

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 Sacramento CA 95814

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

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

5. Covering Period 02 01 2010 through 02 28 2010

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 03 11 2010

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

Table with 8 columns and 1 row. Column 1: Office Use Only. Column 7: FEC FORM 3X (Rev. 12/2004)

**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	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		135045.60
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	143150.50									
(c) Total Receipts (from Line 19) .....	9344.90	18449.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	152495.40	153495.40								
7. Total Disbursements (from Line 31) .....	18000.00	19000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	134495.40	134495.40								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

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

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4262.68	5872.68
(ii) Unitemized .....	5082.22	12577.12
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9344.90	18449.80
(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) .....	9344.90	18449.80
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)) .....	9344.90	18449.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9344.90	18449.80

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	19000.00
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))..	18000.00	19000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18000.00	19000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	9344.90	18449.80
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9344.90	18449.80
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 60
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Karla Austen		Date of Receipt
	Mailing Address One Far Mill Crossing		<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Shelton	CT	06484
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Health Net, Inc.		Occupation Network Mgt. Officer	<b>Transaction ID:</b> INC.A.16338
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="400.00"/>	<input type="text" value="100.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Ethan Samuel Baumfeld		Date of Receipt
	Mailing Address 21650 Oxnard Street		<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Woodland Hills	CA	91367
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Health Net of California, Inc.		Occupation Counsel	<b>Transaction ID:</b> INC.A.16339
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="200.00"/>	<input type="text" value="50.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Pamela Ann Bohall		Date of Receipt
	Mailing Address 2025 Aerojet Road		<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Rancho Cordova	CA	95742
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Health Net Federal Services, Inc.		Occupation Enrollment Director	<b>Transaction ID:</b> INC.A.16345
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="307.68"/>	<input type="text" value="76.92"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="226.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16338**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16339**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16345**



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 60
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Carrato		Date of Receipt MM / DD / YYYY 02 / 05 / 2010		
	Mailing Address 2107 Wilson Blvd., Suite 900		<b>Transaction ID:</b> INC.A.16357		
	City Arlington	State VA	Zip Code 22201	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	Occupation Program Officer - DoD			
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey A. Cinciarelli		Date of Receipt MM / DD / YYYY 02 / 05 / 2010		
	Mailing Address 11971 Foundation Place C		<b>Transaction ID:</b> INC.A.16362		
	City Rancho Cordova	State CA	Zip Code 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: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Kristina A Cournoyer		Date of Receipt MM / DD / YYYY 02 / 05 / 2010		
	Mailing Address 1230 W. Washington Street		<b>Transaction ID:</b> INC.A.16368		
	City Tempe	State AZ	Zip Code 85281	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 Operating Officer			
Receipt For: 2010 <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) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16357**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16362**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16368**

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

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

FOR LINE NUMBER: PAGE 12 / 60  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**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

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 05 / 2010  
**Transaction ID: INC.A.16376**  
 Amount of Each Receipt this Period 50.00

**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: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 05 / 2010  
**Transaction ID: INC.A.16384**  
 Amount of Each Receipt this Period 75.00

**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: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt 02 / 05 / 2010  
**Transaction ID: INC.A.16402**  
 Amount of Each Receipt this Period 190.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 315.00

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16376**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16384**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16402**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 60
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Randal Kirchner		Date of Receipt
	Mailing Address 2025 Aerojet Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Rancho Cordova	CA	95742
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.16403
Name of Employer Health Net Federal Services, Inc.		Occupation VP Program Support	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 200.00	<input type="text"/> 50.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Joyce Li		Date of Receipt
	Mailing Address 330 Anita Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Pasadena	CA	91105
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.16412
Name of Employer Health Net, Inc.		Occupation Chief Actuarial Officer	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 320.00	<input type="text"/> 80.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Susan Mandry		Date of Receipt
	Mailing Address 2107 Wilson Blvd., Suite 900		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Arlington	VA	22201
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.16419
Name of Employer Health Net Federal Services		Occupation VP Beneficiary & Government Regulations	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 200.00	<input type="text"/> 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 180.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16403**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16412**

Payroll Deduction



C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16419**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 60
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Karin Mayhew	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 3400 Data Drive	<b>Transaction ID:</b> INC.A.16420
	City State Zip Code Rancho Cordova CA 95670	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation SVP Organization Effectiveness Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Peter McLaughlin	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 3636 Nobel Drive #300	<b>Transaction ID:</b> INC.A.16422
	City State Zip Code San Diego CA 92122	Amount of Each Receipt this Period 76.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net Federal Services, Inc. Occupation Director Performance Development Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 307.68	

<b>C.</b>	Full Name (Last, First, Middle Initial) Adrienne Biggert Morrell	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 21650 Oxnard Street	<b>Transaction ID:</b> INC.A.16429
	City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation VP Government Relations Receipt For: 2010 <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) .....	▶	176.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16420**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16422**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16429**

