PAGE 1 / 158

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

| | Of Other Inali | An Authorize | a Committee | | Office Use Only |
|---|----------------------------------|----------------------|---|---------------------|---|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT | | ample: If typing, type or the lines. | 12FE4M | 5 |
| Health Underwriters Po | olitical Action | Committee | | | |
| | | | | | |
| ADDRESS (number and street) | 1212 New York A | \ve _ | | <u> </u> | · · · · · · · · · · · · · · · · · · · |
| ▼ | Suite 1100 | 1 1 1 1 1 | | | |
| Check if different than previously reported. (ACC) | Washington | | | DC | 20005 |
| 2. FEC IDENTIFICATION NU | JMBER ▼ | CITY 🛦 | | STATE ▲ | ZIP CODE ▲ |
| C C00283135 | | 3. IS THIS REPORT | x NEW (N) | DR AM | MENDED |
| 4. TYPE OF REPORT (Choose One) | (b) Monthly Report Due On: | Feb 20 (M2) | | | 20 (M8) Nov 20 (M11) (Non-Election Year Only) |
| (a) Quarterly Reports: | | Mar 20 (M3) | H | | 20 (M9) Dec 20 (M12) (Non-Election Year Only) |
| April 15 Quarterly Report (C | MAN | Apr 20 (M4) | Jul 20 (N | 17) x Oct | 20 (M10) Jan 31 (YE) |
| July 15 | (c) 12-Day | y Election | Primary (12P) | General | (12G) Runoff (12R) |
| Quarterly Report (C | Report | t for the: | Convention (12C) | Special (| 12S) |
| Quarterly Report (C | | Election on | M = M / D = D | / | in the State of |
| Year-End Report (Y July 31 Mid-Year Report (Non-electio | n (d) 30-Day | | General (30G) | Runoff (| |
| Year Only) (MY) Termination Report | | t for the: | denoral (ccs.) | | |
| (TER) | | Election on | M = M / D = D | / Y Y Y Y Y Y | in the State of |
| 5. Covering Period 09 | | 2021 | through 0 | 9 30 | 2021 |
| I certify that I have examined th | Murphy, Jennifer | | wledge and belief it | s true, correct an | d complete. |
| Type or Print Name of Treasure | r | | | | |
| Signature of Treasurer Murp | hy, Jennifer, , , | | [Electronically Filed] | Date 10 | 19 / 2021 |
| NOTE: Submission of false, errone | eous, or incomplete | information may s | ubject the person sign | ng this Report to t | ne penalties of 52 U.S.C. § 3010 |
| Office Use Only | | | | | FEC FORM 3X Rev. 05/2016 |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Health Underwriters Political Action Committee 09 01 2021 09 30 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 309635.57 January 1, 2021 (b) Cash on Hand at 365035.64 Beginning of Reporting Period..... 43994.67 396518.03 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 706153.60 409030.31 6(a) and 6(c) for Column B)..... 38217.93 335341.22 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 370812.38 370812.38 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Health Underwriters Political Action Committee

| port Covering the Period: From: | 01 2021 To | 09 30 2021 |
|---|---|--|
| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| | | |
| • | | |
| (i) Itemized (use Schedule A) | 36379.17 | 235064.86 |
| (ii) Unitemized(iii) TOTAL (add | 7615.50 | 151953.17 |
| Lines 11(a)(i) and (ii) | 43994.67 | 387018.03 |
| . , | 0.00 | 0.00 |
| (such as PACs) | 0.00 | 0.00 |
| · · · · · · · · · · · · · · · · · · · | | |
| 11(a)(iii), (b), and (c)) (Carry | 43994 67 | 387018.03 |
| | 10001.07 | 20.010.00 |
| | 0.00 | 0.00 |
| All Loans Received | 0.00 | 0.00 |
| _oan Repayments Received | 0.00 | 0.00 |
| · · | 7 7 | |
| · · · · · · · · · · · · · · · · · · · | 0.00 | 0.00 |
| 1 - 1 | 0.00 | 0.00 |
| | | |
| | 0.00 | 9500.00 |
| Other Federal Receipts | 4 | |
| · · · · · · · · · · · · · · · · · · · | 0.00 | 0.00 |
| | | |
| | 0.00 | 0.00 |
| (1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | 4 4 | 4 4 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| | Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) | Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|--|-------------------------------|-----------------------------------|--|--|
| . Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | Total Tills I Gliou | Caleffual Teat-10-Date | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (ii) Non-Federal Share | 0.00 | 0.00 | | |
| (b) Other Federal Operating Expenditures | 1022.93 | 10279.22 | | |
| (c) Total Operating Expenditures | | 1 1 1 1 1 1 1 1 1 | | |
| (add 21(a)(i), (a)(ii), and (b)) | 1022.93 | 10279.22 | | |
| Committees | 0.00 | 0.00 | | |
| Federal Candidates/Committees and Other Political Committees | 36500.00 | 323500.00 | | |
| Independent Expenditures (use Schedule E) | 0.00 | 0.00 | | |
| Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) | 0.00 | 4 4 | | |
| (use scriedule F) | 0.00 | 0.00 | | |
| Loan Repayments Made | 0.00 | 0.00 | | |
| Loans Made | 0.00 | 0.00 | | |
| (a) Individuals/Persons Other Than Political Committees | 695.00 | 1562.00 | | |
| (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)) | 695.00 | 1562.00 | | |
| . Other Disbursements (Including | | | | |
| Non-Federal Donations) | 0.00 | 0.00 | | |
| Federal Election Activity (52 U.S.C. § 30101 (a) Allocated Federal Election Activity (from Schedule H6) | 1(20)) | | | |
| (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 | | |
| Total Disbursements (add Lines 21(c), 22, | . , | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 38217.93 | 335341.22 | | |
| Total Federal Disbursements | | | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 38217.93 | 335341.22 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

| 1 LO 1 01111 3X (110V. 03/2010) | | i age o | | | | |
|--|-------------------------------|-----------------------------------|--|--|--|--|
| 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) | 43994.67 | 387018.03 | | | | |
| 34. Total Contribution Refunds (from Line 28(d)) | 695.00 | 1562.00 | | | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 43299.67 | 385456.03 | | | | |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 1022.93 | 10279.22 | | | | |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 | | | | |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1022.93 | 10279.22 | | | | |

Use separate schedule(s)

| | | | | | | PAGE | | 6 | OF | | 158 |
|------------------|---|-----|--|-----|--|------|--|----|----|--|-----|
| (check only one) | | | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | 2 | | |
| | | 13 | | 14 | | 15 | | 16 | 6 | | 17 |

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bravo, Gilbert, M.,, Date of Receipt Mailing Address 8340 N. Thornydale Rd. Suite 110-335 2021 City State Zip Code Transaction ID: 16009183 ΑZ Tucson 85741-1162 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Bravo Insurance Solutions** Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kennedy-Simington, Dierdre, , CHRS, LPRT, Date of Receipt Mailing Address 1000 E Walnut Street, Suite 236 09 2021 City State Zip Code Transaction ID: 16009184 CA Pasadena 91106-5332 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BenAssist Health Insurance Services, L Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Martin, M. Danny, , , Date of Receipt Mailing Address 1291 Jefferson Terrace 01 2021 City State Zip Code Transaction ID: 16009190 GΑ Macon 31201-6703 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) M. Danny Martin Insurance Advisor Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify)

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

Use separate schedule(s)

| F | OR | LINE | PAGE | | 7 | OF | 1 | 158 | | | |
|----|------------------|------|------|-----|---|-----|---|-----|--|--|----|
| (0 | (check only one) | | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | | | |
| | | 13 | | 14 | | 15 | | 16 | | | 17 |

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bagley, Calvin, Dean, , Date of Receipt Mailing Address 9640 W. Tropicana Avenue, Suite 10 2021 City Zip Code State Transaction ID: 16009191 NV Las Vegas 89147-2604 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Nuvo Health Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Reid, Krys, , , Date of Receipt Mailing Address 5520 Greenwich Road 2021 Suite 106 City State Zip Code Transaction ID: 16009216 VA Virginia Beach 23462-6541 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) TBCI Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Garcia, David, , , Date of Receipt Mailing Address 32110 Agoura Road 02 2021 State Zip Code Transaction ID: 16009237 CA Westlake Village 91361-4026 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Warner Pacific Insurance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 204.00 Other (specify) 5060.00 SUBTOTAL of Receipts This Page (optional).....

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

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

| l | | R LINE | | PAGE | = | 8 | OF | 158 | | |
|---|------------------|-------------|--|------|---|-----|----|-----|---|----|
| l | (check only one) | | | | | | | | | |
| l | X | 1 1a | | 11b | | 11c | | 12 | 2 | |
| | | 13 | | 14 | | 15 | | 16 | 3 | 17 |

| Any information copied from such Reports and or for commercial purposes, other than using the | | | |
|---|-----------------------------------|---------------|--|
| NAME OF COMMITTEE (In Full) Health Underwriters Political A | ction Committee | | |
| Full Name of Individual (Last, First, Middle In Shaw, Wanda, D., , Mailing Address 212 South 10 Street | | 9 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Griffin | State Zip Code GA 30224-280 | ₁₄ | Transaction ID : 16009239 |
| FEC ID number of contributing federal political committee. | C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer (for Individual) Insurance Brokers of Georgia, Inc. | Occupation (for Indivi | idual) | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 270.00 | |
| Full Name of Individual (Last, First, Middle In Hoffman, Crystal, , SGS, Mailing Address P.O. Box 709 | nitial) or Full Organization Name | 9 | Date of Receipt |
| City | State Zip Code | | 09 02 2021 Transaction ID : 16009244 |
| Sugar Land | TX 77487-0709 | 9 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 100.00 |
| Name of Employer (for Individual) Benefit Concepts, Inc. | Occupation (for Indivi | idual) | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 950.00 | |
| Full Name of Individual (Last, First, Middle III). Muniz, Jose, , , | nitial) or Full Organization Name | Э | Date of Receipt |
| Mailing Address 2801 SW 149th Ave #100 | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | | Transaction ID: 16009286 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 365.00 |
| Name of Employer (for Individual) Devoted Health | Occupation (for Indivi | idual) | Memo Item |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | | |
| Other (specify) | | 365.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 495.00 |
| TOTAL This Period (last page this line numbe | r only) | > | |

FOR LINE NUMBER: (check only one) **X** 11a 11b

PAGE 9 OF 158 Use separate schedule(s) for each category of the 11c 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Murphy, Stacy, , , Date of Receipt Mailing Address 3080 S Jog Rd 2021 City Zip Code State Transaction ID: 16009348 FL Greenacres 33467-2053 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Absolute Best Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dorroh, Thomas, Allen, Date of Receipt Mailing Address PO Box 996 09 2021 City State Zip Code Transaction ID: 16009349 TX Killeen 76540-0996 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **BKCW Insurance Agency Employee Benefits Advisor** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Dinkel, Matthew, Kim, , Date of Receipt Mailing Address 13700 Six Mile Cypress Pkwy 03 2021 City State Zip Code Transaction ID: 16009351 FL Fort Myers 33912-4324 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AWA Insurance Agency** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bibian, Jolene, , , Date of Receipt Mailing Address 255 Maple Ct # 212 2021 City Zip Code State Transaction ID: 16009352 CA Ventura 93003-9122 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mills + Maple Insurance Solutions Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Freeman, Joann, , , Date of Receipt Mailing Address 625 Oak Street 09 2021 City State Zip Code Transaction ID: 16009353 CA Laguna Beach 92651-2920 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Freeman Laguna Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 490.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** King, Carolyn, J., , Date of Receipt Mailing Address 6 Country Lane 03 2021 City Zip Code State Transaction ID: 16009354 NJ Sussex 07461-4630 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Carolyn J King Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

11 OF 158 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stockstill, Julia Beckie, , , Date of Receipt Mailing Address 125 E. San Augustine 2021 City Zip Code State Transaction ID: 16009355 TX Deer Park 77536-4160 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stockstill & Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 405.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Warwick, John, L.,, Date of Receipt Mailing Address 1907 B Mangrove Ave. 09 2021 City State Zip Code Transaction ID: 16009356 CA Chico 95926-2381 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) John Warwick Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Locht, Michael, , , Date of Receipt Mailing Address 43 Harbor Blvd 03 2021 City State Zip Code Transaction ID: 16009410 FL Destin 32541-2309 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Florida Financial Services, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 630.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nolimal, Frank, R,, Date of Receipt Mailing Address 5740 S. Arville, Ste 204 2021 City Zip Code State Transaction ID: 16009449 NV Las Vegas 89118-3071 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Assurance Ltd. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carroll, Ryan, John, Date of Receipt Mailing Address 2101 Florence Ave 09 2021 City State Zip Code Transaction ID: 16009450 OH Cincinnati 45206-2426 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cornerstone Broker Insurance Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rice, Patty, A., , Date of Receipt Mailing Address 3810 69th Ave W 04 2021 City Zip Code State Transaction ID: 16009451 WA Tacoma 98466-5173 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cascade Valley Insurance Senior Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 210.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 13 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cagliola, David, A.,, Date of Receipt Mailing Address 1041 Old Cassatt Rd 2021 City State Zip Code Transaction ID: 16009454 PA Berwyn 19312-1152 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Simkiss & Block **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1530.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Berman, David, A.,, Date of Receipt Mailing Address 8805 Sawleaf Rd 09 2021 City State Zip Code Transaction ID: 16009474 IN Indianapolis 46260-1534 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Berman Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 680.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ware, Aaron, , , Date of Receipt Mailing Address 1805 N. CARSON ST 05 2021 City State Zip Code Transaction ID: 16009475 NV **CARSON CITY** 89701-1216 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aware Benefits Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 285.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pedersen, Jill, L., REBC, Date of Receipt Mailing Address 16325 Boones Ferry Rd #204 2021 City Zip Code State Transaction ID: 16009476 OR Lake Oswego 97035-4297 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Columbia Benefit Solutions. Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 810.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hausladen, Victoria, , , Date of Receipt Mailing Address 3600 American Blvd 09 2021 Suite500 City State Zip Code Transaction ID: 16009478 MN Bloomington 55431-4502 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gallagher Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Southan, Tamela, L., Date of Receipt Mailing Address 101 W. Renner Rd., Ste 330 05 2021 City Zip Code State Transaction ID: 16009479 TX Richardson 75082-2025 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Solutions By Design, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 255.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 15 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kirk, Stephanie, S., , Date of Receipt Mailing Address 18887 State Highway 305 Suite 300 2021 City Zip Code State Transaction ID: 16009480 WA Poulsbo 98370-7461 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Agency President & Licensed Producer J.C. Madison Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wham, Scott, , , Date of Receipt Mailing Address 15 Plymwood Dr 09 2021 City State Zip Code Transaction ID: 16009481 Plymouth Meeting PA 19462-2636 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kistler Tiffany Benefits **Director of Compliance Services** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gussin, Craig., CLU, LPRT., Date of Receipt Mailing Address 701 Palomar Airport Road #260 05 2021 City Zip Code State Transaction ID: 16009482 CA Carlsbad 92011-1047 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Auerbach & Gussin Insurance and Financ Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 925.00 Other (specify) 172.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gualtieri, Peter, L., , Date of Receipt Mailing Address 1600 JFK Boulevard, Suite 1220 2021 City Zip Code State Transaction ID: 16009484 Philadelphia PA 19103-2810 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Savoy Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buffington, Tammy, , , Date of Receipt Mailing Address 3112 South 13th 09 2021 City State Zip Code Transaction ID: 16009485 NE Lincoln 68502-4514 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A+ Brokerage Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 595.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sale, Raymer, M., , Date of Receipt Mailing Address 2905 Premiere Parkway 05 2021 Suite 285 City State Zip Code Transaction ID: 16009486 GΑ Duluth 30097-5246 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E2E Benefits Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 215.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dumancas, Harilyn, T.,, Date of Receipt Mailing Address 500 NE Multnomah St. Attn: KPB14 2021 City State Zip Code Transaction ID: 16009487 OR Portland 97232-2023 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Permanente Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Niederman, Tammy, Lyn, , Date of Receipt Mailing Address 10042 Silver Maple Circle 09 2021 City State Zip Code Transaction ID: 16009501 CO Highlands Ranch 80129-5420 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Avesis, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 478.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Whitfield, Pamela, A., , Date of Receipt Mailing Address 111 Hekili St A609 06 2021 City State Zip Code Transaction ID: 16009502 HI Kailua 96734-2800 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE 18 OF 158 Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cupo, Gary, V.,, Date of Receipt Mailing Address Fairfields Commons 271 Route 46 West Suite F-109 2021 City Zip Code State Transaction ID: 16009503 NJ Fairfield 07004-2447 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Solutions Health Insurance Specialist Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Trokey, Kevin, , , Date of Receipt Mailing Address 215 S. Kirkwood Rd 2021 Ste 201 City State Zip Code Transaction ID: 16009504 MO Saint Louis 63122-4359 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Q4intelligence LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 555.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sokol, David, , , Date of Receipt Mailing Address 901 Wilshire Drive 06 2021 Suite 330 City State Zip Code Transaction ID: 16009505 MI Troy 48084-5611 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wilshire Benefits Group Inc President/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1530.00 Other (specify) 285.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 19 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Combs, Susan, L., PPACA, ChH, Date of Receipt Mailing Address 234 Fifth Ave Ste 501 2021 City Zip Code State Transaction ID: 16009506 NY New York 10001-7607 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Combs & Company, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smith, Michael, David, , Date of Receipt Mailing Address 6200 Stone Hill Farms Parkway 09 2021 City State Zip Code Transaction ID: 16009509 TX Flower Mound 75028-4312 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Brokerage, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1100.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Pendorf, Paul, , , Date of Receipt Mailing Address 31666 W. Nine Dr. 07 2021 City State Zip Code Transaction ID: 16009530 CA Laguna Niguel 92677-2955 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Independent Financial Group LLC Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chubet, Julie, , , Date of Receipt Mailing Address 240 Main St. Suite B 2021 City State Zip Code Transaction ID: 16009532 CT Farmington 06032-2975 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rogers Benefit Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rome, Rebecca, , , Date of Receipt Mailing Address 115 Lessard St 09 2021 City State Zip Code Transaction ID: 16009534 Donaldsonville LA 70346-2505 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Humana Market Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Frizzell, Paula, C., , Date of Receipt Mailing Address 1890 Star Shoot Parkway 07 2021 Suite 170-408 City State Zip Code Transaction ID: 16009536 KY Lexington 40509-4566 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Frizzell & Associates Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Membership Form 765.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tandrow, Tara, , CIC, Date of Receipt Mailing Address P O Box 5815 2021 City Zip Code State Transaction ID: 16010008 ID Boise 83705-0815 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **HUB** International **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Theesfeld, Angela, A., , Date of Receipt Mailing Address 10101 Reunion Place # 303 09 2021 City State Zip Code Transaction ID: 16010009 San Antonio TX 78216-4163 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Davidson Camp Insurance Services, LLC Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Garcia, J., Michael, , Date of Receipt Mailing Address 820 Jordan Street 80 2021 Suite 400 City State Zip Code Transaction ID: 16010014 Shreveport LA 71101-4522 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Moreman, Moore & Co. Inc. Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 97.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Receipt For:

C.

