2 0 1 1
City	State	Zip Code	Transaction ID: 11366-P47271
Chico	CA	95927-0272	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	uting C		85.00
Name of Employer John Warwick Insurance S rvices	Se- Occupat Agent	ion	Payroll Deduction
Receipt For: Primary Ge Other (specify) ▼	Aggrega	tte Year-to-Date  510.00	(\$85.00 Monthly)
Full Name (Last, First, Mid Dan Webb	dle Initial)		Date of Receipt
Mailing Address 5251 C	Office Park Dr		0 6 / D D / Y Y Y Y 2 3 2 0 1 1
City	State	Zip Code	Transaction ID: 11368-P47735
Bakersfield	CA	93309-0404	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C C		170.00 Payroll Deduction
Name of Employer The Webb Insurance Grou	Iviarketi	ng Manager	
Receipt For: Primary Ge Other (specify) ♥	eneral Aggrega	tte Year-to-Date ▼ 1020.00	(\$170.00 Monthly)
Full Name (Last, First, Mid Charles L. Westmoreland	dle Initial)		Date of Receipt
Mailing Address PO Bo	x 925		M · M         /         D · D         Y         Y · Y · Y         Y
City	State	Zip Code	Transaction ID: 11366-P47082
Jackson FEC ID number of contribu federal political committee.	uting C	39205-0925	Amount of Each Receipt this Period 60.00
Name of Employer American Public Life Insu-	Occupat	ion r of Agency Development	Payroll Deduction
rance Company Receipt For:	Aggrega	ite Year-to-Date V	
Primary Ge Other (specify) ▼	eneral	360.00	(\$30.00 Monthly)
SUBTOTAL of Receipts This	s Page (optional)		315.00
	ge 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 / 84         (check only one)       11a         X       11a       11b       11c       12
ſ	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDER\	WRITERS PAC (HUPAC)	
۷ A.	Full Name (Last, First, Middle Initial) Lisa Wetherton			Date of Receipt
	Mailing Address 2150 Imperial Dr			06 23 YYYY 2011
	City	State	Zip Code	Transaction ID: 11366-P47273
	Gainesville	GA	30501-1306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Benefit Design Strategies	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 270.00	(\$20.00 Monthly)
- B.	Full Name (Last, First, Middle Initial) Trei Wild			Date of Receipt
	Mailing Address 2745 Dallas Pkwy			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: 11366-P47239
	Plano	TX	75093-8731	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Assurant Employee Benefits	Occupation Agent		Payroll Deduction
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 510.00	(\$85.00 Monthly)
- C.	Full Name (Last, First, Middle Initial) Zach J. Wilding Mailing Address 712 Kingston Cir	I		Date of Receipt
	City	State	Zip Code	Transaction ID: 11366-P47423
	Brownsburg	IN	46112-8337	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		10.00
	Name of Employer OneAmerica	Occupation Sales Re	on epresentative	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 235.00	(\$10.00 Monthly)
ſ	SUBTOTAL of Receipts This Page (optional)			115.00
	TOTAL This Period (last page this line number	r only)		

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 70 / 84           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personance and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	> NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUPAC)	- 1
۹.	Full Name (Last, First, Middle Initial) Michael R Williams		Date of Receipt
	Mailing Address 302 S 36th St Ste 105		M M / D D / Y Y Y Y 0 6 2 3 2 0 1 1
	City	State Zip Code	Transaction ID: 11366-P47120
	Omaha	NE 68131-3845	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer Wiliams Deras & Associates	Occupation Sales	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  510.00	(\$85.00 Monthly)
	Full Name (Last, First, Middle Initial) Paula L Wilson		Date of Receipt
	Mailing Address 31930 Daniel Way		0 6 / 2 3 / Y Y Y Y 2 0 1 1
	City	State Zip Code	Transaction ID: 11368-P47867
	Temecula	CA 92591-2129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		85.00 Payroll Deduction
	Name of Employer Paula Wilson, Inc.	Occupation Agent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	(\$85.00 Monthly)
-	Full Name (Last, First, Middle Initial) Steven L. Wilson		Date of Receipt
	Mailing Address 1151 Red Mile Rd		M         M         /         D         D         /         Y
	City	State Zip Code KY 40504-2649	Transaction ID: 11366-P47257
	Lexington FEC ID number of contributing federal political committee.	KY 40504-2649	Amount of Each Receipt this Period 50.00
	Name of Employer Benefit Insurance Marketi-	Occupation Agent	Payroll Deduction
	ng Receipt For: Primary General Other (specify) <b>v</b>	Aggregate Year-to-Date V 300.00	(\$50.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	·	220.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 71 / 84         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       1
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEAL	TH UNDERV	VRITERS PAC (HUPAC)	
. K	Full Name (Last, First, Middle Initial) Dennis C Woehler			Date of Receipt
	Mailing Address 5318 Westhaven Dr.			M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47383
	Evansville	IN	47720-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer ONB Insurance Group, Inc.	Occupatio		Payroll Deduction
	Receipt For:	1	enefits Consultant	
	Primary General Other (specify) ▼		355.00	(\$30.00 Monthly)
_	Full Name (Last, First, Middle Initial) Rosanne Wolfe			Date of Receipt
	Mailing Address 4600 E Swans Nest R	d		M M / D D / Y Y Y Y 06 23 2011
	City	State	Zip Code	Transaction ID: 11366-P47414
	Tucson	AZ	85718-6248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Wolfe Insurance & Consult- ants, LLC	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	(\$30.00 Monthly)
-	Full Name (Last, First, Middle Initial) Barbara Wright			Date of Receipt
	Mailing Address 318 Calash Run			0 6 2 3 2 0 1 1
	City	State	Zip Code	Transaction ID: 11366-P47470
	Fort Wayne	IN	46845-2104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer Intrahealthsolutions, Inc.	Occupatio Agent	n	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 510.00	(\$85.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		145.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 72 / 84         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEALT	name and add	Iress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Dennis E. Wright Mailing Address 318 Calash Run	04-4-	Zie Oode	Date of Receipt
	City <u>Fort Wayne</u> FEC ID number of contributing federal political committee.	State IN C	Zip Code 46845-2104	Transaction ID: 11366-P47278 Amount of Each Receipt this Period 85.00
	Name of Employer IntraHealth Solutions, In- <u>c.</u> Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate		Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	►	85.00	
TOTAL This Period (last page this line number only)	▶	22321.70	

