

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 05 01 2006 through 05 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas W. Hiltachk

Signature of Treasurer Electronically Filed by Thomas W. Hiltachk Date 06 12 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Health Net, Incorporated Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		90578.83
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	110123.19									
(c) Total Receipts (from Line 19) .....	6830.84	37875.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	116954.03	128454.03								
7. Total Disbursements (from Line 31) .....	20000.00	31500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	96954.03	96954.03								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

CA

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Health Net, Incorporated Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5940.62	23451.54
(i) Itemized (use Schedule A) .....	890.22	14423.66
(ii) Unitemized .....	6830.84	37875.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	6830.84	37875.20
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	6830.84	37875.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6830.84	37875.20

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	20000.00	31500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20000.00	31500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	20000.00	31500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	6830.84	37875.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6830.84	37875.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 126		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> David Anderson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 21281 Burbank Blvd.		<b>Transaction ID:</b> INC:A:3662	
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Chief Sales Officer		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Suzanne L. Austin		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 21281 Burbank Blvd.		<b>Transaction ID:</b> INC:A:3664	
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net of California	Occupation Director, Membership Accounting		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Marshall Bentley		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 3400 Data Drive		<b>Transaction ID:</b> INC:A:3665	
City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation VP & Counsel		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Ray Nan Berry

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3667

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3669

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3670

Amount of Each Receipt this Period  
 76.92

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	121.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 126
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Russell A. Bretall		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006
Mailing Address 21271 Burbank Blvd.		<b>Transaction ID:</b> INC:A:3672
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net, Inc.	Occupation Director IS Applications	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Daniel S. Carlson		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3677
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net Federal Services, Inc.	Occupation Director Operations	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffrey A. Cinciarelli		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2006
Mailing Address 11971 Foundation Place C		<b>Transaction ID:</b> INC:A:3679
City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net, Inc.	Occupation Director Sales	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	95.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 126
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Renee D. Claborn</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 12901 SE 97th Avenue		Transaction ID: INC:A:3680	
City Clackamas	State OR	Amount of Each Receipt this Period 20.00	
Zip Code 97015			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.		Occupation Director Healthcare Services	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B. Gerald V. Coil</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 503 Canal Blvd.		Transaction ID: INC:A:3682	
City Point Richmond	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94804			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Inc.		Occupation President MHN & SVP	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Edward F. Cotter, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 3400 Data Drive		Transaction ID: INC:A:3685	
City Rancho Cordova	State CA	Amount of Each Receipt this Period 45.00	
Zip Code 95670			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.		Occupation VP, Natl Medicare Compliance	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	165.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Robert F. Crawford, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 1230 West Washington Street		<b>Transaction ID: INC:A:3686</b>	
City State Zip Code Tempe AZ 85281	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Director Provider Network Management		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>B. Maria L. Dietz</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 13221 SA 68th Parkway		<b>Transaction ID: INC:A:3688</b>	
City State Zip Code Tigard OR 97223	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Director Product Development		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>C. Alida K. Dodd</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address One Far Mill Crossing		<b>Transaction ID: INC:A:3689</b>	
City State Zip Code Shelton CT 06484	Amount of Each Receipt this Period 26.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Director Financial Analysis		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	66.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3600 Port of Tacoma Road #505

City State Zip Code  
Tacoma WA 98424

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: INC:A:3690

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Tim Duval

Mailing Address 2015 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation Chief Technology Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: INC:A:3692

Amount of Each Receipt this Period  
48.00

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

Mailing Address 2800 N. 44th Street #900

City State Zip Code  
Phoenix AZ 85008

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

Name of Employer Health Net, Inc. Occupation President HN Arizona

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: INC:A:3694

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	178.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3696

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Cathleen F. Fischbach

Mailing Address 2025 Aerojet Drive

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Inc. Occupation Dir. Claims Quality Mgmt.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3697

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
David J. Friedman

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation SVP and General Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3698

Amount of Each Receipt this Period  
 30.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3699

Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
Paul A. Gilbertson

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP MCS Support Services

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3700

Amount of Each Receipt this Period  
 75.00

**C.** Full Name (Last, First, Middle Initial)  
Richard J. Griesmer

Mailing Address 12033 Foundation Place

City Gold River State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP Network Services