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Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Galardini, Richard, F.,, Date of Receipt Mailing Address 100 Pinewood Ln 2021 Ste 301 City State Zip Code Transaction ID: 16010022 PΑ Warrendale 15086-7617 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Emerson Reid/My Benefit Advisor, LLC Chairman & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1125.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Blanco, Jose, , , Date of Receipt Mailing Address 1059 Blue Lakes Blvd 09 2021 City State Zip Code Transaction ID: 16010023 Twin Falls ID 83301-6602 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aflac Insurance Agent

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|--|-----------------|--------------------------------|---|
| Full Name of Individual (Last, First, Middle In Carlson, Charles, , , Mailing Address 4862 East Baseline Rd. #101 | ganization Name | Date of Receipt | |
| City Mesa | State AZ | Zip Code 85206-4668 | 09 08 2021 Transaction ID : 16010024 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | 1000.00 | | |
| Name of Employer (for Individual) Benefit Intelligence, Inc. | Occup Princi | pation (for Individual) pal | Memo Item |
| Receipt For: Primary General Other (specify) | Aggregate Y | ear-to-Date ▼ 1000.00 | |
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240,00

Aggregate Year-to-Date ▼

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Michael, , , Date of Receipt Mailing Address 390 Bridge Parkway Suite 200 2021 City State Zip Code Transaction ID: 16010289 CA Redwood City 94065-1061 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Johnson & Dugan Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hearn, John, A.,, Date of Receipt Mailing Address Six Concourse Parkway 09 2021 Suite 2750 City State Zip Code Transaction ID: 16010291 GA Atlanta 30328-6243 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Benefit Company Principal Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Magnuson, Raymond, E., JD, CLU, ChF, Date of Receipt Mailing Address 4337 E. 5th Street 09 2021 City State Zip Code Transaction ID: 16010312 ΑZ Tucson 85711-2025 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magnuson and Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1220.00 Other (specify) 1585.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Act | ion Comm | nittee | | | | |
| Α. | Full Name of Individual (Last, First, Middle Initia Benkowski, Patricia, J., , Mailing Address 4688 W Jennifer Ave | al) or Full Org | anization Name | Date of Receipt | | | |
| | Ste 103 | | | 09 09 2021 | | | |
| | City | State | Zip Code | Transaction ID: 16010313 | | | |
| | Fresno | CA | 93722-6418 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 30.00 | | | |
| | Name of Employer (for Individual) PBT Insurance Services | Occup | ation (for Individual) | Memo Item | | | |
| | Receipt For: Primary General Other (specify) ▼ | | | | | | |
| В. | Full Name of Individual (Last, First, Middle Initial Hansen, Sharon, , , | al) or Full Org | anization Name | Date of Receipt | | | |
| | Mailing Address 1219 So 2nd St | ny Address 1219 So 2nd St | | | | | |
| | City | State | Zip Code | 09 09 2021 Transaction ID : 16010314 | | | |
| | Mount Vernon | WA | 98273-4801 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 42.00 | | | |
| | Name of Employer (for Individual) Heritage Financial Group, Inc. | Occup | eation (for Individual) | Memo Item | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ear-to-Date ▼ 294.00 | | | | |
| <u> </u> | Full Name of Individual (Last, First, Middle Initial Haberman, Joshua, , RHU, | al) or Full Org | anization Name | Date of Receipt | | | |
| | Mailing Address 9301 Bryant Ave S Suite 105 | | | 09 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City Bloomington | State MN | Zip Code 55420-3473 | Transaction ID : 16010319 Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 170.00 | | | |
| | Name of Employer (for Individual) Alexander & Haberman | ation (for Individual) | Memo Item | | | | |
| | Receipt For: | Aggregate Ye | ear-to-Date ▼ | | | | |
| | Primary General Other (specify) | | 1530.00 | | | | |
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SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sansevieri, Paul, F., , Date of Receipt Mailing Address P O Box 641 09 2021 City Zip Code State Transaction ID: 16010321 CA Corona Del Mar 92625-0641 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sansevieri Insurance Services, Inc. Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Deru, Scott, E.,, Date of Receipt Mailing Address 393 W Gordon Ave 09 2021 Ste 1 City State Zip Code Transaction ID: 16010322 UT Layton 84041-2391 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fringe Benefit Analysts President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rider, Susan, M., MS, REBC, Date of Receipt Mailing Address PO Box 366 09 2021 City State Zip Code Transaction ID: 16010324 IN Westfield 46074-0366 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preventia Group, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 790.00 Other (specify) 435.00 SUBTOTAL of Receipts This Page (optional).....

Name of Employer (for Individual)

Jimison Insurance

Receipt For:

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Memo Item

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McKittrick, Kristin, , , Date of Receipt Mailing Address 4020 Danley Drive 2021 09 City State Zip Code Transaction ID: 16010325 SD Rapid City 57702-6893 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Mountain Plains Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jimison, Charles, , , Date of Receipt Mailing Address 6185 Magnolia Ave Ste 319 09 2021 City State Zip Code Transaction ID: 16010327 Riverside CA 92506-2524 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee.

| Primary General Other (specify) ▼ | 270.00 | |
|--|---|---|
| Full Name of Individual (Last, First, Middle I C. Deagle, Michael, P., REBC, Mailing Address 935 National Parkway Suite 93550 | nitial) or Full Organization Name | Date of Receipt Date of Receipt |
| City Schaumburg FEC ID number of contributing | State Zip Code 60173-5334 | Transaction ID : 16010328 Amount of Each Receipt this Period 166.67 |
| federal political committee. Name of Employer (for Individual) BenAxis, Inc. Receipt For: Primary Other (specify) | Occupation (for Individual) Broker Aggregate Year-to-Date ▼ 1750.03 | Memo Item |

Occupation (for Individual)

Agent

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Meredith, Griffin, , , Date of Receipt Mailing Address 550 S 5th St Unit 303 09 2021 City Zip Code State Transaction ID: 16010329 KY Louisville 40202-4309 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President Commonwealth Insurance Partners Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rice, Lori, R.,, Date of Receipt Mailing Address 131 Interpark Blvd 09 2021 City State Zip Code Transaction ID: 16010330 San Antonio TX 78216-1841 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Marsh Wortham Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Mordo, David, , ACA Certif, Date of Receipt Mailing Address 26 Kennedy Court 09 2021 City Zip Code State Transaction ID: 16010331 NJ Middletown 07748-3532 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BenefitMall **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ybarra, Valeria, , , Date of Receipt Mailing Address 7236 Vanessa Dr 10 2021 City Zip Code State Transaction ID: 16011682 TX 78414-5710 Corpus Christi Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fearing, Meagan, Ray, , Date of Receipt Mailing Address 123 N Wahsatch Ave 09 10 2021 City State Zip Code Transaction ID: 16012837 Colorado Springs CO 80903-3406 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Marketing Enterprises, Inc. Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kelley, Dianne, M., , Date of Receipt Mailing Address 7320 N La Cholla Blvd. 11 2021 154-219 City State Zip Code Transaction ID: 16012855 ΑZ Tucson 85741-2309 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sandbrook Group Ins. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 567.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Banchy, Kate, , , Date of Receipt Mailing Address 4233 Southtowne Drive 12 2021 City Zip Code State Transaction ID: 16012880 WI Eau Claire 54701-2652 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Spectrum Insurance Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 428.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Knight, Ronald David, , , Date of Receipt Mailing Address PO Box 507 2021 City State Zip Code Transaction ID: 16012881 GA Carrollton 30112-0009 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Marsh & Mclennan Agency LLC Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Monthly Contribution Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hild, Donald, A.,, Date of Receipt Mailing Address 2640 Willard Dairy Rd. 12 2021 Suite 122 City State Zip Code Transaction ID: 16012894 NC **HIGH POINT** 27265-8709 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Moon Benefits Group Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vipond, Elizabeth, T., CLU, CFP, Date of Receipt Mailing Address 1209 Cumberland Av Unit 1903 12 2021 City Zip Code State Transaction ID: 16012896 FL Tampa 33602-4260 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Senior Health Advisor Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hinman, Noel, , , Date of Receipt Mailing Address 303 West 80th Place10070 09 2021 PO Box 10070 City State Zip Code Transaction ID: 16012897 Merrillville IN 46410-5433 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Professional Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 205.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Nigro, Samuel, , , Date of Receipt Mailing Address 17117 Oak Drive 12 2021 Suite D City State Zip Code Transaction ID: 16012898 NE Omaha 68130-2193 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Compass Benefit Advisors **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brannon, William, J.,, Date of Receipt Mailing Address 2 Terrace Way, Suite B 2021 City Zip Code State Transaction ID: 16012900 NC Greensboro 27403-3663 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Group US, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Blomgren, Laura, , CLTC, RHU,, Date of Receipt Mailing Address 935 National Parkway 2021 Suite 93550 City State Zip Code Transaction ID: 16012902 IL Schaumburg 60173-5150 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BenAxis, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fairbairn, Nicole, , , Date of Receipt Mailing Address Creative Insurance Concepts Inc 12 2021 8069 Little Circle Rd City State Zip Code Transaction ID: 16012903 IN Noblesville 46060-1071 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Creative Insurance Concepts Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Riensche, Glen, E., , Date of Receipt Mailing Address 6101 Havelock Ave 12 2021 City Zip Code State Transaction ID: 16012905 NE Lincoln 68507-1268 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Financial Professional Advanced Insurance Services, Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stewart, Diana, , , Date of Receipt Mailing Address 500 West 36th Avenue 09 2021 Suite 310 City State Zip Code Transaction ID: 16012906 AK Anchorage 99503-5805 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RISQ Consulting** Sr. Acct Mgr Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. West, James, E., CIC, FLMI, Date of Receipt Mailing Address 28875 Frost Lane 12 2021 City State Zip Code Transaction ID: 16012907 IΑ Adel 50003-2212 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **NCMIC** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gertz, Josh, , , Date of Receipt Mailing Address 222 S. Riverside Plaza Suite 900 2021 City State Zip Code Transaction ID: 16012909 IL Chicago 60606-5975 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Compliance Project Specialist **USI Insurance Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** May, Robert, L., , Date of Receipt Mailing Address 1416 East Main Suite A 09 2021 City State Zip Code Transaction ID: 16012912 WA Puyallup 98372-3170 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Robert L. May & Associates, Inc. DBA H Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Denz, Stephanie, , , Date of Receipt Mailing Address 1100 Wild Ginger Lane 13 2021 City State Zip Code Transaction ID: 16012934 FL Fleming Island 32003-3224 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aetna Marketing Director Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schroeder, Scott, R.,, Date of Receipt Mailing Address 300 East First Street P O Box 327 13 2021 City State Zip Code Transaction ID: 16012935 IΑ Mechanicsville 52306-0327 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schroeder & Associates President/Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coley, Maggie, , , Date of Receipt Mailing Address 29 Olde Gate Court 2021 City State Zip Code Transaction ID: 16012939 GA Pooler 31322-8281 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Coley Benefit Services, Inc Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Scholz, Paul, J., , Date of Receipt Mailing Address 4221 N 203rd St 13 2021 Ste 200 City State Zip Code Transaction ID: 16012940 NE Elkhorn 68022-3474 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OCI Insurance & Financial Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 790.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Patrician, James, P.,, Date of Receipt Mailing Address 923 N. Plum Grove Road, Suite C 13 2021 City Zip Code State Transaction ID: 16012941 IL Schaumburg 60173-5152 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Coordinated Benefits Co., LLC President Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Blakely, Russ, , , Date of Receipt Mailing Address 246 E 11th Street 2021 Suite 302 City State Zip Code Transaction ID: 16012943 TN Chattanooga 37402-4269 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Russ Blakely & Associates, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Daugherty, Cathy, M., Date of Receipt Mailing Address 1500 Quail St 13 2021 Ste 570 City State Zip Code Transaction ID: 16012944 CA Newport Beach 92660-2752 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Bridgeport Benefits** Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 790.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schiebel, Al, C., , Date of Receipt Mailing Address 10 Glenlake Parkway North Tower, Suite 1050 13 2021 City Zip Code State Transaction ID: 16012945 GA Atlanta 30328-3495 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schiebel & Associates, LLC dba Shopben **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 405.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sherrill, David, M.,, Date of Receipt Mailing Address 498 Palm Springs Dr, Suite 270 09 2021 City State Zip Code Transaction ID: 16012947 FL Altamonte Springs 32701-7805 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sherrill Insurance Brokerage Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Matznick, Michael, E., , Date of Receipt Mailing Address 3150 N. Elm Street 13 2021 Suite 201 City State Zip Code Transaction ID: 16012948 NC Greensboro 27408-3840 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) EbenConcepts **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 117.00 SUBTOTAL of Receipts This Page (optional).....

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Masucci, Joseph, A.,, Date of Receipt Mailing Address 333 Rouser Road 2021 Building 4 Suite 401 13 City State Zip Code Transaction ID: 16012949 PA Moon Township 15108-2779 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Health Benefit Services LLC Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Anderson, Corey, Lee, , Date of Receipt Mailing Address 11247 69th St NE Albertville 09 2021 City State Zip Code Transaction ID: 16012950 Albertville MN 55301-4576 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Corey Anderson Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 370.00

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| City | State | Zip Code | Transaction ID: 16013306 |
| Saint Petersburg | FL | 33701-3699 | Amount of Each Receipt this Period |
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| Name of Employer (for Individual) | Occup | ation (for Individual) | Memo Item |
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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Renkar, Christopher, J.,, Date of Receipt Mailing Address 8814 Fargo Road Suite 125 14 2021 City Zip Code State Transaction ID: 16013349 VA Richmond 23229-4628 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Independent Benefits LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 596.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sutton, Trent, J., , Date of Receipt Mailing Address 2824 Poleline Rd., # A 09 2021 City State Zip Code Transaction ID: 16013351 ID Pocatello 83201-6177 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Real Benefit Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Pierce, Mary, Jeannette, Date of Receipt Mailing Address 1306 SE 105th Ct 14 2021 City Zip Code State Transaction ID: 16013352 WA Vancouver 98664-4746 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Permanente Northwest Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Daidone, Grace, , , Date of Receipt Mailing Address 3301 S. Virginia 2021 City Zip Code State Transaction ID: 16013355 NV Reno 89502-4516 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A and H Insurance, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnson, David, S., LUTCF, RHU,, Date of Receipt Mailing Address 12138 Big Canoe 09 2021 City State Zip Code Transaction ID: 16013356 GA Big Canoe 30143-5157 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) David S. Johnson Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 900.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Hensley, Lizette, , , Date of Receipt Mailing Address PO Box 84 14 2021 City Zip Code State Transaction ID: 16013358 TX Royse City 75189-0084 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hensley Insurance Solutions Agency Inc Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bellman, Mark, , , Date of Receipt Mailing Address 9120 Branch Hollow Dr 15 2021 City Zip Code State Transaction ID: 16013800 TX **Dallas** 75243-7510 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hepscher, William, , , Date of Receipt Mailing Address 38168 Medical Center Avenue 15 2021 City State Zip Code Transaction ID: 16013801 FL Zephyrhills 33540-1380 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Canadian Medstore Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1790.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Easterling, Sy, , , Date of Receipt Mailing Address 213 Porter Ave 15 2021 City Zip Code State Transaction ID: 16013803 MS Biloxi 39530-2950 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stewart Sneed Hewes/BancorpSouth Insur Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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| Mailing Address 111 Commercial St | | 09 15 2021 |
| City | State Zip Code | Transaction ID: 16013988 |
| Portland | ME 04101-4719 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item |
| Acadia Benefits, Inc. | Vice President | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |
| Full Name of Individual (Last, First, Middl Hynes, Bernard, J., , | le Initial) or Full Organization Name | Date of Receipt |
| Mailing Address 3200 N. Central Ave. Suite 1170 | | 09 16 2021 |
| City | State Zip Code | Transaction ID : 16014386 |
| Phoenix | AZ 85012-2419 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 30.00 |
| Name of Employer (for Individual) Hynes Benefits Consulting, LLC | Occupation (for Individual) Principal | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 320.00 | |
| Full Name of Individual (Last, First, Middle Fanuele, Dominick, , , | le Initial) or Full Organization Name | Date of Receipt |
| Mailing Address 214 Little Falls Rd., 2nd F | Floor | 09 16 2021 |
| City Fairfield | State Zip Code NJ 07004-2637 | Transaction ID : 16014387 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 42.00 |
| Name of Employer (for Individual) Fanuele Financial Group LLC | Occupation (for Individual) Broker | Memo Item |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) | 378.00 | |
| SUBTOTAL of Receipts This Page (optional | al) | 1072.00 |
| TOTAL This Period (last page this line num | nber only) | |

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sullivan, Audra, I., SGS, Date of Receipt Mailing Address 1201 N Watson Rd Ste 287 16 2021 City State Zip Code Transaction ID: 16014389 TX 76006-6222 Arlington Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vogue Insurance Agency, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Frankel, Teri, , , Date of Receipt Mailing Address 21820 Burbank Blvd 09 16 2021 Suite 300 City State Zip Code Transaction ID: 16014390 Woodland Hills CA 91367-6485 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leavitt Insurance Services of Los Ange Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kennedy, Tamara, P., , Date of Receipt Mailing Address 9414 E Sera Bria 16 2021 City State Zip Code Transaction ID: 16014392 ΑZ Scottsdale 85255-6054 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rogers Benefit Group, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 755.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Owens, David, Patrick, , Date of Receipt Mailing Address 101 Eisenhower Parkway Second Floor 16 2021 City Zip Code State Transaction ID: 16014394 NJ Roseland 07068-1032 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E.B. Cohen & Co., Inc. Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Douglas, James, F., , Date of Receipt Mailing Address 5721 Woodboro Dr 2021 City State Zip Code Transaction ID: 16014395 CA **Huntington Beach** 92649-4949 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Sync Insurance Vice President Employee Benefits Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 315.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Marinelli, Aaron, M. J., , Date of Receipt Mailing Address 36711 American Way 17 2021 Suite 2F City State Zip Code Transaction ID: 16014516 OH Avon 44011-4061 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magis Advisory Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 4530.00 Other (specify) 290.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bly, Perry, J.,, Date of Receipt Mailing Address 6340 South Western Ave 2021 Ste 120 17 City State Zip Code Transaction ID: 16014517 SD Sioux Falls 57108-3413 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pernell Insurance Agency, Inc. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. King, Colleen, , , Date of Receipt Mailing Address 8427 Beckford Ave. 09 2021 City State Zip Code Transaction ID: 16014519 CA Northridge 91324-4208 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Colleen King Insurance Agency, Inc. Founder/Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 453.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Patton, Lee, R., Date of Receipt Mailing Address 1112 Maple Street 17 2021 City State Zip Code Transaction ID: 16014520 IΑ West Des Moines 50265-4420 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Associations Marketing Group, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X)

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45 OF 158 Use separate schedule(s) ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Riggs, Donald, L., , Date of Receipt Mailing Address P.O. Box 14788 2021 City Zip Code State Transaction ID: 16014521 CA Irvine 92623-4788 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tompkins, Daniel, R., JD, MBA, Date of Receipt Mailing Address 1720 Windward Concourse 09 2021 Suite 290 City State Zip Code Transaction ID: 16014522 GA Alpharetta 30005-2291 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Admin America, Înc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Trevino, Terrie, L., CHC, Date of Receipt Mailing Address 830 Main Street, Ste. 200 17 2021 City State Zip Code Transaction ID: 16014523 ID Meridian 83642-2611 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OneDigital Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 200.00

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bailey, Andrea, , , Date of Receipt Mailing Address 3800 North Central Ave 2021 9th Floor 17 City State Zip Code Transaction ID: 16014526 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President Black, Gould & Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cross, Danny, W., , Date of Receipt Mailing Address 22421 Barton Rd 372 09 2021 City State Zip Code Transaction ID: 16014528 **Grand Terrace** CA 92313-5008 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) D Cross Insurance Marketing Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 330.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Pantello, Julie, Ann, Date of Receipt Mailing Address 2600 Allentown Rd. 17 2021 City State Zip Code Transaction ID: 16014530 OH Lima 45805-1716 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Insurance Group Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional).....