		B (FEC Form 3	-		arate schedule(s)		-	R LINE eck only	-	R:			P	AGE	E 73/	84
_		SBURSEMENT		Detailed	category of the Summary Page		X	21b 27	22 28a		23 28b		24 280		25 29	
		ed from such Reports ar rposes, other than using														
$\left  \right $	NAME OF COM			-												
$\langle \rangle$		SOCIATION OF HE	ALTH UN	IDERWF	RITERS PAC (I	HUF	PAC	)								
r	Full Name (Last, American Expi	First, Middle Initial) 'ess									isburs	ser		9		
	Mailing Address	PO Box 53852							0 <sup>M</sup> 6	М	/ D	0	2	Y	žo i	1 <sup>Y</sup>
	City Phoenix			tate Z	Zip Code 85072				Amou	unt c	f Eacl	h [	Disburs			
	Purpose of Disbu Merchant Bankin						001		L.						265.5	5
	Candidate Name						atego Type	ory/								
	Office Sought:	House Senate President		nent For: Primary Other (spe	General											
	State:	District:														
	Full Name (Last, American Expi	First, Middle Initial) ress							-		isburs	ser		0		
	Mailing Address	PO Box 53852							0 <sup>M</sup> 6	М	/ D	2 9	<sup>D</sup> /9	Y	²oỉ	1 <sup>Y</sup>
	City Phoenix			tate Z	Zip Code 85072				Amou	unt c	f Eacl	h [	Disburs	eme		
	Purpose of Disbu Merchant Collect	ion Fee					001		L.						4.9	5
	Candidate Name						atego Type	-								
	Office Sought:	House Senate President		nent For: Primary Other (spe	General											
	State:	District:														
	Full Name (Last, Regions Bank	First, Middle Initial)									ion ID isburs		1145 ment	8		
	Mailing Address	4701 N Keystone	e Ave # 10	00					0 <sup>M</sup> 6	М	/ D	0	<sup>D</sup> /	Y	žo i	1 <sup>Y</sup>
	City Indianapolis		Si	tate N	Zip Code 46205				Amou	unt c	f Eacl	h [	Disburs	eme	nt this	Period
	Purpose of Disbu Merchant Bankin						001		L.					1	137.4	8
	Candidate Name						atego Type	-								
	Office Sought:	Senate President		nent For: Primary Other (spe	General											
_	State:	District:														
4	SUBTOTAL of Disk	oursements This Page (	optional)					•						14	07.9	8
ין	TOTAL This Period	I (last page this line num	nber only)					►								
		-		-									D / E		· · · ·	

FE6AN026

S	SCHEDULE B (FEC Forn	n 3X)		FORLINE	NUMBER: PAGE 74/84
	TEMIZED DISBURSEME	r Use	e separate schedule(seach category of the	(check only	
1	I EMIZED DISBURSEME	Deta	ailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
					or the purpose of soliciting contributions
C	or for commercial purposes, other than u	using the name and a	ddress of any politic	al committee to so	licit contributions from such committee
	NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF	HEALTH UNDER	RWRITERS PAC	(HUPAC)	
. –	Full Name (Last, First, Middle Initial)				Transaction ID: 11461
Α.	Regions Bank				Date of Disbursement
	Mailing Address 4701 N Keys	tone Ave # 100			$\begin{array}{c} \begin{array}{c} M \\ 0 \end{array} \begin{array}{c} 6 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} 7 \end{array} \begin{array}{c} D \\ 0 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} 7 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ \end{array} \begin{array}{c} Y \\ 2 \end{array} \begin{array}{c} 0 \end{array} \begin{array}{c} Y \\ 1 \end{array} \begin{array}{c} Y \\ Y \end{array} $
	City Indianapolis	State IN	Zip Code 46205		Amount of Each Disbursement this Period
	Purpose of Disbursement Banking Fee			001	339.41
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement F Prima Other			
	State: District:				
В.	Full Name (Last, First, Middle Initial) Regions Bank				Transaction ID: 11457 Date of Disbursement
	Mailing Address 4701 N Keys	tone Ave # 100			$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \end{array} \left( \begin{array}{c} D & D \\ 3 & 0 \end{array} \right) \left( \begin{array}{c} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{array} \right)$
	City Indianapolis	State IN	Zip Code 46205		Amount of Each Disbursement this Period
	Purpose of Disbursement Banking Fee			001	12.00
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement F			
	State: District:				

	SUBTOTAL of Disbursements This Page (optional)	•	351.41
	TOTAL This Period (last page this line number only)	►	1759.39
i	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER:	PAGE 75/84
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	/ one) 22 X 23 28a 28I	24 25 28c 29
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	o and address of any pointed	0.000		
	JNDERWRITERS PAC (H	HUPAC)		
Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS			Transaction Date of Disbu	rsement
Mailing Address PO Box 1924			06	
City Muskogee	State Zip Code OK 74402		Amount of Ea	ch Disbursement this Period
Purpose of Disbursement Lunch 6.1		011		1000.00
Candidate Name DAVID DANIEL BOREN		Category/ Type		
Office Sought: X House Disburs Senate President State: OK District: 02	ement For: 2012 Primary X General Other (specify) ▼			
Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS			Transaction Date of Disbu	
Mailing Address 5915 EASTMAN AVENU	IE			
City MIDLAND	State Zip Code MI 48640		Amount of Ea	ch Disbursement this Period
Purpose of Disbursement Event 6.21		011		5000.00
Candidate Name DAVID LEE CAMP		Category/ Type		
	ement For: 2012 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS			Transaction Date of Disbu	rsement
Mailing Address 5915 EASTMAN AVENU	IE		06	
City MIDLAND	StateZip CodeMI48640		Amount of Ea	ch Disbursement this Period
Purpose of Disbursement Event 6.21		011	<u> </u>	-5000.00
Candidate Name DAVID LEE CAMP		Category/ Type		
Senate X President	ement For: 2012 Primary General Other (specify) ▼			
State: MI District: 04				1000.00
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only E6AN026	)	····· •	FEC. Sche	dule B ( Form 3X) (Revised

CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	-	PAGE 76/84
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 🗙 23 🗌 2	24 25 28c 29
ny Information copied from such Reports and State r for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)	ic and address of any pointed co			
NATIONAL ASSOCIATION OF HEALTH	JNDERWRITERS PAC (HU	JPAC)		
Full Name (Last, First, Middle Initial) DUFFY FOR CONGRESS			Transaction ID: 113 Date of Disbursement	
Mailing Address PO BOX 538			0 6 <sup>M</sup> / 1 5 <sup>/</sup>	<sup>Ŷ</sup> <sup>Ŷ</sup> <sup>Ŷ</sup> <sup>Ŷ</sup> <sup>Ŷ</sup> <sup>Ŷ</sup> <sup>Ŷ</sup>
City WAUSAU	StateZip CodeWI54402		Amount of Each Disbu	
Purpose of Disbursement Lunch 6.15		011		-1000.00
Candidate Name SEAN DUFFY		Category/ Type		
X	ement For: 2012 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
DUFFY FOR CONGRESS			Transaction ID: 113 Date of Disbursement	
Mailing Address PO BOX 538			06 <sup>M</sup> / <sup>D</sup> 15 <sup>/</sup>	Y Y Y Y Y 2011
City WAUSAU	State Zip Code WI 54402		Amount of Each Disbu	
Purpose of Disbursement Lunch 6.15	[	011	L	1000.00
Candidate Name SEAN DUFFY		Category/ Type		
5 <u>X</u>	ement For: 2012 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) DUFFY FOR CONGRESS			Transaction ID: 113 Date of Disbursement	
Mailing Address PO BOX 538			$\mathbf{D}^{M} \mathbf{D}^{M} \mathbf{D}$	<sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>
City WAUSAU	State Zip Code WI 54402		Amount of Each Disbu	
Purpose of Disbursement Breakfast 6.23		011		1000.00
Candidate Name SEAN DUFFY		Category/ Type		
Senate > President	ement For: 2012 Primary General Other (specify) ▼			
State: WI District: 07				
SUBTOTAL of Disbursements This Page (optional)		►		1000.00
TOTAL This Period (last page this line number only	)	►	L	