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

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

FOR LINE NUMBER: PAGE 21 / 60  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Bret A. Morris

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 SVP Corporate Controller

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

**Transaction ID:** INC.A.16430

Amount of Each Receipt this Period  
100.00

**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: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

**Transaction ID:** INC.A.16432

Amount of Each Receipt this Period  
50.00

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

Mailing Address 19475 N. Grayhawk Drive, Unit 2079

City State Zip Code  
Scottsdale AZ 85255

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

Name of Employer Health Net of Arizona Occupation Medicare Officer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

**Transaction ID:** INC.A.16445

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16430**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16432**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16445**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 60  
(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)  
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: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  

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

Transaction ID: INC.A.16458

Amount of Each Receipt this Period 90.00

**B.**

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: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  

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

Transaction ID: INC.A.16459

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda Tiano

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 SVP General Counsel/Sec

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  

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

Transaction ID: INC.A.16462

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **190.00**

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



A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16458**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16459**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16462**

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

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

FOR LINE NUMBER: PAGE 27 / 60  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** 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: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 05 / 2010  
**Transaction ID: INC.A.16463**  
 Amount of Each Receipt this Period 50.00

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

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 President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 05 / 2010  
**Transaction ID: INC.A.16464**  
 Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Virginia E. White

Mailing Address 13221 SW 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 VP, Operations

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 05 / 2010  
**Transaction ID: INC.A.16473**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16463**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16464**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16473**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 60		
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Gay Ann Williams		Date of Receipt
	Mailing Address 2800 N. 44th Street #900		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Phoenix	AZ	85008
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.16474
Name of Employer Health Net, Inc.		Occupation VP State Govt Affairs	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	<input type="text"/> 175.00

<b>B.</b>	Full Name (Last, First, Middle Initial) James E. Woys		Date of Receipt
	Mailing Address 2025 Aerojet Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 5 / 2 0 1 0
	City	State	Zip Code
	Rancho Cordova	CA	95742
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.16476
Name of Employer Health Net Federal Services, Inc.		Occupation Sr. Vice President COO, FHFS	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 820.00	<input type="text"/> 205.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Karla Austen		Date of Receipt
	Mailing Address One Far Mill Crossing		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 9 / 2 0 1 0
	City	State	Zip Code
	Shelton	CT	06484
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.16480
Name of Employer Health Net, Inc.		Occupation Network Mgt. Officer	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 480.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16474**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16476**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16480**



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 60  
(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)  
Ethan Samuel Baumfeld

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, Inc. Occupation: Counsel

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 02 / 19 / 2010  
**Transaction ID: INC.A.16481**  
 Amount of Each Receipt this Period: 50.00

**B.**

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

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: Enrollment Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt: 02 / 19 / 2010  
**Transaction ID: INC.A.16487**  
 Amount of Each Receipt this Period: 76.92

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Carrato

Mailing Address 2107 Wilson Blvd., Suite 900

City State Zip Code  
Arlington VA 22201

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

Name of Employer: Health Net Federal Services Occupation: Program Officer - DoD

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 02 / 19 / 2010  
**Transaction ID: INC.A.16499**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **176.92**

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16481**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16487**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16499**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 60  
(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)  
Jeffrey A. Cinciarelli

Mailing Address 11971 Foundation Place 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 Sales

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16504**  
 Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Kristina A Cournoyer

Mailing Address 1230 W. 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 Chief Operating Officer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16510**  
 Amount of Each Receipt this Period 50.00

**C.** 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

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16518**  
 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) ..... ►

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16504**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16510**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16518**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 60  
(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)  
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: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16526**  
 Amount of Each Receipt this Period 75.00

**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: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16544**  
 Amount of Each Receipt this Period 190.00

**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: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16545**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **315.00**

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16526**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16544**

Payroll Deduction



C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16545**

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

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

FOR LINE NUMBER: PAGE 42 / 60

(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)  
Joyce Li

Mailing Address 330 Anita Drive

City State Zip Code  
Pasadena CA 91105

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

Name of Employer Occupation  
Health Net, Inc. Chief Actuarial Officer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
320.00

Date of Receipt

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

Transaction ID: INC.A.16554

Amount of Each Receipt this Period  
80.00

**B.**

Full Name (Last, First, Middle Initial)  
Susan Mandry

Mailing Address 2107 Wilson Blvd., Suite 900

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation  
Health Net Federal Services VP Beneficiary & Government Regulations

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
200.00

Date of Receipt

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

Transaction ID: INC.A.16561

Amount of Each Receipt this Period  
50.00

**C.**

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 Occupation  
Health Net, Inc. SVP Organization Effectiveness

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
200.00

Date of Receipt

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

Transaction ID: INC.A.16562

Amount of Each Receipt this Period  
50.00

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

180.00

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16554**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16561**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16562**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 60
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter McLaughlin	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 3636 Nobel Drive #300	<b>Transaction ID:</b> INC.A.16564
	City State Zip Code San Diego CA 92122	Amount of Each Receipt this Period 76.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net Federal Services, Inc. Occupation Director Performance Development Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 307.68	

<b>B.</b>	Full Name (Last, First, Middle Initial) Adrienne Biggert Morrell	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 21650 Oxnard Street	<b>Transaction ID:</b> INC.A.16571
	City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation VP Government Relations Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bret A. Morris	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 21650 Oxnard Street	<b>Transaction ID:</b> INC.A.16572
	City State Zip Code Woodland Hills CA 91367	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation SVP Corporate Controller Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	226.92
<b>TOTAL</b> This Period (last page this line number only) .....	