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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Act | tion Comm | nittee | | | | | | |
| Α. | Full Name of Individual (Last, First, Middle Init Jones, Donald, M., , | ial) or Full Org | anization Name | Date of Receipt | | | | | |
| | Mailing Address 333 N. Lantana Street Suite 295 City | State | Zip Code | 09 17 2021 Transaction ID : 16016087 | | | | | |
| | Camarillo | CA | 93010-9009 | Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 1000.00 | | | | | |
| | Name of Employer (for Individual) DMJ Insurance Services, Inc | Occup Agent | ation (for Individual) | Memo Item | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | ear-to-Date ▼ 1000.00 | | | | | | | |
| В. | Full Name of Individual (Last, First, Middle Init Paulus, Raquel, E., , | ial) or Full Org | anization Name | Date of Receipt | | | | | |
| | Mailing Address 1368 Business Park Drive | State | 7in Codo | 09 17 2021 | | | | | |
| | City Traverse City | MI | Zip Code 49686-8640 | Transaction ID : 16016225 Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 30.00 | | | | | |
| | Name of Employer (for Individual) Peterson McGregor & Associates | Occup Broke | oation (for Individual) r | Memo Item | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ear-to-Date ▼ 270.00 | | | | | | |
| С . | Full Name of Individual (Last, First, Middle Init McNeely, Stephen, R., , | ial) or Full Org | anization Name | Date of Receipt | | | | | |
| | Mailing Address 4215 Fieldbrook Pass | State | 7 n Code | 09 18 2021 | | | | | |
| | City Fort Wayne | IN | Zip Code 46815-5576 | Transaction ID : 16016256 Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 30.00 | | | | | |
| | Name of Employer (for Individual) Interity Financial Services Receipt For: | | ation (for Individual) | Memo Item | | | | | |
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| s | SUBTOTAL of Receipts This Page (optional) | | | 1060.00 | | | | | |
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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Walker, Mychal, H.,, Date of Receipt Mailing Address 3455 Peachtree Industrial Blvd Ste 305 18 2021 City State Zip Code Transaction ID: 16016258 GA Duluth 30096-5176 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Walker Agency, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Reynolds, Jeanne, , , Date of Receipt Mailing Address 5776 Lindero Cyn Rd 09 18 2021 D342 City State Zip Code Transaction ID: 16016260 Westlake Village CA 91362-6428 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Insurance Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 210.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wolfe, Rosanne, , RHU, REBC, Date of Receipt Mailing Address PO Box 17236 18 2021 City State Zip Code Transaction ID: 16016263 ΑZ Tucson 85731-7236 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wolfe Insurance & Consultants, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 486.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Villagran, Denise, S., MBA, Date of Receipt Mailing Address 210 S Carancahua St 2021 Ste 301 18 City State Zip Code Transaction ID: 16016270 TX Corpus Christi 78401-3042 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) 90 Degree Benefits/Entrust, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 903.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bosnakis, Gina, , , Date of Receipt Mailing Address 801 B Street 09 19 2021 Suite #505A City State Zip Code Transaction ID: 16016302 AK 99501-3657 Anchorage Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gina Bosnakis & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 265.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Smith, David, C., REBC, Date of Receipt Mailing Address 110 N. Corcoran St. #1205 19 2021 City Zip Code State Transaction ID: 16016303 NC Durham 27701-5020 Amount of Each Receipt this Period

| FEC ID number of contributing federal political committee. | C | 170.00 |
|--|---|-----------------------------------|
| Name of Employer (for Individual) EBen Benefits Receipt For: Primary General Other (specify) | Occupation (for Individual) Broker Aggregate Year-to-Date ▼ 1360.00 | Memo Item |
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FOR LINE NUMBER: PAGE 50 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kanter, Tim, , , Date of Receipt Mailing Address 246 Lombard St Ste B 19 2021 City Zip Code State Transaction ID: 16016304 CA **Thousand Oaks** 91360-8219 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Get Benefits Insurance Services, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Skinner, Douglas, , , Date of Receipt Mailing Address PO Box 1277 09 2021 City State Zip Code Transaction ID: 16016506 IN Bloomington 47402-1277 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hoosier Dental Plans Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Johnson, Aimee, , , Date of Receipt Mailing Address 500 West 36th Avenue 20 2021 Suite 310 City State Zip Code Transaction ID: 16016508 AK Anchorage 99503-5805 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RISQ Consulting** Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify)

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bartholomew, Rhonda, , CHRS, Date of Receipt Mailing Address PO Box 5099 20 2021 City Zip Code State Transaction ID: 16016510 ID Twin Falls 83303-5099 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **HUB** International **Group Division Manager** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Samuels, Cindy, , , Date of Receipt Mailing Address 8430 W Lake Mead #100 09 2021 City State Zip Code Transaction ID: 16016511 NV Las Vegas 89128-7674 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Concepts of Nevada Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Raymond, Garrin, Mitchell, , Date of Receipt Mailing Address 13201 N.W. Fwy. Suite 265 20 2021 City Zip Code State Transaction ID: 16016515 TX Houston 77040-6165 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OneDigital Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 216.00 Other (specify) 154.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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52 OF 158 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Dwight, , CHC, LUTCF, Date of Receipt Mailing Address 6107 Hazelwood Ave. 20 2021 City Zip Code State Transaction ID: 16016516 IN Indianapolis 46228-1316 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) D Hall & Associates **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Moore, Adrian, E.,, Date of Receipt Mailing Address 7936 Covey Chase Drive 09 2021 City State Zip Code Transaction ID: 16016812 NC Charlotte 28210-7231 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Friday Health Plans Regional Sales Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Harris, Deborah, I., , Date of Receipt Mailing Address 1236 122nd Ave 21 2021 City State Zip Code Transaction ID: 16016829 MI Hopkins 49328-9623 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) TriFound Financial Receipt For: Aggregate Year-to-Date ▼ Primary General 263.00 Other (specify) 84.00 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rosen, Brett, , , Date of Receipt Mailing Address 310 Wheatridge Dr 2021 City State Zip Code Transaction ID: 16017275 GA Roswell 30075-1386 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Elevate Benefits** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Shepard-Hall, Julie, A.,, Date of Receipt Mailing Address 3913 N. Post St 09 2021 City State Zip Code Transaction ID: 16017276 WA Spokane 99205-1149 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Integrity Insurance Solutions, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 473.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kidder, Sue, , , Date of Receipt Mailing Address 2700 Newport Blvd 2021 Ste 190 City State Zip Code Transaction ID: 16017281 CA Newport Beach 92663-3735 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sue Kidder Health & Insurance Services Receipt For:

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| NAME OF COMMITTE Health Underw | EE (In Full) riters Political Actio | n Commi | ittee | |
| Full Name of Individua A. Mayer, Alana, Mar Mailing Address 3800 | | or Full Orga | nization Name | Date of Receipt |
| 9th F | | State | Zip Code | 09 22 2021 Transaction ID : 16017298 |
| Phoenix FEC ID number of co | ů. | AZ C | 85012-1979 | Amount of Each Receipt this Period 85.00 |
| Name of Employer (for Black, Gould & Associ | r Individual) | | tion (for Individual) | Memo Item |
| Receipt For: Primary Other (specify) | General A | | | |
| Full Name of Individua B. Kohlsdorf, Eric, , Mailing Address 1501 Suite | Ingersoll Ave | or Full Orga | nization Name | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Des Moines FEC ID number of co | atributing | State IA | Zip Code 50309-3102 | Transaction ID : 16017300 Amount of Each Receipt this Period |
| federal political comm Name of Employer (for Prisma Strategies | ttee. | Occupa Broker | tion (for Individual) | 85.00 Memo Item |
| Receipt For: Primary Other (specify) | General | ggregate Yea | ar-to-Date ▼ 865.00 | |
| c. Kite, William, , , | al (Last, First, Middle Initial) | or Full Orga | nization Name | Date of Receipt |
| Mailing Address PO E | Sox 629 | State | Zip Code | 09 22 2021 Transaction ID : 16017303 |
| Roanoke | | VA | 24004-0629 | Amount of Each Receipt this Period |
| FEC ID number of co federal political comm | ů. | C | | 85.00 |
| Name of Employer (for D&S Agency | , | Broker | tion (for Individual) | Memo Item |
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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Action | | | | | | | | | |
| | Full Name of Individual (Last, First, Middle Initial) Whang, Victor, , , | or Full Org | gani | zation Name | D | Date of Receipt | | | | |
| ľ | Mailing Address 51150 Washington St. | 1 | 09 22 2021 | | | | | | | |
| (| City | State | 7 | Zip Code | | Transa | action ID : | 1601730 | 5 | |
| _ | New Baltimore | MI | | 48047-2159 | _ A | mount | of Each F | Receipt thi | s Period | |
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| 1 | Name of Employer (for Individual) | Occup | patic | on (for Individual) | 1 [| Me | emo Item | | | |
| I | nsurance Warehouse | Broke | er/Aç | gent | | | | | | |
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| | Primary General | | | 680.00 | | | | | | |
| | Other (specify) ▼ | | 7 | 000.00 | | | | | | |
| | Full Name of Individual (Last, First, Middle Initial) | or Full Orç | gani | zation Name | | | Descipt | | | |
| - | Burns, Patrick, , CEBS, Mailing Address 5653 Maxwelton Road | | | | ┦ _ | | Receipt | | | |
| _ | | | 09 | 22 | | 2021 | Y | | | |
| | City State Zip Code | | | | | | action ID : | | | |
| _ | Oakland CA 94618-2654 | | | | | | of Each F | Receipt thi | s Period | |
| | FEC ID number of contributing federal political committee. | C | | | | | 7 | 7 | 170.0 | 00 |
| | Name of Employer (for Individual) Burns Employee Benefits Insurance Serv | Occup Broke | | on (for Individual) | Memo Item | | | | | |
| Ē | Receipt For: | ggregate Y | /ear- | -to-Date ▼ | | | | | | |
| | Primary General | | | | | | | | | |
| | Other (specify) ▼ | 4 | , | 1555.00 | | | | | | |
| | Full Name of Individual (Last, First, Middle Initial) Norris, Michael, A., , | or Full Org | gani | zation Name | D | ate of | Receipt | | | |
| ľ | Mailing Address 295 E Palmer Street | | | |] [| M = M | 22 | | 2021 | Y |
| | , | State NC | 2 | Zip Code | | | action ID : | | | |
| - | Franklin | INC | | 28734-3049 | _ A | mount | of Each F | Receipt thi | s Period | |
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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wild, Trei,,, Date of Receipt Mailing Address Five Cowboys Way 2021 Suite 300 City State Zip Code Transaction ID: 16017308 TX Frisco 75034-2074 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Warner Pacific Insurance Svcs Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mannor, Kevin, C., , Date of Receipt Mailing Address 2205 Trautner Drive 09 2021 City State Zip Code Transaction ID: 16017309 MI 48604-8201 Saginaw Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mannor Financial Group, Inc. Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 C.

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| Full Name of Individual (Last, First, Middle In Boaz, Daniel, J., , | Date of Receipt | | |
| Mailing Address 5565 Roberts Drive Suite 100 | 09 22 2021 | | |
| City | State | Zip Code | Transaction ID : 16017311 |
| Atlanta | GA | 30338-3350 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | otion (for Individual) | 30.00 Memo Item |
| Name of Employer (for Individual) | | ation (for Individual) | |
| HealthLife Group, LLC Receipt For: | Broker | | |
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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Webb, Amy, R.,, Date of Receipt Mailing Address 7 E. Main Street Suite 200 2021 City Zip Code State Transaction ID: 16017313 NJ Moorestown 08057-3339 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Saratoga Benefit Services, LLC. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Qualizza, Jacqueline, , , Date of Receipt Mailing Address 12877 W. 151st Street 2021 City State Zip Code Transaction ID: 16017314 KS Olathe 66062-9707 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Associate Insurance Services, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. McClaskey, Barbara, A., , Date of Receipt Mailing Address 1965 Pine Street 23 2021 City State Zip Code Transaction ID: 16018336 CA Redding 96001-1921 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Barbara McClaskey Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 97.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Reeves, Valerie, , , Date of Receipt Mailing Address 3702 Brownsboro Rd 2021 City Zip Code State Transaction ID: 16018337 KY 40207-1820 Louisville Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preferred Benefits, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Goodman, Robert, Hiram, , Date of Receipt Mailing Address 2211 7th Avenue South 09 2021 City State Zip Code Transaction ID: 16018340 Birmingham AL 35233-2310 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) McGriff Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fitzgerald, Robert, Mark, Date of Receipt Mailing Address 185 Fowler St 23 2021 City State Zip Code Transaction ID: 16018341 GΑ Woodstock 30188-5023 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Robert Fitzgerald Insurance Agency, In **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1190.00 Other (specify) 254.00 SUBTOTAL of Receipts This Page (optional).....