SCHEDULE B (	-	-	Use sepa	arate schedule(	s)					R:			PA	٩GE	77 /	84	
TEMIZED DISE		rs	for each Detailed	category of the Summary Page	•	Ĥ	eck o 21b 27	Ĥ	22 28a	X	23 28b		24 28c		25 29		26 301
Any Information copied f or for commercial purpose NAME OF COMMIT NATIONAL ASSO	ses, other than using TEE (In Full)	g the name a	nd addre	ss of any politic	al com	mitte	ee to s										
Full Name (Last, Firs	SBERGER FOR								Trans Date 0 6		sburs				20 ľ	Y 1	
Mailing Address	22 WEST PADC	Sta ROAL		Zip Code					Amou			a	bureo			·	od
TIMONIUM Purpose of Disburse	ment	M		21093	1_	_	_	_			Laci	T Dia	ibur se	-	500.0	-	
Lunch 6.22 Candidate Name DUTCH RUPPEF					Ca	011 atego Type	ory/		L				<u> </u>				
	K House Senate President istrict: 02		ent For: Primary Other (spe	2012 Genera ecify) ▼													
Full Name (Last, Firs	ICAN IS CRUCIA								Trans Date 0 6		sburs				2 0 Ì	Y 1	
	25 EAST MAIN S	,															
City RICHMOND		Sta V/		Zip Code 23219					Amou	int of	Eacl	n Dis				0	od
Purpose of Disburse Dinner 3.31	ment				_	011			L.					-50	00.0	Ů	
Candidate Name EVERY REPUBL	ICAN IS CRUCIA					atego Type											
Office Sought: State: D	House Senate President istrict:		ent For: Primary Other (spe	Genera ecify) ▼	I												
Full Name (Last, Firs FRIENDS OF FR	,								Trans Date	of Di	sburs	eme	nt				
Mailing Address	P.O. BOX 877								0 <sup>™</sup> 6	M	D	3 <sup>D</sup>	/ Y	2	20 Ì	1 <sup>*</sup>	
City MANCHESTER		Sta N		Zip Code 03105					Amou	int of	Eacl	ו Dis	burse				od
Purpose of Disburse Event 6.30	ment					001			L.					15	500.0	0	
Candidate Name FRANK GUINTA						atego Type											
	K House Senate President istrict: 01		ent For: Primary Other (spe	2012 Genera ecify) ▼	I												
																	_

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	)		OR LIN heck o		ne)	_				AG r			7
		Detailed Summary Page			21b 27	Н	22 28a	X	23 28b		28c $29$ iting contributions         such committee         11333         ent         / $2011$ sbursement this Period         2500.00         11314         / $2011$ sbursement this Period         2500.00         11314         / $2011$ sbursement this Period         1000.00         1000.00	26			
	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEALTH	ne and address of any politica	al con	nmi	r perso ttee to		the pu		se of s		iting c	con	tributi	ons	
	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARRASSO								ion ID			3			
	Mailing Address PO BOX 52008						0 <sup>M</sup> 6	М	/ D	2 8 <sup>D</sup>	/	Y	ž0	11 <sup>°</sup>	]
	City CASPER	StateZip CodeWY82605					Amou	unt c	of Eacl	h Dis	sburs			-	riod
	Purpose of Disbursement Dinner 6.28			01	1		L.						2500.	.00	
	Candidate Name JOHN BARRASSO		C	ate Ty	gory/ ce										
		sement For: 2012 X Primary General Other (specify) ▼													
	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARROW								isburs	seme		4			_
	Mailing Address PO Box 8166					_	0 <sup>M</sup> 6	М	/ D	08	/	Y	ž0	ľ1′	
	City Savannah	State Zip Code GA 31412					Amou	unt c	of Eacl	h Dis	sburs				riod
	Purpose of Disbursement Contribution			01	_		L.					-	1000.	.00	
	Candidate Name JOHN J. BARROW		С	ate Ty	gory/ ce										
		sement For: 2012 X Primary General Other (specify) ▼													
	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER						Date	of D	isburs	seme	ent	-			_
	Mailing Address 7908 Cincinnati Dayton	Road					0 <sup>M</sup> 6	М	/ D	0 <sup>1</sup>	/	Y	ž0	1 1 <sup>°</sup>	
	City West Chester	StateZip CodeOH45069					Amou	unt c	of Eacl	h Dis	sburs				riod
	Purpose of Disbursement Birdie Hunt			01	1		L.					2	2500.	.00	
	Candidate Name JOHN A BOEHNER		С	ate Ty	gory/ ce										
	Office Sought: X House Disburs Senate President State: OH District: 08	eement For: 2012 Primary X General Other (specify) ▼													
5	UBTOTAL of Disbursements This Page (optional	)			►							6	000.	00	
	OTAL This Period (last page this line number onl	/)			Þ		L.								
:6	SAN026						FE	CS	Schedu	ule E	8 ( Fo	rm	3X) (	Revis	ed (