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3701

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Maurice Hebert

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Controller

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 05 / 2006

Transaction ID: INC:A:3702

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Diane C. Iverson

Mailing Address 11971 Foundation Place C

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation VP General Auditor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 05 / 2006

Transaction ID: INC:A:3708

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Elita Johnston

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 05 / 2006

Transaction ID: INC:A:3711

Amount of Each Receipt this Period  
20.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Frank L. Kelly

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir. Materials Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.70

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3712

Amount of Each Receipt this Period  
 38.47

**B.** Full Name (Last, First, Middle Initial)  
Scott Kelly

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Sr. Vice President Field Operations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3713

Amount of Each Receipt this Period  
 40.00

**C.** Full Name (Last, First, Middle Initial)  
Randal Kirchner

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP Program Support

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3714

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	128.47
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 126						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

**A.** Full Name (Last, First, Middle Initial)  
Anthony J. Koelker

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services Occupation Director Provider Relations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3715

Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
Gerry P. Long

Mailing Address 503 Canal Blvd.

City Point Richmond State CA Zip Code 94804

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

Name of Employer MHN Government Services, Inc. Occupation VP Operations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3718

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
Denise Louie

Mailing Address 21650 Oxnard Street

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net of California Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3720

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	65.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Karin Mayhew

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation SVP Organization Effectiveness

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3724

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Candace Maynard

Mailing Address 3131 Camino Del Rio

City San Diego State CA Zip Code 92108

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

Name of Employer Health Net of California Occupation Director, Case Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3725

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 3636 Nobel Drive #300

City San Diego State CA Zip Code 92122

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3726

Amount of Each Receipt this Period  
 76.92

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	151.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 11931 Foundation Place D

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net of California Occupation Vice President, California Health Plan

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3727

Amount of Each Receipt this Period  
24.00

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

Mailing Address 2025 Aerojet Drive

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation Director of Finance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3728

Amount of Each Receipt this Period  
25.00

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

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3730

Amount of Each Receipt this Period  
40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	89.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 40 Wall Street, 6th Floor

City State Zip Code  
New York NY 10005

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

Name of Employer Health Net, Inc. Occupation Director Sales

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: INC:A:3731

Amount of Each Receipt this Period  
38.00

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

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: INC:A:3733

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1300 Division Road, Suite 301

City State Zip Code  
West Warwick RI 02893

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

Name of Employer Health Net Federal Services Occupation VP Optimization

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2006

Transaction ID: INC:A:3734

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	113.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation SVP Investor Relations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3736

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 2107 Wilson Blvd., #900

City Arlington State VA Zip Code 22201

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

Name of Employer Health Net, Inc. Occupation VP Business Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3737

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
Anthony S. Piszal

Mailing Address 24002 Long Valley Road

City Hidden Hills State CA Zip Code 91320

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

Name of Employer Health Net, Inc. Occupation EVP & CFO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3739

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	275.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Scott A. Ptacek

Mailing Address 1230 West Washington Street

City State Zip Code  
Tempe AZ 85281

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

Name of Employer: Health Net of Arizona, Inc.  
Occupation: VP Medicare Sales & Operations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 05 / 2006

Transaction ID: INC:A:3740

Amount of Each Receipt this Period  
50.00

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

Mailing Address 3400 Data Drive

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer: Health Net, Inc.  
Occupation: VP & Chief Medical Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
05 / 05 / 2006

Transaction ID: INC:A:3741

Amount of Each Receipt this Period  
20.00

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

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer: Health Net Federal Services, Inc.  
Occupation: Chief Medical Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
05 / 05 / 2006

Transaction ID: INC:A:3747

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	145.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 126
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Susan Schwartz</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 104 Ticino Road		<b>Transaction ID: INC:A:3748</b>
City State Zip Code New Bern NC 28562	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 38.00
Name of Employer Health Net Inc.	Occupation VP Bene Coalition/Congress Svc	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey Lee Shelton</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 3400 Data Drive		<b>Transaction ID: INC:A:3749</b>
City State Zip Code Rancho Cordova CA 95670	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
Name of Employer Health Net, Inc.	Occupation VP State Govt. Affairs	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Rickey Dea Simmons</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 21271 Burbank Blvd		<b>Transaction ID: INC:A:3750</b>
City State Zip Code Woodland Hills CA 91367	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 43.00
Name of Employer Health Net, Inc.	Occupation VP Information Systems	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>106.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3751

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas V. Smith

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation Dir. Natl. Mtg. and Events

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3752

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Michael P. Sobetzko

Mailing Address 21271 Burbank Blvd.