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16564**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16571**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16572**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 60  
(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)  
Lawrence Naehr

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 Executive Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16574**  
 Amount of Each Receipt this Period 50.00

**B.**

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

Mailing Address 19475 N. Grayhawk Drive, Unit 2079

City Scottsdale State AZ Zip Code 85255

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

Name of Employer Health Net of Arizona Occupation Medicare Officer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16587**  
 Amount of Each Receipt this Period 100.00

**C.**

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

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, Inc. Occupation Internal Audit Officer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID: INC.A.16600**  
 Amount of Each Receipt this Period 90.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 240.00

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



A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16574**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16587**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16600**

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

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

FOR LINE NUMBER: PAGE 51 / 60  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**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: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID:** INC.A.16601  
 Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Linda Tiano

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, Inc. Occupation SVP General Counsel/Sec

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID:** INC.A.16604  
 Amount of Each Receipt this Period 50.00

**C.** 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: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 19 / 2010  
**Transaction ID:** INC.A.16605  
 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) ..... ►

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16601**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16604**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16605**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 60
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven D. Tough	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 2025 Aerojet Drive	<b>Transaction ID:</b> INC.A.16606
	City State Zip Code Rancho Cordova CA 95742	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net Federal Services Occupation President Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Virginia E. White	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 13221 SW 68th Parkway	<b>Transaction ID:</b> INC.A.16615
	City State Zip Code Tigard OR 97223	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation VP, Operations Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gay Ann Williams	Date of Receipt MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 2800 N. 44th Street #900	<b>Transaction ID:</b> INC.A.16616
	City State Zip Code Phoenix AZ 85008	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Net, Inc. Occupation VP State Govt Affairs Receipt For: 2010 <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) .....	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	

A. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16606**

Payroll Deduction

B. Form/Schedule : **SA11AI**  
Transaction ID : **INC.A.16615**

Payroll Deduction

C. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16616**



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 57 / 60	
	(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"/> 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		Date of Receipt
Mailing Address 2025 Aerojet Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 9 / 2 0 1 0
City	State	Zip Code
Rancho Cordova	CA	95742
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: INC.A.16618
Name of Employer Health Net Federal Services, Inc.		Amount of Each Receipt this Period
Occupation Sr. Vice President COO, FHFS		<input type="text"/> 205.00
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 820.00	
<input checked="" type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<input type="text"/> 205.00
TOTAL This Period (last page this line number only) .....	<input type="text"/> 4262.68

A. Form/Schedule : **SA11AI**

Payroll Deduction

Transaction ID : **INC.A.16618**

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee</p> <p>Mailing Address 120 Maryland Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Monetary contribution</p> <p>Candidate Name Democratic Senatorial Campaign Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> EXP.B.16192 <b>Date of Disbursement</b> 02 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Devin Nunes Campaign Committee</p> <p>Mailing Address 113 N. Church Street, Suite 423</p> <p>City Visalia State CA Zip Code 93291</p> <p>Purpose of Disbursement Monetary contribution</p> <p>Candidate Name Devin Nunes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 21</p>	<p><b>Transaction ID:</b> EXP.B.16193 <b>Date of Disbursement</b> 02 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee</p> <p>Mailing Address 320 First Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Monetary contribution</p> <p>Candidate Name National Republican Congressional Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> EXP.B.16191 <b>Date of Disbursement</b> 02 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

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

11000.00

**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)

PAGE 60 / 60

<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

**A.** Full Name (Last, First, Middle Initial)  
National Republican Senatorial Committee

Mailing Address 425 2nd Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Monetary contribution

Candidate Name  
National Republican Senatorial Committee

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.16190  
Date of Disbursement

02 / 02 / 2010

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
Duncan D. Hunter for Congress

Mailing Address 700 12th Street, NW, Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Monetary contribution

Candidate Name  
Duncan D. Hunter

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

Transaction ID: EXP.B.16620  
Date of Disbursement

02 / 23 / 2010

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Lungren for Congress

Mailing Address 201 Massachussets Avenue, NE, Suit

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Monetary Contribution

Candidate Name  
Daniel E. Lungren

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 03

Transaction ID: EXP.B.16621  
Date of Disbursement

02 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

7000.00

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

18000.00