CHEDULE B (FEC Form 3X)	Use separate schedule(s)		-	R LINE	-	R:				PA	GE	79 /	84
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(ch	eck only 21b 27	one) 22 28a	X	23 28			24 28c	$\square$	25 29	
ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam							se o	f so					s
NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF HEALTH U						nouti			11 30			intee	
				/									
Full Name (Last, First, Middle Initial) GINGREY FOR CONGRESS					Trans Date	of Di	isbu	irsei	ment		V	v	V
Mailing Address PO Box U					0 6			<sup>D</sup> 2	Ŏ	Ľ	Ź	0 ľ	1
City Marietta	State Zip Code GA 30060				Amou	unt of	f Ea	ach I	Disbu	ırsei	-	t this	
Purpose of Disbursement In-district event 6.20			011		L.						10	0.00	)
Candidate Name J. PHILLIP GINGREY			atego Type	-									
J X	ement For: 2012 Primary General Other (specify)												
Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS					<b>Tran</b> Date	of Di	isbu	irse	ment				
Mailing Address 2345 GRAND, SUITE 24	:00				0 <sup>M</sup> 6	М	/	0	2	Y	ž	0 ľ	1 <sup>Y</sup>
City KANSAS CITY	State Zip Code MO 64108				Amou	unt of	f Ea	ach I	Disbu	ırsei	-		
Purpose of Disbursement Lunch 6.2			011		L.						10	0.00	)
Candidate Name SAMUEL B 'SAM' GRAVES			atego Type										
	ement For: 2012 Primary General Other (specify) ▼												
Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC					<b>Tran</b> Date		isbu	irse	ment				
Mailing Address 175 SOUTH WEST TEN	IPLE SUITE 650				0 <sup>M</sup> 6	М		<sup>D</sup> 3	0	Y	ž	0 ľ	1 <sup>Y</sup>
City SALT LAKE CITY	State Zip Code UT 84101				Amou	unt of	f Ea	ach I	Disbu	ırsei	-		
Purpose of Disbursement Breakfast 6.30			011		L.						25	0.00	)
Candidate Name ORRIN G HATCH		Ca	atego Type	ory/									
	ement For: 2012 Primary General Other (specify)												
							_	-			AE(	0.00	) )
SUBTOTAL of Disbursements This Page (optional)				•							450	JŲ.UI	