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Health Net, Inc. Occupation Director of Operations Quality & Train

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3753

Amount of Each Receipt this Period  
 20.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Charles M. Sowers

Mailing Address 1230 West Washington Street

City State Zip Code  
Tempe AZ 85281

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

Name of Employer Health Net Inc. Occupation Regional Finance Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3754

Amount of Each Receipt this Period  
38.00

**B.** Full Name (Last, First, Middle Initial)  
Brian D. Staller

Mailing Address 2025 Aerojet Drive

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Inc. Occupation Dir. Transition Mgmt.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3755

Amount of Each Receipt this Period  
20.00

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

Mailing Address 7320 Sandy Plains Avenue

City State Zip Code  
Las Vegas NV 89131

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3756

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	108.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 21281 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net Inc. Occupation Director Business Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3757

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
W. Randall Stewart

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3758

Amount of Each Receipt this Period  
38.00

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

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3759

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	128.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 26 / 126</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Franklin Tom</p> <p>Mailing Address 3400 Data Drive</p> <p>City State Zip Code Rancho Cordova CA 95670</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Health Net, Inc. Occupation: VP Legal</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 05 / 2006</span></p> <p><b>Transaction ID:</b> INC:A:3761</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Humbert Vargas</p> <p>Mailing Address 3400 Data Drive</p> <p>City State Zip Code Rancho Cordova CA 95670</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Health Net, Inc. Occupation: SVP General Manager</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 05 / 2006</span></p> <p><b>Transaction ID:</b> INC:A:3763</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Gail Watts</p> <p>Mailing Address 21650 Oxnard Street</p> <p>City State Zip Code Woodland Hills CA 91367</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Health Net, Inc. Occupation: VP Organizational Effectiveness</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 05 / 2006</span></p> <p><b>Transaction ID:</b> INC:A:3765</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">125.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Richard A. Weirich

Mailing Address 11971 Foundation Place, Suite C

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation Director Real Estate Admin.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3766

Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
Scott M. Wert

Mailing Address 10834 International Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net Inc. Occupation VP Trade Relations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3767

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Robert, S. Westbrook

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir. Government Contracts

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

Transaction ID: INC:A:3768

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 126
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. B. Curtis Westen</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 31 Roundup Road		<b>Transaction ID: INC:A:3769</b>	
City State Zip Code Bell Canyon CA 91307	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation SVP & General Counsel		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Marie Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3770</b>	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Director Facilities FHFS		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. Gay Ann Williams</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6	
Mailing Address 2800 N. 44th Street #900		<b>Transaction ID: INC:A:3771</b>	
City State Zip Code Phoenix AZ 85008	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation VP State Govt Affairs		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	140.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 126
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
James, E. Woys

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc.  
Occupation Sr. Vice President COO, FHFS

Receipt For: 2006  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3773

Amount of Each Receipt this Period  
 205.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc.  
Occupation Vice President & CFO FHS Spec.

Receipt For: 2006  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 6

**Transaction ID:** INC:A:3774

Amount of Each Receipt this Period  
 35.00

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

Mailing Address 21281 Burbank Blvd.

City Woodland Hills State CA Zip Code 91367

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

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

Receipt For: 2006  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3780

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	265.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Marshall Bentley

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP & Counsel

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3781

Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
Ray Nan Berry

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3783

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3785

Amount of Each Receipt this Period  
 25.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 126
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Pamela Ann Bohall		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3786	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Enrollment Director		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20		

Full Name (Last, First, Middle Initial) <b>B.</b> Russell A. Bretall		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 21271 Burbank Blvd.		<b>Transaction ID:</b> INC:A:3788	
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Director IS Applications		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Daniel S. Carlson		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID:</b> INC:A:3793	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Director Operations		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	121.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 126
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Jeffrey A. Cinciarelli		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 11971 Foundation Place C		<b>Transaction ID:</b> INC:A:3795
City Rancho Cordova	State CA	Zip Code 95670
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation Director Sales	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Renee D. Claborn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 12901 SE 97th Avenue		<b>Transaction ID:</b> INC:A:3796
City Clackamas	State OR	Zip Code 97015
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer Health Net, Inc.	Occupation Director Healthcare Services	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Gerald V. Coil		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 503 Canal Blvd.		<b>Transaction ID:</b> INC:A:3798
City Point Richmond	State CA	Zip Code 94804
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Health Net Inc.	Occupation President MHN & SVP	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 126		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