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Adam, Ashely, N., CEBS, GBA,, Date of Receipt Mailing Address 2717 N 118th Street Suite 300 2021 City Zip Code State Transaction ID: 16018342 NE Omaha 68164-9684 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gadinas, Kathy, M., CLTC, Date of Receipt Mailing Address 16325 Boones Ferry Rd., #204 09 2021 City State Zip Code Transaction ID: 16018350 Lake Oswego OR 97035-4297 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Columbia Benefit Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Baskett, John, , , Date of Receipt Mailing Address 2601C Blanding Ave #222 23 2021 City Zip Code State Transaction ID: 16018352 CA Alameda 94501-1507 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) John Baskett Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Act | tion Comm | nittee | | | | | |
| Α. | - | ial) or Full Org | anization Name | Date of Receipt | | | | |
| | Mailing Address Six Concourse Parkway Suite 2750 City | State | Zip Code | 09 23 2021 Transaction ID : 16018354 | | | | |
| | Sandy Springs FEC ID number of contributing | GA | 30328-6243 | Amount of Each Receipt this Period 30.00 | | | | |
| | federal political committee. Name of Employer (for Individual) | Memo Item | | | | | | |
| | The Benefit Company Receipt For: Primary General Other (specify) ▼ | Aggregate Yo | ear-to-Date ▼ 270.00 | | | | | |
| В. | Full Name of Individual (Last, First, Middle Init Griffey, Patricia, A., CSA, RHU,, Mailing Address 56294 Primrose Cir | Date of Receipt 09 23 2021 | | | | | | |
| | City Elkhart | State IN | Zip Code 46516-1509 | Transaction ID : 16018355 Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | С | | 100.00 | | | | |
| | Name of Employer (for Individual) Page 1 Medicare Receipt For: | Broke | | Memo Item | | | | |
| | Primary General Other (specify) ▼ | Aggregate Yo | ear-to-Date ▼ 1025,00 | | | | | |
| С. | Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stewart, Rachel, , , Date of Receipt | | | | | | | |
| | Mailing Address 18130 N 64th Dr W City | State | Zip Code | 09 / 23 / 2021 Transaction ID : 16018357 | | | | |
| | Glendale | AZ | 85308-1068 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | C | | 30.00 | | | | |
| | Name of Employer (for Individual) RS Assurance Receipt For: | Agent | | Memo Item | | | | |
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| | NAME OF COMMITTEE (In Full) | | | | | | | | | | |
| $ \rangle$ | Health Underwriters Political Act | ion Comm | ittee | | | | | | | | |
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| | Full Name of Individual (Last, First, Middle Initial) or Full Organization Name | | | | | | | | | | |
| Α. | Siino, Thomas, , RHÜ, | | | Date of Receipt | | | | | | | |
| | Mailing Address 1126 Clifton Avenue | | | M = M / D = D / Y = Y = Y | | | | | | | |
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| | City | State | Zip Code | Transaction ID : 16018363 | | | | | | | |
| | Clifton | NJ | 07013-3622 | Amount of Each Receipt this Period | | | | | | | |
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| | rederal political committee. | | | | | | | | | | |
| | Name of Employer (for Individual) | Occupa | ation (for Individual) | Memo Item | | | | | | | |
| | Executive Benefits Group, LLC | _ | | | | | | | | | |
| | Receipt For: | Aggregate Ye | ar-to-Date ▼ | | | | | | | | |
| | Primary General | Aggregate re | ai-to-bate v | | | | | | | | |
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| | Full Name of Individual (Last, First, Middle Initi | al) or Full Orga | anization Name | | | | | | | | |
| B. | Pleasants, Jennifer, , , | ai, or rail orga | anization Hamo | Date of Receipt | | | | | | | |
| | Mailing Address 6726 Stuyvesant Ct. | | | M M / D D / Y Y Y Y | | | | | | | |
| | Maining / Ida 1000 0/20 Stuyvesani Ct. | | | 09 23 2021 | | | | | | | |
| | City | State | Zip Code | | | | | | | | |
| | Corpus Christi | TX | 78414-4269 | Transaction ID : 16018364 Amount of Each Receipt this Period | | | | | | | |
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| | federal political committee. | | | 4 4 | | | | | | | |
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| | UnitedHealthcare Employer & Individual | | nt Executive | _ | | | | | | | |
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| C | Coker, Kenneth, Wayne, REBC, | ar, or rain orga | anization Namo | Date of Receipt | | | | | | | |
| ٠. | Mailing Address 351 W I St | | | † | | | | | | | |
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| | City | State | Zip Code | Transaction ID : 16018365 | | | | | | | |
| | Benicia | CA | 94510-3026 | Amount of Each Receipt this Period | | | | | | | |
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| | rederal political committee. | | | | | | | | | | |
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| | CokerWayne & Associates | Broker | , | _ | | | | | | | |
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| \rangle | NAME OF COMMITTEE (In Full) Health Underwriters Political Acti | | | | | | | | |
| Α. | Full Name of Individual (Last, First, Middle Initial Baker, Misty, $J.,$ | al) or Full O | rganization Name | Date of Receipt | | | | | |
| | Mailing Address 117 Green Valley Dr City | State | Zip Code | 09 24 2021 | | | | | |
| | Leander | TX | 78641-9755 | Transaction ID : 16018908 | | | | | |
| | FEC ID number of contributing federal political committee. | С | | Amount of Each Receipt this Period | | | | | |
| | Name of Employer (for Individual) BenefitMall | | upation (for Individual) President | Memo Item | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 270.00 | | | | | | |
| В. | Full Name of Individual (Last, First, Middle Initial Savas, John, , , | al) or Full O | rganization Name | Date of Receipt | | | | | |
| | Mailing Address 5462 Shirley Jean Ct | | | 09 24 2021 | | | | | |
| | City | State | Zip Code | Transaction ID : 16018909 | | | | | |
| | Winston Salem | NC | 27105-1773 | Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 30.00 | | | | | |
| | Name of Employer (for Individual) Savas Insurance Services, Inc. | | upation (for Individual) ırance Agent | Memo Item | | | | | |
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| Full Name of Individual (Last, First, Middle Kramer, Sherrie, , , | Date of Receipt | | |
| Mailing Address 310 West McKinley Suite 3 | 350 | | 09 24 2021 |
| City | State | Zip Code | Transaction ID : 16018912 |
| Mishawaka | IN | 46545-5699 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | 42.00 | | |
| Name of Employer (for Individual) | Occur | pation (for Individual) | Memo Item |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lubenow, Justin, , , Date of Receipt Mailing Address 15 Alden Street Suite 8 2021 City Zip Code State Transaction ID: 16018914 NJ Cranford 07016-2149 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lubenow Agency Receipt For: Aggregate Year-to-Date ▼ Primary General 366.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kowalczyk-Gonzalez, CarrieAnne, , , Date of Receipt Mailing Address 6568 S Federal Way #213 09 2021 City State Zip Code Transaction ID: 16018915 ID Boise 83716-9277 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Personal Touch Ins & Benefits, LLC Health Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tellesbo-Kembel, Marsha, , , Date of Receipt Mailing Address 40 Lake Bellevue, Suite 100 24 2021 City Zip Code State Transaction ID: 16018916 WA Bellevue 98005-2480 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tellesbo & Company Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 1530.00 Other (specify) 285.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Todd, Helen, M.,, Date of Receipt Mailing Address 10800 Financial Centre Pkwy 2021 Ste 300 City State Zip Code Transaction ID: 16018917 AR Little Rock 72211-3588 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Sunstar Insurance of AR **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Barrera, Rolando, G., , Date of Receipt Mailing Address 101 N Shoreline Blvd 09 2021 Suite 410 City State Zip Code Transaction ID: 16018918 Corpus Christi TX 78401-2825 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Roland Barrera Insurance Agent Receipt For:

| Other (specify) ▼ | | 890.00 | |
|---|--------------------|--|--|
| Full Name of Individual (Last, First, Middle Woodward, Thomas, Nathan, , Mailing Address 430 West Bankhead Hwy | Initial) or Full O | rganization Name | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Villa Rica | State GA | Zip Code 30180-1701 | Transaction ID : 16018923 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 30.00 |
| Name of Employer (for Individual) Westwood Agency Receipt For: Primary General Other (specify) | Vice | upation (for Individual) President Year-to-Date ▼ 445.00 | Memo Item |
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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mackin, Martin, John, , Date of Receipt Mailing Address P O Box 29607 2021 24 City Zip Code State Transaction ID: 16018924 CA San Francisco 94129-0607 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Foresight Benefits, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Clark, Jonathan, S., , Date of Receipt Mailing Address 5525 S 900 E 09 2021 Ste 325 City State Zip Code Transaction ID: 16018925 UT Salt Lake City 84117-3516 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fringe Benefit Analysts Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Currier, Craig, T., , Date of Receipt Mailing Address 1919 Aksarben Drive 24 2021 City State Zip Code Transaction ID: 16018927 NE Omaha 68180-0001 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross and Blue Shield of Nebraska Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 265.00 Other (specify)

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SCHEDULE A (FEC Form 3X)

158 FOR LINE NUMBER: PAGE 66 OF Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pittman, Joseph, E., , Date of Receipt Mailing Address P O Box 24133 2021 City Zip Code State Transaction ID: 16018928 NE Omaha 68124-0133 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Creative Association Management **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fugitt-Hetrick, Pamela, Leigh, LUTCF, PPC, Date of Receipt Mailing Address 1123 Soquel Avenue 09 2021 City State Zip Code Transaction ID: 16018930 Santa Cruz CA 95062-2105 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DCD Financial & Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General

| Other (specily) V | 4 | 270.00 | |
|---|-----------------|-------------------------|------------------------------------|
| Full Name of Individual (Last, First, Middle In McConnaughey, John, R., , | Date of Receipt | | |
| Mailing Address PO Box 805 | 09 24 2021 | | |
| City | State | Zip Code | Transaction ID: 16018931 |
| West Chester | ОН | 45071-0805 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 42.00 |
| Name of Employer (for Individual) | Occur | pation (for Individual) | Memo Item |
| JRM & Associates Agency, Inc | Broke | r | _ |
| Receipt For: Primary General Other (specify) | Aggregate Y | ear-to-Date ▼ 378.00 | |
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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Todd, Richard, H.,, Date of Receipt Mailing Address 54 Belle Meadow Lane 2021 City Zip Code State Transaction ID: 16018932 AR Little Rock 72210-3714 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sunstar Insurance of AR **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Todd, David, , , Date of Receipt Mailing Address 7011 Lucea Rd 09 2021 City State Zip Code Transaction ID: 16018933 AR Little Rock 72210-4146 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sunstar Insurance of AR Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Lawson, Tonda, , , Date of Receipt Mailing Address 6611 Orion Drive 24 2021 Suite 201 City State Zip Code Transaction ID: 16018934 FL Fort Myers 33912-4329 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brown & Brown, Inc. VP Employee Benefits Receipt For: Aggregate Year-to-Date ▼ Primary General 265.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilkinson, Jeff, , , Date of Receipt Mailing Address 2800 N 44th St Ste 500 2021 City Zip Code State Transaction ID: 16018935 ΑZ Phoenix 85008-1576 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Total Dental Administrators Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 264.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Law, Marv, , CLTC, Date of Receipt Mailing Address 45345 Carrie Ln 09 2021 City State Zip Code Transaction ID: 16018936 CA La Quinta 92253-4291 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HealthBridge Insurance Solutions Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Waggoner, Diane, M., , Date of Receipt Mailing Address 5694 Mission Center Rd 24 2021 Ste 602-982 City State Zip Code Transaction ID: 16019375 CA San Diego 92108-4355 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Relion Insurance Solutions Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1060.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE 69 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Paul, L.,, Date of Receipt Mailing Address 17347 Napa St 2021 City Zip Code State Transaction ID: 16019449 CA Sherwood Forest 91325-3441 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Paul Davis Insurance Services Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Morrow, Todd, , , Date of Receipt Mailing Address 453 Clear Water Trl 2021 City State Zip Code Transaction ID: 16019450 TX Holly Lake Ranch 75765-7313 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kilpatrick Companies LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Broadbent, Richard, , , Date of Receipt Mailing Address 40 West Cache Valley Blvd, Suite 25 2021 City Zip Code State Transaction ID: 16019451 UT Logan 84341-8450 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Broadbent Financial Services Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) | | | | |
| \rangle | Health Underwriters Political Action | n Commi | ittee | | |
| / | Full Name of Individual // First Address 1000 | or Full C | nizotion Name | | |
| ١. | Full Name of Individual (Last, First, Middle Initial) Berg, Allan, , , | | Date of Receipt | | |
| - | Mailing Address 3170 44th Street, Unit 110 | | M = M / D = D / Y = Y = Y | | |
| | Cib. | Ct-t- | Zin Oct | | 09 25 2021 |
| | City Fargo | State ND | Zip Code 58104-8596 | - | Transaction ID : 16019457 |
| | EEC ID number of contributing | | | _ | Amount of Each Receipt this Period |
| | federal political committee. | C | | _ | 25.00 |
| | Name of Employer (for Individual) | Occupa | tion (for Individual) | | Memo Item |
| | North Risk Partners | | | | |
| | | Aggregate Yea | ar-to-Date ▼ | | |
| | Primary General Other (specify) ▼ | | 22: | 25.00 | |
| | | | | 40 | |
| _ | Full Name of Individual (Last, First, Middle Initial) | or Full Orga | nization Name | | |
| ₫. | Kross, David, R., RHU, | | | | Date of Receipt |
| | Mailing Address 5556 Cheviot Rd. Suite B | | 09 25 2021 | | |
| | City | State | Zip Code | | Transaction ID : 16019459 |
| | Cincinnati | ОН | 45247-5202 | | Amount of Each Receipt this Period |
| | FEC ID number of contributing | <u> </u> | | 7 | |
| | federal political committee. | C | | _ | 30.00 |
| | Name of Employer (for Individual) | 1 | tion (for Individual) | | Memo Item |
| | United Benefits Agency, Inc. | Broker | | | |
| | Receipt For: Primary General | Aggregate Yea | ar-to-Date ▼ | | |
| | Other (specify) ▼ | | 27 | 70.00 | |
| | | | 4 | | |
|). | Full Name of Individual (Last, First, Middle Initial) Lucas, William, H., , | or Full Orga | nization Name | | Date of Receipt |
| | Mailing Address PO Box 1089 | | | | M - M / D - D / Y - Y - Y |
| | | C+-+- | Zin Oct | | 09 25 2021 |
| | City Richmond Hill | State GA | Zip Code 31324-1089 | - | Transaction ID : 16019460 |
| | EEC ID number of contributing | | 1 1550 | _ | Amount of Each Receipt this Period |
| | federal political committee. | C | | | 30.00 |
| | Name of Employer (for Individual) | | tion (for Individual) | | Memo Item |
| | Bill Lucas & Associates Insurance | CEO | | | |
| | Receipt For: Primary General | Aggregate Yea | ar-to-Date ▼ | | |
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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Whaley, Cynthia, , , Date of Receipt Mailing Address 408 N. Washington Street Suite A 2021 City Zip Code State Transaction ID: 16019461 MD Easton 21601-3704 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Avery Hall Benefit Solutions, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Olson, Charles, , , Date of Receipt Mailing Address 4221 N. 203rd St, Suite 200 09 2021 City State Zip Code Transaction ID: 16019463 NE Elkhorn 68022-3474 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OCI Insurance & Financial Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Spinelli, Frank, , , Date of Receipt Mailing Address 1100 Superior Avenue Street 25 2021 Suite 1500 City State Zip Code Transaction ID: 16019464 OH Cleveland 44114 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Oswald Companies VP Group Benefits Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tuthill, Glendae, , , Date of Receipt Mailing Address 736 Old Greenville Rd 2021 City Zip Code State Transaction ID: 16019465 GA Fayetteville 30215-5935 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Resource Seven **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 504.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rice, Russell, Lee, SGS, Date of Receipt Mailing Address 8830 Buckskin Dr 09 2021 City State Zip Code Transaction ID: 16019466 TX Boerne 78006-5554 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AVESIS, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wright, Dennis, E., RHU, CSFP, Date of Receipt Mailing Address 1111 Chestnut Hills Pky 25 2021 City State Zip Code Transaction ID: 16019467 IN Fort Wayne 46814-8934 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Employee Plans, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 178.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thal, Harry, P.,, Date of Receipt Mailing Address PO BOX 2137 2021 City Zip Code State Transaction ID: 16019468 CA **KERNVILLE** 93238-2137 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Harry P. Thal Insurance Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gwin, David, R., , Date of Receipt Mailing Address P.O. Box 1396 09 2021 City State Zip Code Transaction ID: 16019470 SC Irmo 29063-1396 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Southeastern Insurance Consultants Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Andress, Carolyn, Marie, REBC, Date of Receipt Mailing Address 1959 Highway 34 2nd Floor 25 2021 City Zip Code State Transaction ID: 16019472 NJ Wall Township 07719-9750 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **HUB** International Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 295.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Linneman, Ron, , , Date of Receipt Mailing Address 1740 Rice Street Ste 200 2021 City Zip Code State Transaction ID: 16019522 MN 55113-6825 Saint Paul Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Western Insurance Agency Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Grant, Staci, R.,, Date of Receipt Mailing Address 74 Glendale Ave 09 2021 City State Zip Code Transaction ID: 16019524 NJ Livingston 07039-2310 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Henry O. Baker Insurance Group Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gilbert, Debra, E., , Date of Receipt Mailing Address 2331 Mustang Drive 26 2021 Suite 200 City State Zip Code Transaction ID: 16019526 TX Grapevine 76051-1014 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Innovative Insurance Solutions President Receipt For: Aggregate Year-to-Date ▼ Primary General 770.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Waller, Doris, , LPRT Soari, Date of Receipt Mailing Address 6411 Highland Crest Lane 2021 City Zip Code State Transaction ID: 16019527 TX Sachse 75048-5552 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pan-American Benefits Solutions, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 305.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schneider, Chad, P., , Date of Receipt Mailing Address 4470 Woodman Ave 2021 Apt 303 City State Zip Code Transaction ID: 16019530 CA Sherman Oaks 91423-5520 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Origin Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Allumbaugh, Joel, C., , Date of Receipt Mailing Address 6 E. Chestnut St., Suite 520 26 2021 City Zip Code State Transaction ID: 16019533 ME Augusta 04330-5759 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Worksite Benefit Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name (Wooden) Lovincey, Rebecca, L.,, Date of Receipt Mailing Address 201 NE Park Plaza Dr #293 2021 City Zip Code State Transaction ID: 16019534 WA Vancouver 98684-5881 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brown & Brown, Inc. Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rivera, Michael, A.,, Date of Receipt Mailing Address 13201 N.W. Fwy. Suite 265 09 2021 City State Zip Code Transaction ID: 16019536 TX Houston 77040-6165 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest General Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tretter, Robert, C., CLU, ChFC, Date of Receipt Mailing Address 6222 Spring Lake Drive 26 2021 City Zip Code State Transaction ID: 16019537 OH Hamilton 45011-8189 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Health Underwr Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 77 OF 158 Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Niederman, Brad, , , Date of Receipt Mailing Address 1745 Shea Center Dr 4th Floor 2021 City State Zip Code Transaction ID: 16019540 CO Highlands Ranch 80129-1537 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Niederman Insurance Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mann, William, D., , Date of Receipt Mailing Address 14727 E Red Bayberry Ct 09 2021 City State Zip Code Transaction ID: 16019541 TX Cypress 77433-5413 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Compliance Office CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Cociu, Dorothy, M., RHU, REBC, Date of Receipt Mailing Address P.O. Box 6677 26 2021 City State Zip Code Transaction ID: 16019542 CA Fullerton 92834-6677 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Advanced Benefit Consulting & Insuranc Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 ___

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gutierrez, Antonio 'Tony', , , Date of Receipt Mailing Address 12833 River Dance Dr. 2021 City Zip Code State Transaction ID: 16019543 NC Raleigh 27613-7093 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefitcare.com **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ramirez, Scott, , , Date of Receipt Mailing Address 1003 E Best Ave 09 2021 City State Zip Code Transaction ID: 16019544 Coeur D Alene ID 83814-4868 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dirks Insurance Group, LLC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hollister, Deborah, B., Date of Receipt Mailing Address P.O. Box 1556 2021 City State Zip Code Transaction ID: 16019569 FL Stuart 34995-1556 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hollister Insurance, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - -

FOR LINE NUMBER: PAGE 79 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brown, Carey, H., CLU, Date of Receipt Mailing Address Six Concourse Parkway Suite 2750 2021 City State Zip Code Transaction ID: 16019571 GA Atlanta 30328-6243 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Benefit Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Ruffin, Helena, , , Date of Receipt Mailing Address 5700 Timber Ln 09 2021 City State Zip Code Transaction ID: 16019573 NC Charlotte 28270-5270 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ruffin Insurance Solutions, Inc. President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Calhoun, Phil, , MBA, Date of Receipt Mailing Address 14771 Plaza Drive 2021 Ste. C City State Zip Code Transaction ID: 16019575 CA Tustin 92780-2779 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Integrity Advisors Employee Benefits Sales Manage Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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12 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tierney, Robert, J., HDHP, Date of Receipt Mailing Address 830 Main Street, Ste. 200 2021 City Zip Code State Transaction ID: 16019580 ID Meridian 83642-2611 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Compass Benefit Advisors **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 865.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Goodacre, James, William, Date of Receipt Mailing Address PO Box 22423 09 2021 City State Zip Code Transaction ID: 16019583 CA Carmel 93922-0423 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) James W. Goodacre II Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Jackson, Jerry, D., , Date of Receipt Mailing Address 1017 N. Maplewood Ave. 2021 City State Zip Code Transaction ID: 16019584 IL Peoria 61606-1035 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Jackson Financial Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schwartz, Matt, B., , Date of Receipt Mailing Address 2950 Breckenridge Lane, Suite 8A 2021 City Zip Code State Transaction ID: 16019585 KY Louisville 40220-1462 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schwartz Insurance Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Severo, Daniel, , , Date of Receipt Mailing Address 262 Chestnut St. 2021 Ste 200 City State Zip Code Transaction ID: 16019587 PA Meadville 16335-3302 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The DJB Group, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Jennings, Julie, , , Date of Receipt Mailing Address 55 Hathaway Pond Cir 2021 City State Zip Code Transaction ID: 16019588 MA Rochester 02770-4135 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Massachusetts Association of Health Un Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 82 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Suzanne, K., RHU, CEBS,, Date of Receipt Mailing Address 7621 Little Ave Suite 113 2021 City State Zip Code Transaction ID: 16019590 NC Charlotte 28226-8402 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Employee Benefit Advisors Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 1015.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Underhill, Elizabeth, J., , Date of Receipt Mailing Address 5951 Canoga Avenue 09 2021 City State Zip Code Transaction ID: 16019593 Woodland Hills CA 91367-5010 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Underhill Insurance Agency, Inc. Insurance agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 865.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Reddy, Michael, S., , Date of Receipt Mailing Address 330 River Pointe Drive 2021 City State Zip Code Transaction ID: 16019594 IN Elkhart 46514-1457 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Keystone Ins. & Benefits Group, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 255.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 83 OF 158 Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Matznick, Carol, , , Date of Receipt Mailing Address 3207 Cottingham Ct. 2021 City Zip Code State Transaction ID: 16019595 NC Greensboro 27410-8362 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Triune Technologies, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Barrett, William, J., CLU, ChFC, Date of Receipt Mailing Address 6 Keswick Commons 09 2021 City State Zip Code Transaction ID: 16019896 New Albany OH 43054-8231 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aetna Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Healy, Jacqueline, , , Date of Receipt Mailing Address 3124 S. Parker Road 28 2021 Suite A2-143 City State Zip Code Transaction ID: 16019897 CO Aurora 80014-6215 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Trilogy Benefits, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stocks, Deborah, P.,, Date of Receipt Mailing Address 2401 LAKE LOREINE LN 2021 City Zip Code State Transaction ID: 16019898 VA Henrico 23233-2523 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) OneDigital **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Cooper, Catherine, L., , Date of Receipt Mailing Address 39500 High Pointe Blvd., Suite 400 09 2021 City State Zip Code Transaction ID: 16019905 MI Novi 48375-5517 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Alliance Administrators Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1861.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Farrell, Jennifer, Liane, , Date of Receipt Mailing Address 3800 North Central Avenue 28 2021 9th Floor City State Zip Code Transaction ID: 16019908 ΑZ Phoenix 85012-1979 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Black, Gould & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 790.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gant, Tom, , , Date of Receipt Mailing Address 100 North Weinbach Avenue 2021 City Zip Code State Transaction ID: 16019910 IN **Fvansville** 47711-6006 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Schultheis Life & Health Agency Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 653.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Furr, Kenneth, , , Date of Receipt Mailing Address 333 Village Bl., Ste. 203 09 2021 City State Zip Code Transaction ID: 16019912 Incline Village NV 89451-8293 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Menath Insurance Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Cagliola, Victoria, , CPA, Date of Receipt Mailing Address 1041 Old Cassatt Rd 28 2021 City State Zip Code Transaction ID: 16019914 PΑ Berwyn 19312-1152 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Simkiss & Block CPA Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Snowden, Scott, D., , Date of Receipt Mailing Address 812 Lyndon Lane, Suite 101 2021 City Zip Code State Transaction ID: 16019915 KY Louisville 40222-3844 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Snowden & Associates, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Lubenow, Douglas, , , Date of Receipt Mailing Address 214 West Main Street 09 2021 Suite 101 City State Zip Code Transaction ID: 16019916 NJ Moorestown 08057-2345 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lubenow Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Grava, A. Andra, , , Date of Receipt Mailing Address 40 E. McDermott Drive 28 2021 City State Zip Code Transaction ID: 16019917 TX Allen 75002-2802 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The DI Center Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) 365.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bear, Dale, F.,, Date of Receipt Mailing Address 2027 Scott Station Rd 2021 State Zip Code Transaction ID: 16019918 Jefferson City MO 65109-8425 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

Agent

Aggregate Year-to-Date ▼

| Full Name of Individual (Last, First, Middle In Scidmore, Connie, , , | Date of Receipt | | |
|---|-----------------|-------------------------|------------------------------------|
| Mailing Address 700 Main St Suite 100 | 09 28 2021 | | |
| City | State | Zip Code | Transaction ID : 16019921 |
| Alamosa | CO | 81101-2527 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 150.00 |
| Name of Employer (for Individual) Friday Health Plans | Occup | oation (for Individual) | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | | | |
| Full Name of Individual (Last, First, Middle In | | | |

567.00

c. Hediger, Debbie, R., , Date of Receipt Mailing Address 4907 Boynton Ct 28 2021 City State Zip Code Transaction ID: 16019922 FL Tampa 33625-6622 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) R & R Integrated Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 652.00 Other (specify)

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| or for commercial purposes, other than using th | Statements may not be sold or used by any persue name and address of any political committee t | |
|--|--|--|
| NAME OF COMMITTEE (In Full) Health Underwriters Political A | ction Committee | |
| Full Name of Individual (Last, First, Middle Ir Morier, Dennis, J., REBC, Mailing Address 601 Abbott St City | State Zip Code | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Detroit | MI 48226-2513 | Transaction ID : 16019923 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | 85.00 | |
| Name of Employer (for Individual) Results Marketing, Inc. | Occupation (for Individual) Insurance Agent | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 340.00 | |
| Full Name of Individual (Last, First, Middle Ir Elam, Michael, Lee, , Mailing Address 9000 Northpark Drive | nitial) or Full Organization Name | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Johnston | State Zip Code IA 50131-4817 | Transaction ID : 16019924 |
| FEC ID number of contributing federal political committee. | Amount of Each Receipt this Period 85.00 | |
| Name of Employer (for Individual) Delta Dental of Iowa | Occupation (for Individual) Vice President | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 340.00 | |
| Full Name of Individual (Last, First, Middle In Holcomb, Karen, , , | nitial) or Full Organization Name | Date of Receipt |
| Mailing Address Davenport Tower Hotel 111 S Post St Suite 2260 City | State Zip Code | 09 28 2021 |
| Spokane | WA 99201-4912 | Transaction ID: 16019930 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer (for Individual) Viren and Associates, Inc. | Occupation (for Individual) Producer | Memo Item |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 270.00 | |
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| 1 | NAME OF COMMITTEE (In Full) | | | |
| \ | Health Underwriters Political Action | n Comm | ittee | |
| ۱. | Full Name of Individual (Last, First, Middle Initial) Hoover, Shelley, , , | or Full Orga | anization Name | Date of Receipt |
| <u></u> | Mailing Address 15431 Washington St. | | | 09 28 2021 |
| | City Riverside | State CA | Zip Code 92506-5763 | Transaction ID : 16019931 Amount of Each Receipt this Period |
| | FEC ID number of contributing rederal political committee. | С | | 30.00 |
| [| Name of Employer (for Individual) Dickerson Insurance Services | Occupa Broker | ation (for Individual) | Memo Item |
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| | Primary General | | 070.00 | 1 |
| | Other (specify) ▼ | | 270.00 | |
| | Full Name of Individual (Last, First, Middle Initial) | or Full Orga | anization Name | 2. (2 |
| - | Buechler, Anthony, C., , | | | Date of Receipt |
| _ | Mailing Address 13811 S 50TH ST | Ctoto | 7in Codo | 09 28 2021 |
| | City | State NE | Zip Code | Transaction ID: 16019934 |
| _ | Papillion | INE | 68133-2908 | Amount of Each Receipt this Period |
| | FEC ID number of contributing dederal political committee. | С | | 30.00 |
| E | Name of Employer (for Individual) Buechler Insurance Services | Occupa Broker | ation (for Individual) | Memo Item |
| F | | Aggregate Ye | ar-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 270.00 | |
| | Full Name of Individual (Last, First, Middle Initial) Crosby, Neil, R., , | or Full Orga | anization Name | Date of Receipt |
| - | Mailing Address 32110 Agoura Road | | | 09 28 2021 |
| (| City | State | Zip Code | Transaction ID: 16019935 |
| _ | Westlake Village | CA | 91361-4026 | Amount of Each Receipt this Period |
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| | Name of Employer (for Individual) Warner Pacific Insurance Services | | ation (for Individual) | Memo Item |
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| | Primary General | Aggregate Ye | ai-iu-Dal€ ▼ | |
| | Other (specify) | | 1265.00 | |
| SU | JBTOTAL of Receipts This Page (optional) | |) | 145.00 |
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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Morrison, James, M., RHU, REBC, Date of Receipt Mailing Address 2710 Gateway Rd 2021 City Zip Code State Transaction ID: 16019937 CA Carlsbad 92009-1730 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Morrison Insurance Services, Inc President Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tower, Kimberly, H.,, Date of Receipt Mailing Address 408 E ParkCenter Blvd, Suite 100 09 2021 City State Zip Code Transaction ID: 16019941 ID Boise 83706-6512 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PacificSource Health Plans Sales Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bilhartz, Brian, , , Date of Receipt Mailing Address 42376 Klondike Way 28 2021 City State Zip Code Transaction ID: 16019942 CA Indio 92203-2835 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bilhartz Desert Insurance Agency Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Malvich, Marlayna, , , Date of Receipt Mailing Address 4166 Jackson Blvd 2021 City Zip Code State Transaction ID: 16019943 MI White Lake 48383-1514 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Benefits Plus Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lardiere, Jim, , , Date of Receipt Mailing Address 119 Dyckman Place 09 2021 City State Zip Code Transaction ID: 16019945 Basking Ridge NJ 07920-1427 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Savoy Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 345.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Buza, Raymond, F., , Date of Receipt Mailing Address 1440 AIA 28 2021 City Zip Code State Transaction ID: 16019946 FL Vero Beach 32963 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Palm Beach Insurance Advisory Group, I Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 567.00 Other (specify) 123.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Childers, Russell, B., CLU, ChFC, Date of Receipt Mailing Address PO Box 1547 2021 City Zip Code State Transaction ID: 16019947 GA Americus 31709-1547 Amount of Each Receipt this Period FEC ID number of contributing C 90.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Russ Childers, CLU **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 810.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hill, Donna, D., FLMI, Date of Receipt Mailing Address 2905 Premiere Parkway 09 2021 Suite 285 City State Zip Code Transaction ID: 16019948 GA Duluth 30097-5246 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E2E Benefits Services Inc Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 790.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Reents, Joni, Robin, , Date of Receipt Mailing Address 10701 Melody Drive 09 28 2021 Suite 320 City State Zip Code Transaction ID: 16019949 CO Northglenn 80234-4122 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Reents Insurance Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 790.00 Other (specify) 260.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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93 OF 158 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Scopp, Kenneth, N,, Date of Receipt Mailing Address 12121 Wilshire Blvd Ste 1100 2021 City Zip Code State Transaction ID: 16019950 CA Los Angeles 90025-1166 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Financial Resources **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Scott, Nicole, , , Date of Receipt Mailing Address 6200 Northwest Pkwy 2021 City State Zip Code Transaction ID: 16019951 San Antonio TX 78249-3348 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) United Healthcare Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kapostins, Ashley, , , Date of Receipt Mailing Address 2301 Maitland Center Pkwy 28 2021 Ste 125 City State Zip Code Transaction ID: 16019952 FL Maitland 32751-4173 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CIGNA** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Sandra, , , Date of Receipt Mailing Address 252 Apacheria Pass W 2021 City Zip Code State Transaction ID: 16019954 TX Comfort 78013-3300 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Maxwell, Lisa, , , Date of Receipt Mailing Address G3526 Miller Rd. Suite B 09 2021 City State Zip Code Transaction ID: 16019956 MI Flint 48507-1286 Amount of Each Receipt this Period FEC ID number of contributing 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Security First Benefits Corporation Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 302.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Olson, Trenton, M., Date of Receipt Mailing Address 9980 S. 300 W. Suite 140 28 2021 City State Zip Code Transaction ID: 16019958 UT Sandy 84070-3641 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Benefits Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 123.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 95 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Whaley, Vicki, Lee, , Date of Receipt Mailing Address PO Box 759 170 River Rock Rd 2021 City Zip Code State Transaction ID: 16019959 CA Lewiston 96052-0759 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vicki Whaley Ins Svcs. Health Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Blackford, Stephen, I,, Date of Receipt Mailing Address 11481 Old St. Augustine Rd., # 201 09 2021 City State Zip Code Transaction ID: 16019961 Jacksonville FL 32258-1475 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Blackford Group Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Lago, Julian, E., , Date of Receipt Mailing Address 6671 W Indiantown Rd, Ste 50284 28 2021 City Zip Code State Transaction ID: 16019963 FL **Jupiter** 33458-3991 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benezon LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Blasman, Wayne,,, Date of Receipt Mailing Address 5210 Lewis Road, Suite 14 2021 City Zip Code State Transaction ID: 16019967 CA Agoura Hills 91301-2662 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bridgeport Benefits Inc **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Collins, Martha, T., RHU, Date of Receipt Mailing Address 545 N. Mountain Avenue 09 2021 Suite 208 City State Zip Code Transaction ID: 16019968 CA Upland 91786-5055 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Martin & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 210.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lasley, Mariette, , , Date of Receipt Mailing Address 6100 Palmaya Lane 28 2021 City State Zip Code Transaction ID: 16019969 CA Orangevale 95662-5903 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ameritas Receipt For: Aggregate Year-to-Date ▼ Primary General 352.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional).....