ITEMIZED DISBURSEMENTS       for each category of the Dataled Sumary Page       Data (Data)       21b       22b       2b		E B (FEC Form	-	Use sepa	arate schedule(s)			-			R:				PA	GE	80 /	84
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)         NAME OF COMMITTEE (In Full)         NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)         Full Name (Last, First, Middle Initial)         HOYER FOR CONGRESS         Mailing Address       700 13TH STREET, NW         City       State       Zip Code         WASHINGTON       DE       20005         Purpose of Dibbursement       0111         Candidate Name       0111         Cate of Dibbursement       5000.0         Office Sought:       X House         State       Mailing Address         40 District: 05       Disbursement For:         City       State       Zip Code         Mailing Address       4590 Macarithur Boulevard       011         City       State       Zip Code         Newport Beach       CA       92660         Purpose of Dibbursement       011         Category/       Transaction ID: 11373         Dother (specify)       Category/         JOHN CAMPBELL       Disbursement For:       2012         Category       Transaction ID: 11373         Date of Disburseme	EMIZED	DISBURSEMEN	ITS	for each	category of the			21	b [	22	X	1			1	$\square$		
HOYER FOR CONGRESS       Date of Disbursement         Mailing Address       700 13TH STREET, NW         City       State       Zip Code         WASHINGTON       DC       20005         Purpose of Disbursement       Disbursement       5000.0         Dinner 6.23       Candidate Name       Coll         Candidate Name       Disbursement For:       2012         State: MD       District: 05       Collegagory         Full Name (Last, First, Middle Initial)       Other (specify)       Transaction ID: 11279         JOHN CAMPBELL FOR CONGRESS       Other (specify)       Transaction ID: 11279         Mailing Address       4590 Macarthur Boulevard       Amount of Each Disbursement this         City       State       Zip Code         Newport Beach       CA       92660         Purpose of Disbursement       Coll       Coll         Lunch 6.3       Coll       Y Primary         Candidate Name       Other (specify)       Transaction ID: 11373         JOHN SULLIVAN FOR CONGRESS, INC       Mailing Address       Post of Disbursement         Mailing Address       POST OFFICE BOX 470840       Transaction ID: 11373         District: 48       State       Zip Code       Amount of Each Disbursement	for commercia	I purposes, other than usi OMMITTEE (In Full)	ing the name	and addre	ess of any politica	l con	nm	ittee 1										<u> </u>
WASHINGTON       DC       20005         Purpose of Disbursement       011       Category/ Type         Office Sought:       X House       Disbursement For:       2012         State: MD       District: 05       Other (specify)       Transaction ID:         JOHN CAMPBELL FOR CONGRESS       District: 05       Diate of Disbursement         Mailing Address       4590 Macarthur Boulevard       Other (specify)       Transaction ID:       11279         City       State       Zip Code       Amount of Each Disbursement       Disbursement       1000.0         Cardidate Name       Category/ JOHN BT III CAMPBELL       Disbursement For:       2012       Amount of Each Disbursement this         Cardidate Name       District: 48       Disbursement For:       2012       Amount of Each Disbursement this         JOHN SULLIVAN FOR CONGRESS, INC       Mailing Address       POST OFFICE BOX 470840       Transaction ID:       11373         Date of Disbursement       Other (specify)       Transaction ID:       11373         JOHN SULLIVAN FOR CONGRESS, INC       Mailing Address       POST OFFICE BOX 470840       Amount of Each Disbursement this         View       State: CA       Disbursement For:       2012       Amount of Each Disbursement this         Office Sought:       X	HOYER FO	OR CONGRESS	EET, NW							Date	of D	)ist	ourse	eme			0 ľ	ľ
Dimer 6.23       011         Candidate Name       011         STENY HAMILTON HOYER       Disbursement For:       2012         Stext HAMILTON HOYER       X Primary       General         President       District: 05       Transaction ID:       11279         JOHN CAMPBELL FOR CONGRESS       Transaction ID:       11279         Mailing Address       4590 Macarthur Boulevard       Øf6 % / 0,3 / 2,0 1         City       State       Zip Code         Purpose of Disbursement       011       Category/ Type         Office Sought:       X House       Disbursement For:       2012         Candidate Name       011       Category/ Type       1000,0         Office Sought:       X House       Disbursement For:       2012         Candidate Name       Other (specify) ▼       Amount of Each Disbursement       1000,0         Office Sought:       X House       Disbursement For:       2012         Senate       President       Transaction ID:       11373         JOHN SULLIVAN FOR CONGRESS, INC       Mailing Address       POST OFFICE BOX 470840       Amount of Each Disbursement this         City       State:       OK       74147       Purpose of Disbursement       1000,0         Office Sought:		TON								Amo	unt o	of E	Each	Dis	sburse	-		
Office Sought:       X       House       Disbursement For:       2012         X       Primary       General       Other (specify) ▼         Full Name (Last, First, Middle Initial)       JOHN CAMPBELL FOR CONGRESS       Transaction ID:       11279         Mailing Address       4590 Macarthur Boulevard       Ø 6 M / 0 0 3 / 2 0 1       Amount of Each Disbursement         City       State       Zip Code       Amount of Each Disbursement       1000.0         Purpose of Disbursement       011       Category/ Type       1000.0         Office Sought:       X       House       Disbursement For:       2012         State: CA       District: 48       Other (specify) ▼       Transaction ID:       11373         JOHN SULLIVAN FOR CONGRESS, INC       Mailing Address       POST OFFICE BOX 470840       Ø11       Category/ Type         Office Sought:       X       House       Disbursement For:       2012       Amount of Each Disbursement         Mailing Address       POST OFFICE BOX 470840       Ø11       Category/ Type       1000.0         Office Sought:       X       House       Disbursement For:       2012         Y Pringary       General       Ø11       Category/ Type       1000.0         Office Sought:       X	Dinner 6.23 Candidate Na	ame					ate	egory/		L.						50	00.00	)
JOHN CAMPBELL FOR CONGRESS       Date of Disbursement for:         Mailing Address       4590 Macarthur Boulevard         City       State       Zip Code         Newport Beach       CA       92660         Purpose of Disbursement       011         Lunch 6.3       011         Cardidate Name       011         Office Sought:       X House         Senate       Disbursement For:       2012         Senate       Other (specify)         Full Name (Last, First, Middle Initial)       JOHN SULLIVAN FOR CONGRESS, INC         Mailing Address       POST OFFICE BOX 470840         City       State       Zip Code         Mailing Address       POST OFFICE BOX 470840       Amount of Each Disbursement this         Office Sought:       X House       Disbursement For:       2012         JOHN SULLIVAN       OK 74147       Amount of Each Disbursement this         011       Category/ Type       1000.0         Office Sought:       X House       Disbursement For:       2012         Office Sought:       X House       Other (specify)       Amount of Each Disbursement this         Office Sought:       X House       Disbursement For:       2012         Office Sought:       X House <td>Office Sough</td> <td>t: X House Senate President</td> <td>X</td> <td>Primary</td> <td>General</td> <td></td> <td>- 1 3</td> <td>/pe</td> <td></td>	Office Sough	t: X House Senate President	X	Primary	General		- 1 3	/pe										
City     State     Zip Code       Newport Beach     CA     92660       Purpose of Disbursement     011       Lunch 6.3     011       Cardidate Name     011       JOHN BT III CAMPBELL     011       Office Sought:     X       President     Disbursement For:       2012     Senate       President     Other (specify)       State:     CA       Disbursement For:     2012       X     Primary       General     Other (specify)       JOHN SULLIVAN FOR CONGRESS, INC     Transaction ID:       Mailing Address     POST OFFICE BOX 470840       City     State     Zip Code       TULSA     OK     74147       Purpose of Disbursement     011       Cardidate Name     011       Category/     JOHN SULLIVAN       Office Sought:     X       House     Disbursement For:       2012     Senate       Other (specify)     Type	JOHN CAN	IPBELL FOR CONGF								Date	of D		ourse	eme		Ŷ	0 Å	Y
Newport Beach       CA       92660         Purpose of Disbursement       011         Lunch 6.3       011         Candidate Name       011         JOHN BT III CAMPBELL       011         Office Sought:       X         Y       President         Office Sought:       X         President       Other (specify)         State: CA       District: 48         Full Name (Last, First, Middle Initial)       JOHN SULLIVAN FOR CONGRESS, INC         Mailing Address       POST OFFICE BOX 470840         City       State       Zip Code         TULSA       OK       74147         Purpose of Disbursement       011         Cardidate Name       011         JOHN SULLIVAN       Disbursement For:       2012         City       State       Zip Code         TULSA       OK       74147         Purpose of Disbursement       011       Category/         JOHN SULLIVAN       Disbursement For:       2012         Senate       President       Other (specify)          Office Sought:       X       House       Disbursement For:       2012         State: OK       District: 01       Other (specify)	Mailing Addre	ess 4590 Macarthu	ir Boulevard	d						06			0	3		2	01	
Office Sought:       X       House       Disbursement For:       2012         Senate       President       Other (specify)       Image: Construct and the specify and the specific and	Newport Be Purpose of D Lunch 6.3 Candidate Na	isbursement				C	- ī				unt o	of E	Each	Dis	sburse	0	-	
JOHN SULLIVAN FOR CONGRESS, INC       Date of Disbursement         Mailing Address       POST OFFICE BOX 470840         City       State       Zip Code         TULSA       OK       74147         Purpose of Disbursement       011         Lunch 6.16       011         Candidate Name       011         JOHN SULLIVAN       Disbursement For:         2012       Senate         President       Other (specify)         State: OK       District: 01	Office Sough	t: X House Senate President	X	Primary	General		Ty	/pe										
City       State       Zip Code         TULSA       OK       74147         Purpose of Disbursement       011         Lunch 6.16       011         Candidate Name       011         JOHN SULLIVAN       Type         Office Sought:       X         President       Disbursement For:       2012         Senate       Primary       General         Other (specify)       Tother (specify)         SUBTOTAL of Disbursements This Page (optional)       7000.0		,	ESS, INC							Date	of D		ourse	eme		Y	Y	Y
TÚLSA       OK       74147         Purpose of Disbursement       011         Lunch 6.16       011         Candidate Name       011         JOHN SULLIVAN       Category/         Office Sought:       X         House       Disbursement For:       2012         Senate       Y         President       Other (specify)         State: OK       District: 01	Mailing Addre	POST OFFICE	BOX 4708	340									1	6		2	01	1
Lunch 6.16       011         Candidate Name       011         JOHN SULLIVAN       Type         Office Sought:       X         House       Disbursement For:       2012         Senate       Y Primary       General         President       Other (specify)       ▼         State: OK       District: 01       Tother (specify)	TULSA									Amou	unt o	of E	Each	Dis	sburse	-		
Office Sought:       X       House       Disbursement For:       2012         Senate       X       Primary       General         President       Other (specify)       ▼         State: OK       District: 01       Total	Lunch 6.16 Candidate Na	ame					ate	egory/		L						.0	50.00	
	Ū	Senate President	X	Primary	General	<u> </u>	- 1											
	SUBTOTAL of	Disbursements This Page	e (optional)						<u> </u>							70	00.00	)
TOTAL This Period (last page this line number only)       FEC Schedule B ( Form 3X) (R         FE6 AN026       FEC Schedule B ( Form 3X) (R		eriod (last page this line n	umber only) .															