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

**A.** Full Name (Last, First, Middle Initial)  
Edward F. Cotter, Jr.

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP, Natl Medicare Compliance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3801

Amount of Each Receipt this Period  
 45.00

**B.** Full Name (Last, First, Middle Initial)  
Robert F. Crawford, Jr.

Mailing Address 1230 West Washington Street

City Tempe State AZ Zip Code 85281

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

Name of Employer Health Net, Inc. Occupation Director Provider Network Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3802

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Maria L. Dietz

Mailing Address 13221 SA 68th Parkway

City Tigard State OR Zip Code 97223

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

Name of Employer Health Net, Inc. Occupation Director Product Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3804

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	85.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address One Far Mill Crossing

City State Zip Code  
Shelton CT 06484

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	6

Transaction ID: INC:A:3805

Amount of Each Receipt this Period  
26.00

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

Mailing Address 3600 Port of Tacoma Road #505

City State Zip Code  
Tacoma WA 98424

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	6

Transaction ID: INC:A:3806

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Tim Duval

Mailing Address 2015 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Federal Services Occupation Chief Technology Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	6

Transaction ID: INC:A:3808

Amount of Each Receipt this Period  
48.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	104.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Mark S. El Tawil</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2800 N. 44th Street #900		<b>Transaction ID: INC:A:3810</b>	
City State Zip Code Phoenix AZ 85008	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation President HN Arizona		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Daria A. Eppley</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3812</b>	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Director Op Research & An		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Cathleen F. Fischbach</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2025 Aerojet Drive		<b>Transaction ID: INC:A:3813</b>	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Inc.	Occupation Dir. Claims Quality Mgmt.		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	170.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 126
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation SVP and General Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3814

Amount of Each Receipt this Period  
 30.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3815

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Paul A. Gilbertson

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP MCS Support Services

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3816

Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Richard J. Griesmer

Mailing Address 12033 Foundation Place

City State Zip Code  
Gold River CA 95670

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

Name of Employer Health Net, Inc. Occupation VP Network Services

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3817

Amount of Each Receipt this Period  
20.00

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

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Controller

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3818

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Diane C. Iverson

Mailing Address 11971 Foundation Place C

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation VP General Auditor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3824

Amount of Each Receipt this Period  
20.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Elita Johnston

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3827

Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
Frank L. Kelly

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir. Materials Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.70

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3828

Amount of Each Receipt this Period  
 38.47

**C.** Full Name (Last, First, Middle Initial)  
Scott Kelly

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Sr. Vice President Field Operations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3829

Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	98.47
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Randal Kirchner

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation VP Program Support

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3830

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
Anthony J. Koelker

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services Occupation Director Provider Relations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3831

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
Gerry P. Long

Mailing Address 503 Canal Blvd.

City Point Richmond State CA Zip Code 94804

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

Name of Employer MHN Government Services, Inc. Occupation VP Operations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3834

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	95.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Denise Louie

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net of California Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2006

Transaction ID: INC:A:3836

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Karin Mayhew

Mailing Address 3400 Data Drive

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation SVP Organization Effectiveness

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2006

Transaction ID: INC:A:3840

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Candace Maynard

Mailing Address 3131 Camino Del Rio

City State Zip Code  
San Diego CA 92108

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

Name of Employer Health Net of California Occupation Director, Case Management

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2006

Transaction ID: INC:A:3841

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	95.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3636 Nobel Drive #300

City San Diego State CA Zip Code 92122

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3842

Amount of Each Receipt this Period  
 76.92

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

Mailing Address 11931 Foundation Place D

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net of California Occupation Vice President, California Health Plan

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3843

Amount of Each Receipt this Period  
 24.00

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

Mailing Address 2025 Aerojet Drive

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services Occupation Director of Finance

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3844

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 126
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	6