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| NAME OF COMMITTEE (In Full) | | |
| Health Underwriters Political Action | on Committee | |
| Full Name of Individual (Last, First, Middle Initial |) or Full Organization Name | Date of Receipt |
| Mailing Address 701 Lamar | | 09 28 2021 |
| City Wichita Falls | State Zip Code TX 76301-6824 | Transaction ID : 16019972 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 170.00 |
| Name of Employer (for Individual) Boley Featherston Insurance Agency | Occupation (for Individual) Broker | Memo Item |
| | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1530.00 | |
| Full Name of Individual (Last, First, Middle Initial 3. Selinsky, Steven, , , |) or Full Organization Name | Date of Receipt |
| Mailing Address 28638 Oak Point Drive | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 16019973 |
| Farmington Hills | MI 48331-2706 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 85.00 |
| Name of Employer (for Individual) Health Alliance Plan | Occupation (for Individual) Director of Sales | Memo Item |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 340.00 | |
| Full Name of Individual (Last, First, Middle Initial |) or Full Organization Name | Date of Receipt |
| Mailing Address 215 Airport North Office Park | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Fort Wayne | State Zip Code | Transaction ID : 16019975 |
| FEC ID number of contributing | .5525 5.62 | Amount of Each Receipt this Period |
| federal political committee. | C | 85.00 |
| Name of Employer (for Individual) Hartman Insurance Services | Occupation (for Individual) Broker | Memo Item |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) | 765.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 340.00 |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stubbs, Guy, , , Date of Receipt Mailing Address PO Box 337 2021 City Zip Code State Transaction ID: 16020055 ID Jerome 83338-0337 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hall and Associates Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Stoneburner, Ryan, , , Date of Receipt Mailing Address 110 West Berry Street 09 2021 Suite 1204 City State Zip Code Transaction ID: 16020258 Fort Wayne IN 46802-2366 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Insurance, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Adam, Ashely, N., CEBS, GBA, Date of Receipt Mailing Address 2717 N 118th Street 28 2021 Suite 300 City State Zip Code Transaction ID: 16026815 NE Omaha 68164-9684 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UnitedHealthcare **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General Refund(s) on Schedule B Totaling \$30.00 This changes 240.00 Other (specify) the YTD Total to \$240.00 270.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Acti | ion Comm | nittee | |
| Α. | Full Name of Individual (Last, First, Middle Initia Luckie, Susan, Harkins, , | al) or Full Org | anization Name | Date of Receipt |
| | Mailing Address 1277 Hwy 82W, Suite 126 | | | 09 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Leesburg | State GA | Zip Code 31763-5864 | Transaction ID : 16026816 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 0.00 |
| | Name of Employer (for Individual) Luckie Insurance Agency | Occup Broke | ation (for Individual) r | ✗ Memo Item |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ear-to-Date ▼ 0.00 | Refund(s) on Schedule B Totaling \$150.00 This changes the YTD Total to \$0.00 |
| В. | Full Name of Individual (Last, First, Middle Initial Muniz, Jose, , , Mailing Address 2801 SW 149th Ave #100 | al) or Full Org | anization Name | Date of Receipt |
| | City | State | Zip Code | 09 09 2021 Transaction ID : 16026817 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 0.00 |
| | Name of Employer (for Individual) Devoted Health | Occup | ation (for Individual) | ✗ Memo Item |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ear-to-Date ▼ | Refund(s) on Schedule B Totaling \$365.00 This changes the YTD Total to \$0.00 |
| | Full Name of Individual (Last, First, Middle Initial Scidmore, Connie, , , | al) or Full Org | anization Name | Date of Receipt |
| | Mailing Address 700 Main St Suite 100 | | | 09 28 2021 |
| | City Alamosa | State CO | Zip Code 81101-2527 | Transaction ID : 16026818 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 0.00 |
| | Name of Employer (for Individual) Friday Health Plans Receipt For: | | ation (for Individual) | ✗ Memo Item |
| | Primary General Other (specify) | Aggregate Ye | ear-to-Date ▼ 150.00 | Refund(s) on Schedule B Totaling \$150.00 This changes the YTD Total to \$150.00 |
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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Villagran, Denise, S., MBA, Date of Receipt Mailing Address 210 S Carancahua St Ste 301 2021 City State Zip Code Transaction ID: PR433061226517 TX Corpus Christi 78401-3042 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) 90 Degree Benefits/Entrust, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 945.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schreder, Lynn, M., , Date of Receipt Mailing Address 5550 Wild Rose Lane 2021 Suite 400 City State Zip Code Transaction ID : PR433076126517 IΑ West Des Moines 50266-5351 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) KHI Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 2000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Adams, Carla, , CBC, GBA,, Date of Receipt Mailing Address 2302 International Ln 30 2021 City Zip Code State Transaction ID: PR433095026517 WI Madison 53704-3136 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **TASC** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) 184.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Deacon, Joseph, H.,, Date of Receipt Mailing Address 221 1/2 Hale St 2021 City Zip Code State Transaction ID: PR433129326517 WV Charleston 25301-2207 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Deacon & Deacon Insurance Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McFerrin, Dwane, C., CLU, CFP,, Date of Receipt Mailing Address 8420 West Dodge Road 2021 Suite 510 City State Zip Code Transaction ID : PR433168126517 NE Omaha 68114-3432 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Market Sales, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Christensen, H Elizabeth, , , Date of Receipt Mailing Address 3013 Sonora Canyon Rd 30 2021 City Zip Code State Transaction ID: PR433187726517 TX Weatherford 76087-8215 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) United Senior Services of Texas **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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| NAME OF COMMITTEE (In Full) | | | | | | | | | | | | |
| $ \rangle$ | Health Underwriters Political Act | ion Cor | mmi | ttee | | | | | | | | |
| <u> </u> | Full Name of Individual (Last, First, Middle Initi | al) or Full | Orga | nization Name | | | | | | | | |
| A. | Dorman, Harry, , , | | | Date of Receipt | | | | | | | | |
| | Mailing Address 1500 N Casaloma Dr Suite 411 | | | | | M = M / D = D / Y = Y = Y | | | | | | |
| | | | | 1 | | 09 | 30 | Ы ∟. | 2021 | | | |
| | City | State | | Zip Code | | Trans | action ID | PR433197 | 426517 | | | |
| | Appleton | WI | | 54913-8219 | | Amoun | of Each I | Receipt this | Period | | | |
| | FEC ID number of contributing federal political committee. | С | | | | 30.00 | | | | | | |
| | Name of Employer (for Individual) | Oc | ccupa | tion (for Individual) | | М | emo Item | | | | | |
| | Medicare Masters, LLC | | gent | | | | | | | | | |
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| | Primary General | Aggregat | e 166 | ar-to-Date v | | P/R Ded | uction (\$30 | 0.00 Monthly | v) | | | |
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| | Full Name of Individual (Last, First, Middle Initi | al) or Full | Orga | nization Name | | | | | | | | |
| В. | Long, Scott, W., CLCS, SGS, | | | | | Date of | Receipt | | | | | |
| | Mailing Address 1715 Greenway Village Dr. | ailing Address 1715 Greenway Village Dr. | | | | | | D / Y | Y | Y | | |
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| | City | State Zip Code | | | | Trans | action ID: | PR433206 | 826517 | | | |
| | Katy | TX | 77494-2175 | | | | of Each I | Receipt this | Period | | | |
| | FEC ID number of contributing | С | | | | | | | 30.00 | 2 | | |
| | federal political committee. | O | | | | | 7 | | 30.00 | 9 | | |
| | Name of Employer (for Individual) | Oc | ccupa | tion (for Individual) | М | emo Item | | | | | | |
| | Globe Life Benefits | | | /lanager | - | | | | | | | |
| | Receipt For: | | | ar-to-Date ▼ | | | | | | | | |
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| | Other (specify) ▼ | 1 | | 2 | (¢eeree mermiy) | | | | | | | |
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| | Full Name of Individual (Last, First, Middle Initi | al) or Full | Orga | nization Name | | | | | | | | |
| C. | Brittain, Jennifer, , , | | | | | Date of | Receipt | | | | | |
| | Mailing Address 208 N. Mill | | | | | M = M | / D | | Y Y Y | Y | | |
| | City | Ctoto | | 7in Codo | | 09 | 30 | | 2021 | _ | | |
| | City Pryor | State OK | | Zip Code 74361-2422 | | | | : PR433214 | | | | |
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| | FEC ID number of contributing | С | | | | | | | 85.00 | 0 | | |
| | federal political committee. | - | 0 | | | | , | | | | | |
| | Name of Employer (for Individual) | Oc | cupa | tion (for Individual) | | М | emo Item | | | | | |
| | Brown & Brown, Inc. | Bro | oker | | | | | | | | | |
| | Receipt For: | Aggregat | e Yea | ar-to-Date ▼ | | | | | | | | |
| | Primary General | | _ | | 7CE 00 | P/R Ded | uction (\$85 | 5.00 Monthly | y) | | | |
| | Other (specify) | 765.00 | | | | | | | | | | |
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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Ac | tion Comm | ittee | | | | |
| Α. | | ial) or Full Orga | anization Name | Date of Receipt | | | |
| | Mailing Address 5520 Monroe Street | 09 30 2021 | | | | | |
| | Suite A City | State | Zip Code | Transaction ID : PR433268326517 | | | |
| | Sylvania | OH | 43560-2538 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | 30.00 | | | | | |
| | Name of Employer (for Individual) First Insurance Group | Memo Item | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | P/R Deduction (\$30.00 Monthly) | | | | | |
| В. | Full Name of Individual (Last, First, Middle Init Shooshanian, Barbara, , , | Date of Receipt | | | | | |
| | Mailing Address 39500 High Pointe Blvd Ste 400 | 04-4- | To Oak | 09 / 30 / 2021 | | | |
| | City Novi | State MI | Zip Code 48375-5517 | Transaction ID : PR433298726517 | | | |
| | FEC ID number of contributing federal political committee. | C | 40373-3317 | Amount of Each Receipt this Period 30.00 | | | |
| | Name of Employer (for Individual) Health Alliance Administrators | Occupa Broker | ation (for Individual) | Memo Item | | | |
| | Receipt For: Primary General Other (specify) ▼ | mary General Aggregate Teal-to-Date V | | | | | |
| | Full Name of Individual (Last, First, Middle Init Vetter, Leah, M., , | Date of Receipt | | | | | |
| | Mailing Address 10050 Regency Circle Suite 300 | | | 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City Omaha | State NE | Zip Code 68114-3721 | Transaction ID: PR433302726517 | | | |
| | FEC ID number of contributing federal political committee. | C | 001110121 | Amount of Each Receipt this Period 30.00 | | | |
| | Name of Employer (for Individual) Arthur J. Gallagher | Occupa Broker | ation (for Individual) | Memo Item | | | |
| | Receipt For: Primary General Other (specify) | eceipt For: Primary General Aggregate Year-to-Date ▼ | | | | | |
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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thams, Todd, , , Date of Receipt Mailing Address 1209 Broadway 2021 City Zip Code State Transaction ID: PR433308326517 IΑ Denison 51442-2632 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Thams Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ornellas, Helen, , , Date of Receipt Mailing Address 239 W. Court St. 2021 City State Zip Code Transaction ID : PR433463226517 Woodland CA 95695-3080 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ornellas & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Willison, Clover, Denise, , Date of Receipt Mailing Address 355 Sprowel Creek Rd 30 2021 City State Zip Code Transaction ID: PR433468626517 CA Garberville 95542-3110 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clover Willison Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 900.00 Other (specify) 227.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Drake, Laura, , , Date of Receipt Mailing Address 401 Gooding St N #106 2021 City Zip Code State Transaction ID: PR433504426517 ID Twin Falls 83301-6177 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Laura Drake Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Coogan, Michael, , , Date of Receipt Mailing Address 118 North Bedford Road 2021 Suite 100 City State Zip Code Transaction ID : PR433548026517 NY Mount Kisco 10549-2555 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Coogan FX Insurance LLC Agency Founder Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. VanDuine, Dustin, , , Date of Receipt Mailing Address 2850 W Grand Blvd 30 2021 City State Zip Code Transaction ID: PR433572626517 MI Detroit 48202-2643 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Alliance Plan Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 114.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Golden, Johnna, , , Date of Receipt Mailing Address 3800 Centerpoint Dr., Ste 940 30 2021 City Zip Code State Transaction ID: PR433692826517 AK Anchorage 99503-5825 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Premera Blue Cross Blue Shield of Alas Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Butler, Allison, , , Date of Receipt Mailing Address 2800 Civic Circle Suite 200 2021 City State Zip Code Transaction ID : PR433694526517 TX Amarillo 79109-1619 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Butler Benefits & Consulting, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schneider, JoEllen, , , Date of Receipt Mailing Address 2807 W Taft St 30 2021 City Zip Code State Transaction ID: PR433791826517 ID Boise 83703-5015 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Professionals Benefit Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skinner, Roger, W.,, Date of Receipt Mailing Address 5518 Hammock Glen Drive 30 2021 City Zip Code State Transaction ID: PR436789426517 IN Indianapolis 46235-9779 Amount of Each Receipt this Period FEC ID number of contributing 30.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aflac **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.50 Monthly) 274.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Trautwein, Janet, , , Date of Receipt Mailing Address 1212 New York Ave. NW, Ste 1100 2021 City State Zip Code Transaction ID : PR436821426517 DC Washington 20005-3987 Amount of Each Receipt this Period FEC ID number of contributing 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NAHU CEO Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) Other (specify) 1530.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rios-Carl, Elizabeth, E., PIWT SGS, Date of Receipt Mailing Address 210 North Campbell 30 2021 City State Zip Code Transaction ID: PR436824526517 TX El Paso 79901-1406 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) 285.50 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ashmore, Elizabeth, , CBC, SGS,, Date of Receipt Mailing Address 6102 82nd St, Bldg #6 30 2021 City Zip Code State Transaction ID: PR436830326517 TX Lubbock 79424-0803 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ashmore/Arthur J. Gallagher, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) 1530.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Grundman, Robert, A., , Date of Receipt Mailing Address 7412 Karl Drive 09 2021 City State Zip Code Transaction ID : PR436838926517 NE Lincoln 68516-4368 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Benefit Strategies Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wright, Keith, L., ChHC, CLU, R. Date of Receipt Mailing Address 401 W Front St 30 2021 Ste 4 City State Zip Code Transaction ID: PR436848526517 MI Traverse City 49684-2259 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wright Insurance Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) 262.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bean, Darrald, T.,, Date of Receipt Mailing Address 3922 Rampart ST 2021 City State Zip Code Transaction ID: PR436853326517 ID Boise 83704-4557 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Broker Bean Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Trebing, C. Louanne, , , Date of Receipt

| Mailing Address 1806 F | atton Drive | | | 09 / | 30 | 2021 | | | |
|---|--|---|-------------|------------------------------------|--------------|----------------|--|--|--|
| City | Stat | е | Zip Code | Transacti | on ID · PR4 | 36856926517 | | | |
| Garland | TX | | 75042-8205 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of confederal political committee | ů | | 30.00 | | | | | | |
| Name of Employer (for Trebing Insurance Servi | | P/R Deduction (\$30.00 Monthly) | | | | | | | |
| Receipt For: Primary Other (specify) ▼ | General | | | | | | | | |
| Full Name of Individual C. Freeman, Michael | (Last, First, Middle Initial) or FeI, J., CLU, | Date of Receipt | | | | | | | |
| Mailing Address 2333 (Suite 2 | | | | 09 30 2021 | | | | | |
| City | Stat | е | Zip Code | Transact | ion ID : PR4 | 36861826517 | | | |
| San Diego | CA | | 92108-3600 | Amount of | Each Recei | pt this Period | | | |
| FEC ID number of confederal political committee | | | | 30.00 | | | | | |
| Name of Employer (for Countywide Health Ins. | , | , | | | | | | | |
| Receipt For: | | | r to Data 🔻 | 1 | | | | | |

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90.00

P/R Deduction (\$30.00 Monthly)

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mobley, Sandra, V., REBC, RHU, Date of Receipt Mailing Address 137 Executive Dr. Suite D 30 2021 City Zip Code State Transaction ID: PR436869326517 MS Madison 39110-8456 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mobley Insurance Agency LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wilson, Paula, L.,, Date of Receipt Mailing Address 31930 Daniel Way 09 2021 City State Zip Code Transaction ID : PR436873526517 CA Temecula 92591-2129 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Paula Wilson, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Trahin, Cindy, K., RHU, CSA, Date of Receipt Mailing Address 7127 Homestead Road 30 2021 Suite B City State Zip Code Transaction ID: PR436875626517 IN Fort Wayne 46814-4601 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Trahin Insurance Services LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 295.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stuart, Rodney, , , Date of Receipt Mailing Address 484 E Carmel Dr Suite 358 30 2021 City Zip Code State Transaction ID: PR436883326517 IN Carmel 46032-2812 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Strategic Insurance Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Spragins, Jackie, L.,, Date of Receipt Mailing Address P O Box 2073 2021 City State Zip Code Transaction ID : PR436895326517 Wichita Falls TX 76307-2073 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Allred-Thompson-Mason-Daugherty Insura Producer Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Janway, Leah-Anne, , , Date of Receipt Mailing Address 2225 SW 96 30 2021 City Zip Code State Transaction ID: PR436901526517 OK Oklahoma City 73159-6861 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 295.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - 7

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Booth, Tonya, S., , Date of Receipt Mailing Address P.O. Box 2542 432 Halifax Drive 2021 City State Zip Code Transaction ID: PR436911026517 TX Coppell 75019-8500 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BIZ Benefits, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 925.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Shaffer, Annette, , , Date of Receipt Mailing Address 418 South Main Street 2021 City State Zip Code Transaction ID : PR436917226517 OH Findlay 45840-3273 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Group Benefit Consultants Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kaczmarek, Lawrence, , , Date of Receipt Mailing Address 145 N. Chestnut St., 30 2021 Ste. 202 City State Zip Code Transaction ID: PR436923426517 OH Ravenna 44266-4009 Amount of Each Receipt this Period FEC ID number of contributing C 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaczmarek Ins. Services Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$31.00 Monthly) 279.00 Other (specify) 161.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stenger, James, R., , Date of Receipt Mailing Address 8926 Crown Colony Boulevard 2021 City Zip Code State Transaction ID: PR436939926517 FL Fort Myers 33908-5627 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AgencySmart **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Seifert, Greg, J., , Date of Receipt Mailing Address 3311 NE 115th St. 2021 City State Zip Code Transaction ID : PR436941626517 WA Vancouver 98686-3945 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 815.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Woods, John, T., Date of Receipt Mailing Address 1700 East Market Street 30 2021 Suite 110 City State Zip Code Transaction ID: PR436950026517 OH Warren 44483-6625 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INSURANCE NAVIGATORS AGENCY Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 114 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Holland, Robert, V.,, Date of Receipt Mailing Address PO Box 698 30 2021 City Zip Code State Transaction ID: PR436961726517 WA Centralia 98531-0698 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Centralia General Agencies **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$63.00 Monthly) 567.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schneider, John, E,, Date of Receipt Mailing Address 4701 Trousdale Dr. Ste 202 2021 City State Zip Code Transaction ID : PR436963526517 Nashville ΤN 37220-1386 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Colonial Life Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Golm, Robert, C., Date of Receipt Mailing Address 117 S Main Street, Ste. 1 30 2021 City State Zip Code Transaction ID: PR436976026517 MI Wayland 49348-1288 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Golm Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Monthly) 635.00 Other (specify) 108.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 115 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Parker, John, C., RHU, LTCP, Date of Receipt Mailing Address 38 Hope St Unit 1312 2021 City State Zip Code Transaction ID: PR436986826517 CT Niantic 06357-2454 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Parker Agency **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 925.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Splawn, William, Craig, Date of Receipt Mailing Address 800 Avenue C 09 2021 City State Zip Code Transaction ID : PR436992826517 TX Katy 77493-2302 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Splawn & Associates Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Phillips, Paige, W., , Date of Receipt Mailing Address 1434 Hwy 301 30 2021 City State Zip Code Transaction ID: PR436993026517 AL Calera 35040-5466 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Paige Phillips Agency, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) 250.00 Other (specify) 175.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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| | NAME OF COMMITTEE (In Full) Health Underwriters Political Action | on Commi | ttee | |
| ١. | Full Name of Individual (Last, First, Middle Initial Fristoe, Kelly, Don, LUTCF, SGS, Mailing Address PO Box 4789 | nization Name | Date of Receipt | |
| | | Zip Code | 09 30 2021 | |
| | City | Transaction ID : PR437002326517 | | |
| | Wichita Falls | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | 30.00 |
| | Name of Employer (for Individual) Financial Partners | Occupat Broker | ion (for Individual) | Memo Item |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Yea | ur-to-Date ▼ 910.00 | P/R Deduction (\$30.00 Monthly) |
| 3. | Full Name of Individual (Last, First, Middle Initial Thorn, Ryan, P., , |) or Full Orgai | nization Name | Date of Receipt |
| | Mailing Address 10342 South Springcrest Lane | 09 30 2021 | | |
| | City | State | Zip Code | Transaction ID : PR437004026517 |
| | South Jordan | UT | 84095-4538 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 40.00 |
| | Name of Employer (for Individual) Ryan P. Thorn Insurance Planning, Inc. | Occupa Broker | tion (for Individual) | Memo Item |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Yea | r-to-Date ▼ 560.00 | P/R Deduction (\$40.00 Monthly) |
| >. | Full Name of Individual (Last, First, Middle Initial Buie, Scott, T., , |) or Full Orgai | nization Name | Date of Receipt |
| | Mailing Address 4525 S 2300 E Ste 201 | I.a. | | 09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Salt Lake City | State UT | Zip Code 84117-4639 | Transaction ID : PR437010526517 |
| | FEC ID number of contributing | C | | Amount of Each Receipt this Period 50.00 |
| | federal political committee. | | | |
| | Name of Employer (for Individual) Buie Insurance Services | ion (for Individual) | Memo Item | |
| | Receipt For: Primary General | r-to-Date ▼ | P/R Deduction (\$50.00 Monthly) | |
| | Other (specify) | | 450.00 | . At Deduction (\$50.00 Intertally) |
| s | UBTOTAL of Receipts This Page (optional) | | > | 120.00 |
| T | OTAL This Period (last page this line number on | ly) | > | |

FOR LINE NUMBER: PAGE 117 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gray, Michael, D., RHU, Date of Receipt Mailing Address 601 R St. Ste. 150 2021 City Zip Code State Transaction ID: PR437016726517 NE Lincoln 68508-1540 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **FNIC Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 925.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Duhon, Keith, M., , Date of Receipt Mailing Address PO Box 80158 2021 City State Zip Code Transaction ID : PR437017126517 LA Lafayette 70598-0158 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Family Insurance Center, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kaczmarek, T. Darlene, , , Date of Receipt Mailing Address 145 N. Chestnut St., Suite 202 30 2021 City Zip Code State Transaction ID: PR437026326517 OH Ravenna 44266-4009 Amount of Each Receipt this Period FEC ID number of contributing C 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaczmarek Ins. Services Agency, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$31.00 Monthly) 279.00 Other (specify) 161.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - 7