SCHEDULE B (FEC Form 3X)	[ <b>[</b>	
	Use separate schedule(s)	FOR LINE NUMBER: PAGE 81 / 84 (check only one)
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 24 25
		27 28a 28b 28c 29
		ny person for the purpose of soliciting contributions
	name and address of any political comr	nittee to solicit contributions from such committee
NATIONAL ASSOCIATION OF HEAL	TH UNDERWRITERS PAC (HUP)	AC)
Full Name (Last, First, Middle Initial)		Transaction ID: 11315
KELLY PAC		Date of Disbursement
Mailing Address 901 N WASHINGTC	N STREET SUITE 102	
City	State Zip Code	Amount of Each Disbursement this Perio
ALEXANDRIA	VA 22314	2500.00
Purpose of Disbursement Dinner 6.6		2300.00
Candidate Name		tegory/
KELLY PAC		Гуре
	bursement For:	
Senate	Primary General	
State: District:	Other (specify)	
Full Name (Last, First, Middle Initial)		
KEN CALVERT FOR CONGRESS CC	MMITTEE	Transaction ID: 11299 Date of Disbursement
		M M / D D / Y Y Y Y
Mailing Address PO Box 20123		06 20 2011
City Riverside	State Zip Code CA 92516	Amount of Each Disbursement this Peric
Purpose of Disbursement		2500.00
Golf Tournament		011
Candidate Name		tegory/
KEN CALVERT		Гуре
Office Sought: X House Dis	bursement For: 2012 X Primary General	
President	Conter (specify) ▼	
State: CA District: 44		
Full Name (Last, First, Middle Initial)		Transaction ID: 11329
MAJORITY COMMITTEE PACMC P	AC	Date of Disbursement
Mailing Address P.O. BOX 10134		
City BAKERSFIELD	State Zip Code CA 93389	Amount of Each Disbursement this Peric
Purpose of Disbursement	UA 93389	1000.00
Contribution		011
Candidate Name MAJORITY COMMITTEE PACMC P	Ca	tegory/ Type
Office Sought: House Dis	bursement For:	
Senate	Primary General	
President	Other (specify)	
State: District:		
CURTOTAL of Disburgements This Dass (arti-	anal)	6000.00
SUBTOTAL of Disbursements This Page (optic	וומו)	
TOTAL This Period (last page this line number	only)	
6AN026		FEC Schedule B (Form 3X) (Revise

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		-	R LINE	-	R:			F	PAGE	82/	84
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			eck only 21b 27	22 28a	X	23 28b		24 280	, [	25 29	23
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name												S
NAME OF COMMITTEE (In Full)		COIII				ibuti			11 3001	CON		
	NDERWRITERS PAC (H	HUP.	AC)	)								
Full Name (Last, First, Middle Initial) MARSHA BLACKBURN FOR CONGRESS	, INC.				Date	of Di	sburs	sen				
Mailing Address PO BOX 3750					<sup>м</sup> 6	М	/ D.	13	3	Y	ž o ľ	1
	State Zip Code TN 37024				Amou	int of	f Each	n D	Disburs	_	nt this	
Purpose of Disbursement Lunch 6.13			011		L.					1	000.00	)
Candidate Name MARSHA MRS. BLACKBURN			itego Гуре									
President	ment For: 2012 Primary General Other (specify) ▼											
State: TN District: 07 Full Name (Last, First, Middle Initial)					Tropo	ti	on ID		1127	'7		
MATHESON FOR CONGRESS					Date		sburs	en	nent		Y Y	Y
Mailing Address P.O. BOX 521048					06			03	3		žo i	1
	State Zip Code UT 84152				Amou	int of	f Each	n D	Disburs		nt this	
Purpose of Disbursement Breakfast 6.3		_	011		L.					2	500.0	)
Candidate Name JAMES D MATHESON			itego Type									
President	ment For: 2012 Primary General Other (specify) ▼											
State: UT District: 02												
Full Name (Last, First, Middle Initial) MICHIGAN REPUBLICAN PARTY					<b>Trans</b> Date	of Di	sburs	sen	nent			
Mailing Address 520 SEYMOUR STREET					<sup>м</sup> 6	М		23	3	Y	ž01	1 `
,	State Zip Code MI 48933				Amou	int of	f Each	n D	Disburs		nt this	
Purpose of Disbursement Reception 6.23			011		L.					2	500.0	)
Candidate Name MICHIGAN REPUBLICAN PARTY			itego Fype	,								
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼											
State: District:						-	-					
SUBTOTAL of Disbursements This Page (optional) .				•						60	0.00	]
TOTAL This Period (last page this line number only)				►								