**Transaction ID:** INC:A:3846

Amount of Each Receipt this Period  

40.00
-------

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

Mailing Address 40 Wall Street, 6th Floor

City State Zip Code  
New York NY 10005

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

Name of Employer Health Net, Inc. Occupation Director Sales

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	6

**Transaction ID:** INC:A:3847

Amount of Each Receipt this Period  

38.00
-------

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

Mailing Address 2025 Aerojet Road

City State Zip Code  
Rancho Cordova CA 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	6

**Transaction ID:** INC:A:3849

Amount of Each Receipt this Period  

50.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>128.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 1300 Division Road, Suite 301

City State Zip Code  
West Warwick RI 02893

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

Name of Employer Health Net Federal Services  
Occupation VP Optimization

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: INC:A:3850

Amount of Each Receipt this Period  
25.00

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

Mailing Address 3400 Data Drive

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc.  
Occupation SVP Investor Relations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: INC:A:3852

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Robert A. Perreault

Mailing Address 2107 Wilson Blvd., #900

City State Zip Code  
Arlington VA 22201

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

Name of Employer Health Net, Inc.  
Occupation VP Business Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
05 / 19 / 2006

Transaction ID: INC:A:3853

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Anthony S. Piszal

Mailing Address 24002 Long Valley Road

City State Zip Code  
Hidden Hills CA 91320

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

Name of Employer Health Net, Inc. Occupation EVP & CFO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3855

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Scott A. Ptacek

Mailing Address 1230 West Washington Street

City State Zip Code  
Tempe AZ 85281

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

Name of Employer Health Net of Arizona, Inc. Occupation VP Medicare Sales & Operations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3856

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Steven Raffin

Mailing Address 3400 Data Drive

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation VP & Chief Medical Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3857

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Chief Medical Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3863

Amount of Each Receipt this Period  
 75.00

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

Mailing Address 104 Ticino Road

City New Bern State NC Zip Code 28562

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3864

Amount of Each Receipt this Period  
 38.00

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Lee Shelton

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP State Govt. Affairs

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3865

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	138.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 126
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Rickey Dea Simmons</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 21271 Burbank Blvd		<b>Transaction ID: INC:A:3866</b>	
City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 43.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation VP Information Systems		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00		

Full Name (Last, First, Middle Initial) <b>B. Jack R. Simpson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 2025 Aerojet Road		<b>Transaction ID: INC:A:3867</b>	
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net Federal Services, Inc.	Occupation Director, IT		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Thomas V. Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 3400 Data Drive		<b>Transaction ID: INC:A:3868</b>	
City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Health Net, Inc.	Occupation Dir. Natl. Mtg. and Events		
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	113.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Michael P. Sobetzko

Mailing Address 21271 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net, Inc. Occupation Director of Operations Quality & Train

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3869

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 1230 West Washington Street

City State Zip Code  
Tempe AZ 85281

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

Name of Employer Health Net Inc. Occupation Regional Finance Officer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3870

Amount of Each Receipt this Period  
 38.00

**C.** Full Name (Last, First, Middle Initial)  
Brian D. Staller

Mailing Address 2025 Aerojet Drive

City State Zip Code  
Rancho Cordova CA 95742

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

Name of Employer Health Net Inc. Occupation Dir. Transition Mgmt.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3871

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	78.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 7320 Sandy Plains Avenue

City State Zip Code  
Las Vegas NV 89131

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2006

Transaction ID: INC:A:3872

Amount of Each Receipt this Period  
50.00

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

Mailing Address 21281 Burbank Blvd.

City State Zip Code  
Woodland Hills CA 91367

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

Name of Employer Health Net Inc. Occupation Director Business Development

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2006

Transaction ID: INC:A:3873

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
W. Randall Stewart

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2006

Transaction ID: INC:A:3874

Amount of Each Receipt this Period  
38.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	128.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3875

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation VP Legal

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3877

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
Jennifer Humbert Vargas

Mailing Address 3400 Data Drive

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer Health Net, Inc. Occupation SVP General Manager

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

**Transaction ID:** INC:A:3879

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 21650 Oxnard Street

City State Zip Code  
Woodland Hills CA 91367

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	6

Transaction ID: INC:A:3881

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 11971 Foundation Place, Suite C

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net, Inc. Occupation Director Real Estate Admin.