FOR LINE NUMBER: PAGE 118 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Blizman, Donna, J.,, Date of Receipt Mailing Address 1939 Racimo Dr 2021 City Zip Code State Transaction ID: PR437031526517 FL Sarasota 34240-9426 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Employee Benefits Marketing Group Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Moore, Wesley, P., , Date of Receipt Mailing Address P O Box 604 2021 City State Zip Code Transaction ID : PR437039426517 SC Darlington 29540-0604 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Moore Insurance Agency, LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hayes, Leesa, Kay, , Date of Receipt Mailing Address 812 Lyndon Lane Suite 101 30 2021 City Zip Code State Transaction ID: PR437043326517 KY Louisville 40222-3844 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Snowden & Associates, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 119 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ameling, Mary, K.,, Date of Receipt Mailing Address 1202 Wood Lily Circle 30 2021 City Zip Code State Transaction ID: PR437057726517 NC Leland 28451-7686 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ganey, Byrd, & Dunn Insurance Group, I Producer Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Olson, Terri, M., , Date of Receipt Mailing Address P. O. Box 21479 2021 City State Zip Code Transaction ID : PR437070226517 OR Keizer 97307-1479 Amount of Each Receipt this Period FEC ID number of contributing 65.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Olson Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$65.00 Monthly) Other (specify) 585.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Alberts, Suzetta, E., , Date of Receipt Mailing Address 5605 Storrow Court 30 2021 Ste 535 City State Zip Code Transaction ID: PR437076126517 MI Warren 48092-6338 Amount of Each Receipt this Period FEC ID number of contributing C 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Comprehensive Benefits, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$84.00 Monthly) 881.00 Other (specify) 179.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

158 FOR LINE NUMBER: PAGE 120 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Kevin, W., CLU, RHU, Date of Receipt Mailing Address P.O. Box 674103 30 2021 City Zip Code State Transaction ID: PR437077226517 GA Marietta 30006-0069 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) KSA Insurance Agency, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Koehler, Linda Rose, , LPRT CIP C, Date of Receipt Mailing Address 2 Treeble Ct 09 30 2021 City State Zip Code Transaction ID : PR437090126517 NC Greensboro 27406-5375 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BCI Health Benefits Solutions LLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stephens, James, R., Date of Receipt Mailing Address 100 Mansell Ct East 30 2021 Suite 400 City State Zip Code Transaction ID: PR437110726517 GΑ Roswell 30076-4859 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Humana Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00

| UBTOTAL of Receipts This Page (optional) | · | | | | | | | | | | - | _ |
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FOR LINE NUMBER: PAGE 121 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MCEVILLY, BRIAN, J., RHU, Date of Receipt Mailing Address 7260 West Azure Drive #140-201 2021 City Zip Code State Transaction ID: PR437117726517 NV Las Vegas 89130-7999 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) McEvilly Benefits **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Benton, Bruce, D., RHU, REBC, Date of Receipt Mailing Address 20300 Ventura Blvd 2021 Suite 200 City State Zip Code Transaction ID : PR437123026517 Woodland Hills CA 91364-0959 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Genesis Financial & Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 790.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Antongiovanni, Joanna, , , Date of Receipt Mailing Address 2929 Allen Parkway 30 2021 Suite 2500 City State Zip Code Transaction ID: PR437128026517 TX Houston 77019-2178 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Marsh Wortham Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 157.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 122 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Allard, Terry, , CEBS, Date of Receipt Mailing Address 3000 A Street, Suite 400 2021 City Zip Code State Transaction ID: PR437182326517 AK Anchorage 99503-4040 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wilson Albers **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$250.00 Monthly) 2325.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Debler, Johnnie, O., RHU, ChHC, Date of Receipt Mailing Address 1102 E. Laurel St. 2021 City State Zip Code Transaction ID : PR437196426517 TX Rockport 78382-2815 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) GSM Insurors Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 370.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bunkers, Scott, R., Date of Receipt Mailing Address 2211 Lee Road, Suite 100 30 2021 City State Zip Code Transaction ID: PR437196726517 FL Winter Park 32789-1849 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fringe Benefit Plans, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 310.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - 7

FOR LINE NUMBER: PAGE 123 OF 158 Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nace, Joshua, D.,, Date of Receipt Mailing Address 100 W. Harrison Street, Suite S440 2021 City Zip Code State Transaction ID: PR437203326517 WA Seattle 98119-4116 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dental Health Services Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Garbina, James, S., , Date of Receipt Mailing Address 14010 FNB Pkwy Ste 300 2021 City State Zip Code Transaction ID : PR437212226517 NE Omaha 68154-5235 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Harry A. Koch Co Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Cooper, Catherine, L., Date of Receipt Mailing Address 39500 High Pointe Blvd., Suite 400 30 2021 City Zip Code State Transaction ID: PR437218326517 MI Novi 48375-5517 Amount of Each Receipt this Period FEC ID number of contributing C 112.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Alliance Administrators **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$112.00 Monthly) 1973.00 Other (specify) 227.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Daubert, Jim, F., CLU, Date of Receipt Mailing Address P.O. Box 67220 2021 City Zip Code State Transaction ID: PR437219626517 NE Lincoln 68506-7220 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Concord Benefits Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Musser, Rita, A.,, Date of Receipt Mailing Address 3330 Thames Drive 2021 City State Zip Code Transaction ID : PR437229126517 Fort Wayne IN 46815-5994 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Insurance Solutions Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gardner, Joy, K., LUTCF, Date of Receipt Mailing Address 9424 Double R Blvd 30 2021 City Zip Code State Transaction ID: PR437231226517 NV Reno 89521-5977 Amount of Each Receipt this Period FEC ID number of contributing C 47.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Comstock Insurance Agencies, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$47.00 Monthly) 423.00 Other (specify) 162.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 125 OF 158

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| | Statements may not be sold or used by any perse name and address of any political committee to | |
|--|--|---|
| NAME OF COMMITTEE (In Full) | | |
| angle Health Underwriters Political A | ction Committee | |
| Full Name of Individual (Last, First, Middle Ir A. Rowe, Peter, L., CLU, | nitial) or Full Organization Name | Date of Receipt |
| Mailing Address 3033 N. Central Ave | | M = M / D = D / Y = Y = Y |
| Suite 810 | 17: 0 | 09 30 2021 |
| City Phoenix | State | Transaction ID : PR437236926517 |
| FEC ID number of contributing federal political committee. | Amount of Each Receipt this Period 170.00 | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item |
| Arcwood Benefits Consulting, Inc. Receipt For: | Broker Aggregate Year-to-Date ▼ | _ |
| Primary General Other (specify) ▼ | 2055.00 | P/R Deduction (\$170.00 Monthly) |
| Full Name of Individual (Last, First, Middle Ir 3. Barton-Lewis, Diane, L., , | itial) or Full Organization Name | Date of Receipt |
| Mailing Address 615 E Britton Rd | | M M / D D / Y Y Y Y |
| | 09 30 2021 | |
| City Oklahoma City | State Zip Code 73114-7710 | Transaction ID : PR437254126517 |
| FEC ID number of contributing | | Amount of Each Receipt this Period |
| federal political committee. | C | 30.00 |
| Name of Employer (for Individual) Gallagher Benefit Services, Inc. | Occupation (for Individual) Broker | Memo Item |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 270.00 | P/R Deduction (\$30.00 Monthly) |
| Full Name of Individual (Last, First, Middle Ir | l nitial) or Full Organization Name | |
| Merken, Monte, A., , | | Date of Receipt |
| Mailing Address 24577 Indian Hill Lane | Otata Tip Oc. de | 09 30 2021 |
| City West Hills | State | Transaction ID : PR437256126517 Amount of Each Receipt this Period |
| FEC ID number of contributing | | |
| federal political committee. | C | 30.00 |
| Name of Employer (for Individual) | Memo Item | |
| Merken Insurance, Petersen Internation Receipt For: | - | |
| Primary General | Aggregate Year-to-Date ▼ | P/R Deduction (\$30.00 Monthly) |
| Other (specify) | 270.00 | |
| SUBTOTAL of Receipts This Page (optional) | > | 230.00 |
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FOR LINE NUMBER: PAGE 126 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McLane, Mark, A., , Date of Receipt Mailing Address 3301 Veterans Drive, Suite 210 2021 City Zip Code State Transaction ID: PR437258326517 MI Traverse City 49684-4575 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mark McLane Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Powers-Booth, Sandra, Lee, Date of Receipt Mailing Address 4817 S. 175th Street 2021 City State Zip Code Transaction ID : PR437264326517 WA Seatac 98188-3710 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health Benefits Northwest Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hardy, Allen, D., LUTCF, Date of Receipt Mailing Address 802 Kosciusko Road 30 2021 P.O. Box 89 City State Zip Code Transaction ID: PR437264926517 MS Philadelphia 39350-3555 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Philadelphia Security Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 102.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Harte, Heather, Roberts, , Date of Receipt Mailing Address 11365 Avant Lane 2021 City Zip Code State Transaction ID: PR437268326517 OH Cincinnati 45249-2373 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chard Snyder An Ascensus Company **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Toups, Jennifer, L., , Date of Receipt Mailing Address #1 Galleria Blvd, Suite 1122 2021 City State Zip Code Transaction ID : PR437270526517 LA Metairie 70001-2092 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Humana Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hissong, James, H., , Date of Receipt Mailing Address 8401 Widmer Rd 30 2021 City State Zip Code Transaction ID : PR437274726517 KS Lenexa 66215-5416 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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| Ar or | ly information copied from such Reports and St. for commercial purposes, other than using the | atements may name and add | not be sold or used by any pers ress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. | | | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | | | | |
| Health Underwriters Political Action Committee | | | | | | | | | | |
| Δ. | Full Name of Individual (Last, First, Middle Initi Summers, James, F., , | Date of Receipt | | | | | | | | |
| Λ. | Mailing Address 8420 West Dodge Road, 5th Fo | M M / D D / Y Y Y Y | | | | | | | | |
| | | | 7: 0.1- | 09 30 2021 | | | | | | |
| | City Omaha | State NE | Zip Code 68114-3443 | Transaction ID : PR437281026517 | | | | | | |
| | | 145 | 00114-3443 | Amount of Each Receipt this Period | | | | | | |
| | FEC ID number of contributing federal political committee. | 125.00 | | | | | | | | |
| | Name of Employer (for Individual) | Occupa | ation (for Individual) | Memo Item | | | | | | |
| | Senior Market Sales, Inc. | Broker | • | | | | | | | |
| | Receipt For: | Aggregate Ye | ear-to-Date ▼ | | | | | | | |
| | Primary General | 00.0 | | P/R Deduction (\$125.00 Monthly) | | | | | | |
| | Other (specify) ▼ | | 1125.00 | | | | | | | |
| | Full Name of Individual (Last, First, Middle Initi | al) or Full Orga | anization Name | | | | | | | |
| В. | Grossnickle, Jeffrey, R., , | | | Date of Receipt | | | | | | |
| | Mailing Address 1405 North College Avenue | 09 30 2021 | | | | | | | | |
| | City | State | Zip Code | Transaction ID : PR437294726517 | | | | | | |
| | Bloomington | IN | 47404-2417 | Amount of Each Receipt this Period | | | | | | |
| | FEC ID number of contributing federal political committee. | 30.00 | | | | | | | | |
| | Name of Employer (for Individual) First Insurance Group Inc. | Occupa Agent | ation (for Individual) | Memo Item | | | | | | |
| | Receipt For: | Aggregate Ye | ear-to-Date ▼ | | | | | | | |
| | Primary General Other (specify) ▼ | | 270.00 | P/R Deduction (\$30.00 Monthly) | | | | | | |
| _ | Full Name of Individual (Last, First, Middle Initi | al) or Full Orga | anization Name | | | | | | | |
| C. | Sullivan, T.J., , , | | | Date of Receipt | | | | | | |
| | Mailing Address 235 Front St SE Suite 100 | | | 09 30 2021 | | | | | | |
| | City | State | Zip Code | Transaction ID : PR437310526517 | | | | | | |
| | Salem | OR | 97301-3303 | Amount of Each Receipt this Period | | | | | | |
| | FEC ID number of contributing federal political committee. | | 30.00 | | | | | | | |
| | Name of Employer (for Individual) | Occupa | ation (for Individual) | Memo Item | | | | | | |
| | Huggins Insurance Services, Inc. | Broker | | | | | | | | |
| | Receipt For: | | | | | | | | | |
| | Other (specify) General | P/R Deduction (\$30.00 Monthly) | | | | | | | | |
| s | UBTOTAL of Receipts This Page (optional) | | > | 185.00 | | | | | | |
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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bell, Marie, D., FLMI, AIAA, Date of Receipt Mailing Address PO Box 1853 2021 City Zip Code State Transaction ID: PR437323326517 MN 55345-0853 Minnetonka Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DeRuvter-Bell, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 830.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mihalyi-Stiffler, Patricia, , , Date of Receipt Mailing Address 155 N. Riverview Dr 2021 Suite 100 City State Zip Code Transaction ID : PR437326126517 CA Anaheim 92808-1225 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Options in Insurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 890.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Duvernay, Jack, , , Date of Receipt Mailing Address 714 Millikens Bend 30 2021 City State Zip Code Transaction ID: PR437344526517 Covington LA 70433-4581 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefitone **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) 225.00 Other (specify) 195.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bajkowski, Catherine, A.,, Date of Receipt Mailing Address 188 Industrial Drive, Suite 226 2021 City Zip Code State Transaction ID: PR437361126517 IL **Elmhurst** 60126-1610 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CB** Health Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Block, David, M.,, Date of Receipt Mailing Address P O Box 1809 2021 City State Zip Code Transaction ID : PR437364426517 NC Candler 28715-1809 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Specialties, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 345.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Thomas, Jeffery, C., CLU, RHU, RE, Date of Receipt Mailing Address 3072 Arborwood Blvd. 30 2021 City State Zip Code Transaction ID: PR437385426517 MI Spring Arbor 49283-9663 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Small Business Assocation of Michigan Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 384.00 Other (specify) 114.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 131 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jensen, Cerrina, , CHRS, CBC,, Date of Receipt Mailing Address 942 Rathbone Cir 2021 City Zip Code State Transaction ID: PR437391226517 CA Folsom 95630-8534 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Verus Insurance **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bogard, Andrea, J.,, Date of Receipt Mailing Address PO BOX 38 09 2021 City State Zip Code Transaction ID : PR437400026517 IN Jeffersonville 47131-0038 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A. Bogard Insurance Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Cramer, Valerie, Lynn, RHU, Date of Receipt Mailing Address 2701 Burgen Ct. NE 30 2021 City State Zip Code Transaction ID: PR437416426517 MI **Grand Rapids** 49525-3979 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HealthBridge Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) 925.00 Other (specify) 180.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 132 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gandy, Hollie, , , Date of Receipt Mailing Address 5801 W Interstate 40 Ste 101 2021 City State Zip Code Transaction ID: PR437425026517 TX Amarillo 79106-4633 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Safe Money Solutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clark, Robert, S., , Date of Receipt Mailing Address 7548 Preston Road 2021 City State Zip Code Transaction ID : PR437427226517 TX Frisco 75034-5683 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clark Insurance Associates, PLLC Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) Other (specify) 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mutter, Amy, D., , Date of Receipt Mailing Address 2670 Electric Road 30 2021 City State Zip Code Transaction ID: PR437454926517 VARoanoke 24018-3511 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Innovative Insurance Group, LLC **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$63.00 Monthly) 567.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Creasy, Marcus, , , Date of Receipt Mailing Address P. O. Box 220 2021 City Zip Code State Transaction ID: PR437474926517 AR Heber Springs 72543-0220 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Adams & Creasy Insurance Agency, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fiala, Colby, , , Date of Receipt Mailing Address 710 Fillmore St 2021 Ste 100 City State Zip Code Transaction ID : PR437475126517 ID Twin Falls 83301-4641 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magic Valley İnsurance Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Miller Kay, Dawn, M., Date of Receipt Mailing Address PO Box 847 30 2021 City Zip Code State Transaction ID: PR437488826517 OR McMinnville 97128-0847 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hagan Hamilton Insurance Solutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Monthly) 225.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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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 Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sterner, Heidi, J., PAHM, LPRT, Date of Receipt Mailing Address 3402 Cinnamon Creek Ave 30 2021 City Zip Code State Transaction ID: PR437516826517 NV North Las Vegas 89031-3520 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) A and H Insurance Insurance Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 361.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stedt, Margaret, Evelyn, C.S.A., LP, Date of Receipt Mailing Address 486 Calle Amigo 09 2021 City State Zip Code Transaction ID : PR437529926517 CA San Clemente 92673-3003 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stedt Insurance Services Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Monthly) Other (specify) 1025.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Swanson, Cynthia, , SGS, BAM, Date of Receipt Mailing Address 22240 Deval Ln 30 2021 City Zip Code State Transaction ID: PR437544926517 TX Frankston 75763-4037 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hibbs Hallmark & Company Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Monthly) 318.00 Other (specify) 154.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Giardina, Charles, J.,, Date of Receipt Mailing Address 5440 Mounes Street, Suite 112 2021 City Zip Code State Transaction ID: PR437562826517 LA **New Orleans** 70123-3296 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MassMutual **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 378.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mobley, Dennis, F.,, Date of Receipt Mailing Address 137 Executive Drive 2021 Suite D City State Zip Code Transaction ID : PR437587526517 MS Madison 39110-8456 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mobley Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Robinson, Judith, L., Date of Receipt Mailing Address P O Box 10071 30 2021 City Zip Code State Transaction ID: PR437594126517 TX Tyler 75711-0071 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Judith Robinson Insurance Services, LL **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) 177.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Starks, Eugene, , , Date of Receipt Mailing Address 1022 Highland Colony Parkway Suite 202 2021 City Zip Code State Transaction ID: PR437603126517 MS Ridgeland 39157-2086 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Administration Services, Ltd. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 890.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Williams, George, , , Date of Receipt Mailing Address 4109 Woodway Dr. 2021 City State Zip Code Transaction ID : PR437605726517 LA Monroe 71201-2218 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Financial Planning Resources Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rasch, Tim, C., , Date of Receipt Mailing Address 19445 Westling Drive 30 2021 City State Zip Code Transaction ID: PR437606226517 OR Oregon City 97045-6920 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consilium Benefit Advisors Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Monthly) 508.00 Other (specify) 127.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Siciliano, Dominic, , , Date of Receipt Mailing Address 500 Cascade Road SE Suite 106 2021 City Zip Code State Transaction ID: PR437669526517 MI **Grand Rapids** 49546-2166 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Benefit Profiles. Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Strouse, Marcie, , , Date of Receipt Mailing Address 9854 Colby Ave 2021 City State Zip Code Transaction ID : PR437683126517 IΑ Clive 50325-6422 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Capitol Benefits Group Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 765.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Atkinson, Lynn, HIA, MBA, SC, Date of Receipt Mailing Address 2336 Cantle Lane 30 2021 City State Zip Code Transaction ID: PR437687326517 VARoanoke 24018-6104 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 295.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 138 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Granado, Arthur, , , Date of Receipt Mailing Address 418 Peoples, #505 30 2021 City Zip Code State Transaction ID: PR437693226517 TX Corpus Christi 78401-2350 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Granado Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Melgoza, Renee, , , Date of Receipt Mailing Address 9114 Adams Avenue 2021 Ste 191 City State Zip Code Transaction ID : PR437701126517 CA **Huntington Beach** 92646-3405 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Melgoza Insurance Solutions Agent Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 540.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Webb, Yolanda, Marie, CHRS, Date of Receipt Mailing Address 6117 Clover Ct. 30 2021 City State Zip Code Transaction ID: PR437705626517 CA Chino 91710-5337 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Webb Insurance Solutions **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 790.00 Other (specify) 230.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kirsch, Cara, , , Date of Receipt Mailing Address 10050 Regency Circle Ste 300 30 2021 City State Zip Code Transaction ID: PR437731126517 NE Omaha 68114-3721 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Vice President Gallagher Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Berry, Ernest, , , Date of Receipt Mailing Address 5121 69th St., A9A 2021 City State Zip Code Transaction ID : PR437737426517 TX Lubbock 79424-1631 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Berry Agency Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Conto, Teresa, , , Date of Receipt Mailing Address 702 King Farm Blvd 30 2021 Ste 210 City State Zip Code Transaction ID: PR437740826517 MD Rockville 20850-6563 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gallagher Benefit Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 140 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Williams, Leslie, A., CHRS, Date of Receipt Mailing Address 2295 Hilltop Drive Suite 5 2021 City State Zip Code Transaction ID: PR437742926517 CA Redding 96002-0515 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leslie A. Williams Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$42.00 Monthly) 478.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Edwards, Susan, Christensen, Date of Receipt Mailing Address 40 S. Roop St 2021 PO Box 1478 City State Zip Code Transaction ID : PR437755526517 CA Susanville 96130-4336 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) E. Christensen Insurance Agency, Inc. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Monthly) Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Johnson, John, P., , Date of Receipt Mailing Address 8414 N. Wall Street 30 2021 Ste C City State Zip Code Transaction ID: PR437775826517 WA Spokane 99208-6161 Amount of Each Receipt this Period FEC ID number of contributing C 63.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **IFS** Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$63.00 Monthly) 567.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cade, Kareim, R.,, Date of Receipt Mailing Address 512 N Main St Suite 105 2021 City Zip Code State Transaction ID: PR437778626517 MI Royal Oak 48067-1815 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Great Lakes Benefit Group **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Heider, Ryan, , , Date of Receipt Mailing Address 710 Fillmore St, Suite 100 2021 City State Zip Code Transaction ID : PR437792226517 ID Twin Falls 83301-4641 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Magic Valley Ins. Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schell, Gregory, J., Date of Receipt Mailing Address 545 South Third Street 30 2021 Suite 300 City State Zip Code Transaction ID: PR437797626517 KY Louisville 40202-1936 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sterling Thompson Company Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 142 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Purcilly, Amy, , , Date of Receipt Mailing Address 3155 W Big Beaver Rd Ste 125 2021 State City Zip Code Transaction ID: PR437814926517 MI Troy 48084-3007 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mason-McBride, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Daricek, Natalie, , , Date of Receipt Mailing Address 8220 N 23rd Ave. Bldg2 2021 City State Zip Code Transaction ID : PR437834926517 ΑZ Phoenix 85021-4872 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Account Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Little, Cathy, , , Date of Receipt Mailing Address 1145 2nd Street 30 2021 #A-269 City State Zip Code Transaction ID: PR437855626517 CA **Brentwood** 94513-2292 Amount of Each Receipt this Period FEC ID number of contributing C 38.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Essential Exchange Insurance Services **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.00 Monthly) 342.00 Other (specify) 98.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 143 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name James, Leslie, C., , Date of Receipt Mailing Address 6368 Pearl Rd 2021 City Zip Code State Transaction ID: PR437860026517 OH Cleveland 44130-3064 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Insurance Strategy, Inc. **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 295.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Emidy, Mike, , , Date of Receipt Mailing Address P O Box 2021 2021 City State Zip Code Transaction ID : PR437878326517 MS Ridgeland 39158-2021 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Colonial Life Broker Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) ▼ 270.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Lagarde, Jonathan, Davis, Date of Receipt Mailing Address 19 Pipes Loop 30 2021 City State Zip Code Transaction ID: PR438111126517 Covington LA 70435-9509 Amount of Each Receipt this Period FEC ID number of contributing C 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lagarde Insurance Group Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Monthly) 248.00 Other (specify) 72.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 144 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Atencio, Linda, K., LPRT, Date of Receipt Mailing Address PO Box 87021 30 2021 City Zip Code State Transaction ID: PR439256926517 ΑZ Phoenix 85080-7021 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Linda Atencio **Broker** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 295.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Lubenow, Justin, , , Date of Receipt Mailing Address 15 Alden Street 2021 Suite 8 City State Zip Code Transaction ID : PR470069126517 NJ Cranford 07016-2149 Amount of Each Receipt this Period FEC ID number of contributing 12.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lubenow Agency Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Monthly) Other (specify) ▼ 378.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Waltman, Jessica, , , Date of Receipt Mailing Address 10 Doyle Road 30 2021 City State Zip Code Transaction ID: PR470100126517 PΑ Wayne 19087-3903 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Forward Health Consulting Principal Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) 127.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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| \setminus | NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee | | | | | | | | |
| $ \rangle$ | Health Underwriters Political Action Committee | | | | | | | | |
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| _ | Full Name of Individual (Last, First, Middle Init | ial) or Full Ora | anization Name | | | | | | |
| В. | Stevens, Kenneth, W., , | | | Date of Receipt | | | | | |
| | Mailing Address 4916 Bellemeade Ave | M M / D D / Y Y Y Y | | | | | | | |
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| | City | State | Zip Code | Transaction ID : PR496323826517 | | | | | |
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| ٥. | Mailing Address 8340 N Thornydale Road | | | M M / D D / Y Y Y Y | | | | | |
| | Suite 110-335 | | | 09 30 2021 | | | | | |
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| | federal political committee. | | | | | | | | |
| | Name of Employer (for Individual) | Occup | ation (for Individual) | Memo Item | | | | | |
| | Bravo Insurance Solutions | | | | | | | | |
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 146 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wayt, Andrew, , , Date of Receipt Mailing Address 747 Winslow Ave 2021 City Zip Code State Transaction ID: PR528187226517 MN Saint Paul 55107-3349 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) IFC National Marketing **Producer Consultant** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ybarra, Valeria, , , Date of Receipt Mailing Address 7236 Vanessa Dr 2021 City State Zip Code Transaction ID : PR528424126517 Corpus Christi TX 78414-5710 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) Other (specify) 408.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Parker, Frederick, R., , Date of Receipt Mailing Address 12303 Hwy 707 30 2021 Suite B City State Zip Code Transaction ID: PR742659126517 SC Murrells Inlet 29576-9740 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CFO Hibbits Insurance Inc Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Monthly) 270.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 147 OF 158 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nichols, Thomas, L.,, Date of Receipt Mailing Address 3100 S Berry 30 2021 200A City Zip Code State Transaction ID: PR840269926517 OK Norman 73072-7479 Amount of Each Receipt this Period FEC ID number of contributing C 85.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Colonial Life District General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) 765.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mulcare, Robert, , , Date of Receipt Mailing Address 121 S 6th St 09 2021 City State Zip Code Transaction ID : PR860243826517 Klamath Falls OR 97601-6132 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Klamath Insurance Center, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$85.00 Monthly) Other (specify) 540.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Morgan, Christian, D., , Date of Receipt Mailing Address 2200 W Commercial Blvd 30 2021 Ste 306 City State Zip Code Transaction ID: PR891081426517 FL Fort Lauderdale 33309-3064 Amount of Each Receipt this Period FEC ID number of contributing C 170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO Morgan Fidelity Associates, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$170.00 Monthly) 1530.00 Other (specify) 340.00 SUBTOTAL of Receipts This Page (optional)..... 36379.17 TOTAL This Period (last page this line number only).....