FE6AN026

ITEMIZED DISBURSEMENTS       for each catagory of the?       the child yeach       the child yeach         Mained Summary Page       in the sold or used by any perror for the purpose of solding contributions from such committee       the sold or used by any perror for the purpose of solding contributions from such committee         NAME OF COMMITTEE (in Full)       NAMEONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)       Transaction ID: 11336         Full Name (Last, First, Middle Initia)       Transaction ID: 11336       Date of Disbursement         Maing Address       PO BOX 8666       011       City         City       State       Zip Code       Amount of Each Disbursement         OMME Casultin NELSON       Disbursement For:       2012       Amount of Each Disbursement         Office Sought:       House       Disbursement For:       2012       Transaction ID: 11350         Office Sought:       House       Disbursement For:       2012       Transaction ID: 11350         Office Sought:       House       Disbursement For:       2012       Transaction ID: 11350         PORTMAN FOR SENATE COMMITTEE       OHer (specily) ▼       Transaction ID: 11331       Transaction ID: 11331         Dublin       OH 43017       Type       Other (specily) ▼       Transaction ID: 11331         City       District: 00       OH 43017 <td< th=""><th></th><th></th><th>B (FEC Forr</th><th>-</th><th></th><th>arate schedule(s)</th><th></th><th></th><th>R LINE</th><th></th><th>R:</th><th></th><th></th><th>PA</th><th>GE</th><th>83 /</th><th>84</th></td<>			B (FEC Forr	-		arate schedule(s)			R LINE		R:			PA	GE	83 /	84
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)         NATICONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)         Full Name (Last, First, Middle Initial)         NELSON 2012         Mailing Address       PO BOX 8666         City       State         OMAHA       NE         Purpose of Disbursement       011         Cardidate Name       Category/ E BENJAMIN NELSON         Cardidate Name       Disbursement For:         Cardidate Name       Disbursement For:         City       State: NG         Office Sought:       House         Value       Disbursement For:         Office Sought:       Mailing Address         9856 ARCHER LANE       011         City       OH         Office Sought:       House         President       Disbursement For:         Office Sought:       House         President       Disbursement For:         Office Sought:       House         Value       Disbursement For:         Office Sought:       House         President       Disbursement For:         Office Sought:       House	ITEMIZE		SBURSEME	INTS					21b	22	Х			1			
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)         Full Name (Last, First, Middle Initial)         NELSON 2012         Mailing Address       PO BOX 8666         OMAHA       NE         OMAHA       NE         Purpose of Disbursement       011         Candidate Name       011         State: NE       Distursement For:       2012         X       Senate       Other (specify)         PORTMAN FOR SENATE COMMITTEE       Transaction ID: 11350         Mailing Address       9856 ARCHER LANE         City       Disbursement For:       2012         Y       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       Disbursement For:       2012         X       Primary       General         Office Sought:       House       Disbursement For:       2012	or for comme	rcial pu	rposes, other than														S
NELSON 2012       Date of Disbursement         Mailing Address       PO BOX 8666         City       State       Zip Code         OMAHA       NE       68108         Purpose of Disbursement       011         Lunch 6.16       011         Candidate Name       Disbursement For:       2012         X       State:       NE         Office Sought:       X       Yenate         Yesident       Disbursement For:       2012         X       President       Other (specify)         State:       NE       State         Port MAN FOR SENATE COMMITTEE       Disbursement         Mailing Address       9856 ARCHER LANE         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011       Candidate Name         ROB PORTMAN       Transaction ID:       11331         Date of Disbursement       011       Candidate Name         ROB PORTMAN       OH       43017         Purpose of Disbursement       011 </td <td></td> <td></td> <td>, ,</td> <td>F HEALTH U</td> <td>JNDERWF</td> <td>RITERS PAC (I</td> <td>HUF</td> <td>PAC</td> <td>;)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>			, ,	F HEALTH U	JNDERWF	RITERS PAC (I	HUF	PAC	;)								
City       State       Zip Code         OMAHA       NE       68108         Purpose of Disbursement       011         Cardidate Name       011         State: NE       Disbursement For:         2012       X         Y Primary       General         PORTMAN FOR SENATE COMMITTEE       Date of Disbursement         Maling Address       9856 ARCHER LANE         City       State       Zip Code         DIBLIN       OH       43017         Purpose of Disbursement       011         Category/       Transaction ID:       11331         Portices Sought:       House       Disbursement For:       2012         X       Primary       General       011         Category/       Transaction ID:       11331         Define Sought:       House       Disbursement For:       2012         X       Senate       Primary       General       011         Office Sought		•		)						Date	of D	isburs	eme			V	V
OMAHA       NE       68108         Purpose of Disbursement       011       Category/ Type       011       0100.00       011       011       0100.00       011       011       011       011       011       011       011       011       011       011       011       011       011       011 </td <td>Mailing A</td> <td>ddress</td> <td>PO BOX 866</td> <td>66</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>″ <b>_</b>1</td> <td>ő</td> <td></td> <td>2</td> <td>01</td> <td>1</td>	Mailing A	ddress	PO BOX 866	66								″ <b>_</b> 1	ő		2	01	1
Lunch 8.16       011         Candidate Name       011         E EENAMIN NELSON       Type         Office Sought:       House         X       Senate         President       Other (specify)         State: NE       District: 00         Full Name (Last, First, Middle Initial)       PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State         DUBLIN       OH         Candidate Name       Category/ Type         Office Sought:       House         X       Senate         President       Other (specify)         Office Sought:       House         Y = President       Disbursement For:         2012       X         President       Other (specify)         State: OH       District: 00         Full Name (Last, First, Middle Initial)         PORTMAN       President         State: OH       District: 00         Full Name (Last, First, Middle Initial)         PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State       Zip Code         DUBLIN       OH       43017	City OMAHA									Amou	int o	f Each	) Dis	sburse	-		
È BENJAMIN NELSON       Type         Office Sought:       House       Disbursement For:       2012         X Primary       General       Other (specify)       ✓         State: NE       District: 00       ✓       Transaction ID:       11350         PORTMAN FOR SENATE COMMITTEE       Date of Disbursement       Date of Disbursement       Date of Disbursement         Mailing Address       9856 ARCHER LANE       011       Amount of Each Disbursement this I       011         City       State:       OH       43017       Amount of Each Disbursement this I         DuBLIN       OH       43017       Type       -1000.00         Office Sought:       House       Disbursement For:       2012       X       Primary       General         Office Sought:       House       Disbursement For:       2012       X       Primary       General         Office Sought:       House       Disbursement For:       2012       X       Y       Y       2 0 1 1         Office Sought:       House       Disbursement For:       2012       X       Y       2 0 1 1         Purpose of Disbursement       Other (specify)       ✓       Amount of Each Disbursement this I       Disbursement         Office Sought:<			ursement					01	1	L.					20	00.00	)
X       Senate President       Y Primary Other (specify)       General Other (specify)         Full Name (Last, First, Middle Initial) PORTMAN FOR SENATE COMMITTEE       Transaction ID: 11350 Date of Disbursement         Mailing Address       9856 ARCHER LANE       Amount of Each Disbursement this I Other (specify)         City       State       Zip Code DUBLIN       Other (specify)         Office Sought:       House President       Other (specify)       Amount of Each Disbursement this I Other (specify)         Office Sought:       House President       Disbursement For: Other (specify)       2012         Full Name (Last, First, Middle Initial)       Transaction ID: 11331 Date of Disbursement         PORTMAN       Other (specify)       Transaction ID: 11331 Date of Disbursement         Via Bulk       State       Zip Code Other (specify)       Transaction ID: 11331 Date of Disbursement         PortmAN       For J       Y 2 0 1 1 (State: OH       Other (specify)       Amount of Each Disbursement this I 0 6 M         City       State       212       Other (specify)       Amount of Each Disbursement this I 0 6 M       101 ( 2 2 0 1 1 (2 4 0 1)         Office Sought:       House President       Disbursement For: 2012       212       Amount of Each Disbursement this I 0 0 ther (specify)       011 (2 4 0 1)         Office Sought:       House President																	
Full Name (Last, First, Middle Initial)       PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         Category/       ROB PORTMAN         Office Sought:       House         X Senate       President         State: OH       Disbursement For:       2012         Kalling Address       9856 ARCHER LANE         Transaction ID:       11350         DubLin       OH       43017         Purpose of Disbursement       011         Category/       Type         Office Sought:       House       Disbursement For:         X Senate       President         State: OH       District: 00         Full Name (Last, First, Middle Initial)       PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State       OH       43017         Purpose of Disbursement       OH       43017         Purpose of Disbursement       OH       43017         Purpose of Disbursement       OH       10011         Cardidate Name       Category/       Type<	Office So	ught:	X Senate		Primary	General											
PORTMAN FOR SENATE COMMITTEE       Date of Disbursement         Mailing Address       9856 ARCHER LANE         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         Candidate Name       011         Candidate Name       011         Cardidate Name       Disbursement For:         Office Sought:       House         President       Other (specify)         State: OH       District: 00         Full Name (Last, First, Middle Initial)         PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       OH       43017         Office Sought:       House       Disbursement For:       2012         X       President       Other (specify)																	
City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         Candidate Name       011         Cardidate Name       011         Category/       Type         Office Sought:       House         X       Senate         President       Other (specify)         State: OH       District: 00         Full Name (Last, First, Middle Initial)         PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State         DUBLIN       OH         OH       43017         Purpose of Disbursement       011         City       State         DUBLIN       OH         OH       43017         Purpose of Disbursement       011         Category/       Type         Office Sought:       House         Disbursement For:       2012         X       Senate         President       Other (specify)         State: OH       District: 00         State: OH       District: 00				•						Date	of D	isburs	eme	ent			Y
DÜBLIN       OH       43017         Purpose of Disbursement       011         Dinner 6.14       011         Candidate Name       ROB PORTMAN         Office Sought:       House         Y       President         State: OH       District: 00         Full Name (Last, First, Middle Initial)         PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State         DUBLIN       OH         OH       43017         Purpose of Disbursement         Dinner 6.14         Candidate Name         Category/ ROB PORTMAN         Office Sought:       House         Disbursement         Dinner 6.14         Candidate Name         Category/ ROB PORTMAN         Office Sought:       House         Office Sought:       Disbursement For:         Office Sought:       House         Office Sought:       Disbursement For:         State: OH       District: 00	Mailing A	ddress	9856 ARCHI	ER LANE							м		4	/ Y	Ž	0 ľ	1
Dinner 6.14       011         Cardidate Name       011         Cardidate Name       011         Cardidate Name       011         Condidate Name       011         Cardidate Name       011         Category/       Type         Office Sought:       House         President       Other (specify)         State: OH       District: 00         Full Name (Last, First, Middle Initial)       PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State         Dinner 6.14       011         Cardidate Name       011         Cardidate Name       011         Cardidate Name       Disbursement For:         Office Sought:       House         Disbursement For:       2012         X       Primary         Office Sought:       House         Disbursement For:       2012         X       Primary         Office Sought:       House         Y Primary       General         Other (specify)          Senate       Y Primary         Y Primary       General         Other (specify)										Amou	int o	f Each	i Dis	sburse	men	t this	Period
ROB PORTMAN       Type         Office Sought:       House       Disbursement For:       2012         X       Senate       Primary       General         Other (specify)       ✓         State: OH       District: 00         Full Name (Last, First, Middle Initial)       PORTMAN FOR SENATE COMMITTEE         Mailing Address       9856 ARCHER LANE         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         Candidate Name       011         Candidate Name       Disbursement For:       2012         X       Senate       Primary       General         Office Sought:       House       Disbursement For:       2012         X       Senate       Primary       General         Office Sought:       House       Disbursement For:       2012         X       Senate       Primary       General       0ther (specify)         State: OH       District: 00       Other (specify)       ✓       0ther (specify)			ursement					01	1	L.			0		-10	00.00	)
x       Senate       X       Primary       General         President       District: 00       Other (specify)       Image: Construction of the co									-								
Full Name (Last, First, Middle Initial)       PORTMAN FOR SENATE COMMITTEE       Transaction ID: 11331         Mailing Address       9856 ARCHER LANE       0 6 <sup>M</sup> / <sup>D</sup> 1 4 / <sup>Y</sup> 2 0 1 1         City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         Dinner 6.14       011         Candidate Name       Disbursement For:       2012         X       Senate       X         President       Other (specify)       V	Office Sc	ught:	X Senate President		Primary	General											
PORTMAN FOR SENATE COMMITTEE       Initiation District Point District Point District Point District Point Poi										-				1001			
City       State       Zip Code         DUBLIN       OH       43017         Purpose of Disbursement       011         Dinner 6.14       011         Candidate Name       011         Cardidate Name       Disbursement For:         Office Sought:       House         Versident       Disbursement For:         2012       X         Senate       Primary         Other (specify)				•						Date	of D	isburs	eme	ent	· · · ·	v	V
DÚBLIN       OH       43017         Purpose of Disbursement       011         Dinner 6.14       011         Candidate Name       Category/         ROB PORTMAN       Type         Office Sought:       House         X       Senate         President       Other (specify)         State: OH       District: 00	Mailing A	ddress	9856 ARCHI	ER LANE							IVI	′ <b>[</b> 1	4		2	01	1 '
Dinner 6.14     011       Candidate Name     Category/ Type       Office Sought:     House       X     Senate       President     Other (specify)       State: OH     District: 00										Amou	int o	f Each	i Dis	sburse			
ROB PORTMAN     Type       Office Sought:     House     Disbursement For:     2012       X     Senate     X     Primary     General       President     Other (specify)     ▼	Dinner 6.	14						01	1	L.					10	00.00	)
X     Senate     X     Primary     General       President     Other (specify)     ▼									-								
	Office Sc	ught:	X Senate		C Primary	General											
SUBTOTAL of Disbursements This Page (optional)	State: O	Η	District: 00														
	SUBTOTAL	of Dist	oursements This P	age (optional)					•						20	00.00	)
TOTAL This Period (last page this line number only)	TOTAL Thi	s Perioc	d (last page this line	e number only	)				►								