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	6

Transaction ID: INC:A:3882

Amount of Each Receipt this Period  

20.00
-------

**C.** Full Name (Last, First, Middle Initial)  
Scott M. Wert

Mailing Address 10834 International Drive

City State Zip Code  
Rancho Cordova CA 95670

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

Name of Employer Health Net Inc. Occupation VP Trade Relations

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	6

Transaction ID: INC:A:3883

Amount of Each Receipt this Period  

20.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>65.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 126
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Robert, S. Westbrook

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

Name of Employer Health Net Federal Services, Inc. Occupation Dir. Government Contracts

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3884

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 31 Roundup Road

City Bell Canyon State CA Zip Code 91307

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

Name of Employer Health Net, Inc. Occupation SVP & General Counsel

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3885

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2025 Aerojet Road

City Rancho Cordova State CA Zip Code 95742

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

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

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 9 / 2 0 0 6

Transaction ID: INC:A:3886

Amount of Each Receipt this Period  
 40.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 126
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Gay Ann Williams		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 2800 N. 44th Street #900		Transaction ID: INC:A:3887
City State Zip Code Phoenix AZ 85008	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net, Inc.	Occupation VP State Govt Affairs	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> James, E. Woys		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 2025 Aerojet Road		Transaction ID: INC:A:3888
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 205.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net Federal Services, Inc.	Occupation Sr. Vice President COO, FHFS	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Bennie Yates		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 6
Mailing Address 2025 Aerojet Road		Transaction ID: INC:A:3889
City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Health Net Federal Services, Inc.	Occupation Vice President & CFO FHS Spec.	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	290.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	5940.62

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Anna Eshoo for Congress</b>		Transaction ID: EXP:B:3542 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 555 Capitol Mall, Suite 1425		Amount of Each Disbursement this Period 2000.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Monetary contribution Candidate Name Anna Eshoo Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Committee to Re-Elect Ed Towns</b>		Transaction ID: EXP:B:3544 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 426 C Street, SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Monetary contribution Candidate Name Edolphus Town Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. National Republican Congressional Committee</b>		Transaction ID: EXP:B:3543 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Monetary contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 126

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A. Lewis for Congress Committee</b> Full Name (Last, First, Middle Initial) Lewis for Congress Committee Mailing Address P. O. Box 247 City Redlands State CA Zip Code 92373 Purpose of Disbursement Monetary contribution Candidate Name Jerry Lewis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 41 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: EXP:B:3660</b> Date of Disbursement 05 / 12 / 2006 Amount of Each Disbursement this Period 2500.00 011 Category/ Type
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<b>B. Murtha for Congress Committee</b> Full Name (Last, First, Middle Initial) Murtha for Congress Committee Mailing Address 5910 Gloster Road City Bethesda State MD Zip Code 20816 Purpose of Disbursement Monetary contribution Candidate Name John P. Murtha Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: EXP:B:3661</b> Date of Disbursement 05 / 12 / 2006 Amount of Each Disbursement this Period 2500.00 011 Category/ Type
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<b>C. Dreier for Congress</b> Full Name (Last, First, Middle Initial) Dreier for Congress Mailing Address P. O. Box 505 City Upland State CA Zip Code 91785 Purpose of Disbursement Monetary contribution Candidate Name David Dreier Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 26 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: EXP:B:3777</b> Date of Disbursement 05 / 25 / 2006 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
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**SUBTOTAL** of Disbursements This Page (optional) ..... ► **7000.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. J.D. Hayworth for Congress</b>		Transaction ID: EXP:B:3776 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address P. O. Box 14273		Amount of Each Disbursement this Period 1000.00	
City Scottsdale	State AZ	Zip Code 85267	011 Category/ Type
Purpose of Disbursement Monetary contribution		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name J.D. Hayworth			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 5		

Full Name (Last, First, Middle Initial) <b>B. Solidarity PAC</b>		Transaction ID: EXP:B:3775 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6	
Mailing Address 550 Kearny Street, Suite 1010		Amount of Each Disbursement this Period 1000.00	
City San Francisco	State CA	Zip Code 94108	011 Category/ Type
Purpose of Disbursement Monetary contribution		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Solidarity PAC			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Johnson to Congress Committee</b>		Transaction ID: EXP:B:3778 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address P. O. Box 1968		Amount of Each Disbursement this Period 3000.00	
City New Britain	State CT	Zip Code 06050	011 Category/ Type
Purpose of Disbursement Monetary contribution		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Nancy Johnson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CT District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	20000.00