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 84/84
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check on	ly one)
	Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		d by any person	for the purpose of soliciting contributions
NATIONAL ASSOCIATION OF HEALTH	JNDERWRITERS PAC (	HUPAC)	
Full Name (Last, First, Middle Initial) SCHWEIKERT FOR CONGRESS			Transaction ID: 11363 Date of Disbursement
Mailing Address 8776 E SHEA BLVD, SU	JITE B3A-626		$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 6 \end{array} \\ \end{array} \\ \left( \begin{array}{c} D \\ 2 \\ 3 \end{array} \right) \\ \left( \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 1 \end{array} \right) \\ \left( \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 1 \end{array} \right) \\ \left( \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 1 \end{array} \right) \\ \left( \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 1 \\ 1 \end{array} \right) \\ \left( \begin{array}{c} Y \\ Y $
City SCOTTSDALE	StateZip CodeAZ85260		Amount of Each Disbursement this Period
Purpose of Disbursement Lunch 6.23		011	1000.00
Candidate Name DAVID SCHWEIKERT		Category/ Type	
5 X	ement For: 2012 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) SCOTT BROWN FOR US SENATE COM	MITTEE INC		Transaction ID: 11334 Date of Disbursement
Mailing Address P.O. BOX 395			
City WRENTHAM	State Zip Code MA 02903		Amount of Each Disbursement this Perioc
Purpose of Disbursement Dinner 6.30 011			1000.00
Candidate Name SCOTT P BROWN		Category/ Type	
ů –	ement For: 2012 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) SUE MYRICK FOR CONGRESS			Transaction ID: 11349 Date of Disbursement
Mailing Address P.O. BOX 37091			
City CHARLOTTE	State Zip Code NC 28237		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution 011			1000.00
Candidate Name SUE MYRICK		Category/ Type	
Senate X President	ement For: 2012 Primary General Other (specify) ▼		
State: NC District: 09			2000.00
SUBTOTAL of Disbursements This Page (optional)			3000.00
TOTAL This Period (last page this line number only E6AN026	)	····· •	FEC Schedule B (Form 3X) (Revised