**Image# 26940203538**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3889**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3888**

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**Image# 26940203539**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3887**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3886**

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**Image# 26940203540**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3885**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3884**

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**Image# 26940203541**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3883**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3882**

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**Image# 26940203542**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3881**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3879**

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**Image# 26940203543**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3877**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3875**

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**Image# 26940203544**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3874**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3873**

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**Image# 26940203545**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3872**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3871**

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**Image# 26940203546**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3870**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3869**

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**Image# 26940203547**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3868**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3867**

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**Image# 26940203548**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3866**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3865**

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**Image# 26940203549**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3864**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3863**

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**Image# 26940203550**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3857**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3856**

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**Image# 26940203551**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3855**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3853**

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**Image# 26940203552**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3852**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3850**

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**Image# 26940203553**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3849**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3847**

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**Image# 26940203554**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3846**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3844**

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**Image# 26940203555**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3843**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3842**

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**Image# 26940203556**

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Transaction ID: **INC:A:3841**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3840**

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**Image# 26940203557**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3836**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3834**

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**Image# 26940203558**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3831**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3830**

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**Image# 26940203559**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3829**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3828**

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**Image# 26940203560**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3827**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3824**

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**Image# 26940203561**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3818**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3817**

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**Image# 26940203562**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3816**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3815**

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**Image# 26940203563**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3814**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3813**

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**Image# 26940203564**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3812**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3810**

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**Image# 26940203565**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3808**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3806**

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**Image# 26940203566**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3805**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3804**

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**Image# 26940203567**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3802**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3801**

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**Image# 26940203568**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3798**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3796**

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**Image# 26940203569**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3795**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3793**

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**Image# 26940203570**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3788**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3786**

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**Image# 26940203571**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3785**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3783**

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**Image# 26940203572**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3781**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3780**

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**Image# 26940203573**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3774**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3773**

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**Image# 26940203574**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3771**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3770**

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**Image# 26940203575**

Form/Schedule: **SA11AI** Payroll Deduction  
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Form/Schedule: **SA11AI** Payroll Deduction  
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**Image# 26940203576**

Form/Schedule: **SA11AI** Payroll Deduction  
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Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3766**

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**Image# 26940203577**

Form/Schedule: **SA11AI** Payroll Deduction  
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Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3763**

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**Image# 26940203578**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3761**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3759**

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**Image# 26940203579**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3758**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3757**

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**Image# 26940203580**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3756**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3755**

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**Image# 26940203581**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3754**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3753**

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**Image# 26940203582**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3752**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3751**

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**Image# 26940203583**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3750**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3749**

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**Image# 26940203584**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3748**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3747**

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**Image# 26940203585**

Form/Schedule: **SA11AI** Payroll Deduction  
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Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3740**

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**Image# 26940203586**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3739**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3737**

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**Image# 26940203587**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3736**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3734**

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**Image# 26940203588**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3733**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3731**

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**Image# 26940203589**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3730**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3728**

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**Image# 26940203590**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3727**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3726**

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**Image# 26940203591**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3725**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3724**

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**Image# 26940203592**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3720**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3718**

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**Image# 26940203593**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3715**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3714**

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**Image# 26940203594**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3713**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3712**

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**Image# 26940203595**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3711**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3708**

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**Image# 26940203596**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3702**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3701**

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**Image# 26940203597**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3700**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3699**

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**Image# 26940203598**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3698**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3697**

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**Image# 26940203599**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3696**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3694**

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**Image# 26940203600**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3692**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3690**

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**Image# 26940203601**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3689**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3688**

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**Image# 26940203602**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3686**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3685**

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**Image# 26940203603**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3682**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3680**

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**Image# 26940203604**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3679**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3677**

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**Image# 26940203605**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3672**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3670**

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**Image# 26940203606**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3669**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3667**

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**Image# 26940203607**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3665**

Form/Schedule: **SA11AI** Payroll Deduction  
Transaction ID: **INC:A:3664**

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**Image# 26940203608**

Form/Schedule: **SA11AI** Payroll Deduction

Transaction ID: **INC:A:3662**

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