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| ITEMIZED DISBURSEMENTS | | | | | (check only one) | | | | | | | | | | |
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| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | | |
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| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | FOR LINE | |
| ITEMIZED DISBURSEMENTS | for each category of the | (check only | one) 22 X 23 26 27 |
| | Detailed Summary Page | 28a | 28b 28c 29 30b |
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| NAME OF COMMITTEE (In Full) | | | |
| Health Underwriters Political Action | Committee | | |
| Full Name (Last, First, Middle Initial) | | | |
| A. Brian Fitzpatrick For Congress | | | Date of Disbursement |
| Mailing Address PO Box 939 | | | 09 14 2021 |
| City | state Zip Code | | CCO Identification Number |
| · | PA 19047 | | FEC Identification Number |
| Purpose of Disbursement | | | C C00607416 |
| Brian Fitzpatrick Concert Series Eagles | | 011 | Transaction ID: 16013478 |
| Candidate Name | | Category/ | Amount of Each Disbursement this Period |
| Fitzpatrick, Brian, , , Office Sought: House Disbursem | nent For: 2022 | Туре | 2000.00 |
| | Primary General | | 7 7 7 |
| | Other (specify) ▼ | | Brian Fitzpatrick Concert Serie Memo Item Eagles |
| State: PA District: 08 | ,, ,, | | Memo Item Lagies |
| Full Name (Last, First, Middle Initial) | | | |
| B. Pete Sessions For Congress | | | Date of Disbursement |
| | | | M M / D D / Y Y Y Y |
| Mailing Address 1512 LAKE AIR DR STE 117 | 1 | | 09 14 2021 |
| , | State Zip Code TX 76710 | | FEC Identification Number |
| Purpose of Disbursement | 70710 | | C C00303305 |
| · | | 011 | |
| Candidate Name | | Category/ | Transaction ID: 16013482 Amount of Each Disbursement this Period |
| Sessions, Pete, , Rep., | | Type | |
| Office Sought: House Disbursem | | | 1000.00 |
| <u> </u> | Primary General | | _ |
| State: TX District: 32 | Other (specify) | | Memo Item |
| Full Name (Last, First, Middle Initial) | | | |
| C. Texans for Ronny Jackson | | | Date of Disbursement |
| | | | M M / D D / Y Y Y Y |
| Mailing Address P.O. Box 53058 | | | 09 14 2021 |
| City | state Zip Code | | CC Identification Number |
| 7 milaime | TX 79159 | | FEC Identification Number |
| Purpose of Disbursement Congressman Ronny Jackson Basbeball Game | | | C C00730531 |
| Candidate Name | | 011 | Transaction ID: 16013484 |
| Jackson, Ronny, , , | | Category/ Type | Amount of Each Disbursement this Period |
| | nent For: 2022 | туре | 1000.00 |
| | Primary General | | Congressman Ronny Jacksor |
| | Other (specify) ▼ | | Memo Item Basbeball Game |
| State: TX District: 13 | | | L |
| CURTOTAL of Dishurananta This Dans (as " | | | 4000.00 |
| SUBTOTAL of Disbursements This Page (optional) | | ······ | 1000.00 |
| TOTAL This Period (last page this line number only). | | | |

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution for or commental purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Curtis For Congress Mailing Address 370 East South Temple, Suite 580 City Satt Late Colo, The Condition of Disbursement Breakfast Event w/ Special Guest Rep. Luetkemeyer Candidate Name Curtis, Johnn, Rep., Office Sought: I House Sanate President State: UT District: 03 Full Name (Last, First, Middle Initial) B. Dutch Ruppersberger For Congress Committee Mailing Address PO Box 231 City Satt Late, State Sanate President State: WD District: 03 Full Name (Last, First, Middle Initial) C. Citizens For Boyle Mailing Address PO Box 11545 City City State: MD District: 02 Mailing Address PO Box 11545 City City State: MD District: 02 Mailing Address PO Box 11545 City City State: MD District: 02 Mailing Address PO Box 11545 City City State: MD District: 02 State Senate President State: MD District: 02 Mailing Address PO Box 11545 City City State: MD District: 02 Mailing Address PO Box 11545 City City State: MD District: 02 Mailing Address PO Box 11545 City City State: PA District: 02 State Sanate President State: PA District: 02 State Sanate President State: PA District: 02 Mailing Address PO Box 11549 Districts 02 Mailing Address PO Box 11549 Districts 02 Mailing Address PO Box 11549 Districts 02 Mailing Address PO Box 11549 Date of Disbursement Mailing Address PO Box 11549 Date of D | SCHEDULE B (FI | • | for each | arate schedule(s) category of the Summary Page | FOR LINE (check on 21b 28a | 22 🗶 23 | PAGE 150 OF 158 26 27 29 30b | |
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| NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name (Last, First, Midde Initial) A. Curtis For Congress Mailing Address 370 East South Temple, Suite 580 City Saft Lake City Saft La | | | | | | | | |
| Health Underwriters Political Action Committee | | | ame and addr | ess of any politica | ai committee | .o solicit contribution | is from such committee. | |
| Mailing Address 370 East South Temple, Suite 580 City Salt Lake | | , , | on Comm | ittee | | | | |
| Mailing Address 370 East South Temple, Suite 580 City Sait Lake City Purpose of Disbursement Breakfast Event w Special Guest Rep. Luetkemeyer Candidate Name Curtis, John, Rep., Office Sought: Very South Cast President State: UT District: UT Category/ UT District: UT Category/ UT District: UT Coode Under UT District: UT Coode Under UT Distr | _ | , | | | | | | |
| Mailing Address 370 East South Temple, Suite 580 City Salt Lake | Curtis For Congr | ess | l | | | | | |
| Salt Lake City | Mailing Address 370 Eas | st South Temple, Suite 586 | 0 | | | _ | | |
| Breakfast Event w Special Guest Rep. Luetkemeyer Candidate Name Curtis, John, , Rep., Office Sought: | Salt Lake City | | | | | | on Number | |
| Candidate Name Curtis, John, Rep., Office Sought: x House Disbursement For: 2022 1000.00 Senate President Qther (specify) ▼ Disbursement For: 2022 1000.00 Breakfast Event w Spe Memo Item Rep. Luetkemeyer Memo Item Rep. Luetke | | | yer | | 011 | C C006473 | 339 | |
| Curtis, John, Rep., Office Sought: | Candidate Name | | - | | | | | |
| Senate President State: UT District: 03 Full Name (Last, First, Middle Initial) 3. Dutch Ruppersberger For Congress Committee Mailing Address PO Box 231 City State Zip Code Lutherville MD Z1094 Purpose of Disbursement 9/15 Zoom Event Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: W House Senate President State: MD District: 02 Full Name (Last, First, Middle Initial) City State Zip Code Lutherville MD Z1094 Purpose of Disbursement 9/15 Zoom Event Category/ Type Transaction ID:: 16013486 Amount of Each Disbursement this Per 1000.00 9/15 Zoom Event Memo Item Memo Item Date of Disbursement For: 2022 Full Name (Last, First, Middle Initial) Citizens For Boyle Mailing Address PO Box 11545 City State Zip Code PA 19116 Purpose of Disbursement Zoom Event 9/22 Candidate Name Purpose of Disbursement Zoom Event 9/22 Candidate Name Disbursement Zoom Event 9/22 Candidate Name Purpose of Disbursement Zoom Event 9/22 Candidate Name Purpose of Disbursement Zoom Event 9/22 Senate Purpose of Disbursement Zoom Event 9/22 Candidate Name Poresident President P | | ∍ p., | | | | Amount of Laci | 1 Dispursoment this Fellou | |
| State: UT District: 03 President District: 03 Dutch Ruppersberger For Congress Committee Mailing Address PO Box 231 Date of Disbursement Mailing Address PO Box 231 Date of Disbursement Mailing Address PO Box 231 FEC Identification Number Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: X House President State: MD District: 02 Full Name (Last, First, Middle Initial) City Fill Name (Last, First, Middle Initial) City Fill Name (Last, First, Middle Initial) City Mailing Address PO Box 11545 City Mailing Address PO Box 11545 City Philadelphia Purpose of Disbursement Zoom Event V 2021 State Zip Code PA 19116 Purpose of Disbursement Zoom Event V 2021 FEC Identification Number Category/ Type 1000.00 9/15 Zoom Event Memo Item FEC Identification Number Category/ Type 1000.00 101 Category/ 102 101 Category/ 102 101 Category/ 100 101 Category/ 102 Category/ 101 Category/ 102 Office Sought: | House Disburse | _ | | | | 1000.00 | |
| State: UT District: 03 Full Name (Last, First, Middle Initial) 3. Dutch Ruppersberger For Congress Committee Mailing Address PO Box 231 City Cuty Cuty Congress Committee Mailing Address PO Box 231 FEC Identification Number Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: X House President President Zome Event President | | _~ | | | | | Breakfast Event w/ Special G | |
| Full Name (Last, First, Middle Initial) 3. Dutch Ruppersberger For Congress Committee Mailing Address PO Box 231 City Lutherville Purpose of Disbursement 9/15 Zoom Event Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: X House District: 02 Full Name (Last, First, Middle Initial) Citizens For Boyle Mailing Address PO Box 11545 City City State Zip Code PA 19116 Purpose of Disbursement Zoom Event V Date of Disbursement District: 02 FEC Identification Number Category/ Type Date of Disbursement Date of Disbursement this Per 1000.00 9/15 Zoom Event V 9/15 Zoom Event V 9/15 Zoom Event V 1000.00 9/15 Zoom Event V 1011 Category/ Type Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Amount of Each Disbursement this Per Coops-43-363 Transaction ID : 16013490 Transaction I | | | Other (spec | сіту) ▼ | | Memo Item | Rep. Luetkemeyer | |
| Mailing Address PO Box 231 City | | | | | | | | |
| City Lutherville Purpose of Disbursement 9/15 Zoom Event Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: | | • | ss Comm | nittee | | Date of Disburs | sement | |
| City Lutherville Purpose of Disbursement 9/15 Zoom Event Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: X House President State: MD District: 02 Full Name (Last, First, Middle Initial) Citizens For Boyle Mailing Address PO Box 11545 City Philadelphia Purpose of Disbursement Purpose of Disbursement State: MD District: 02 Senate President State: MD District: 02 Full Name (Last, First, Middle Initial) Citizens For Boyle Mailing Address PO Box 11545 City Philadelphia Purpose of Disbursement Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: X House Senate Primary Other (specify) Date of Disbursement Category/ Type C C00576673 Transaction ID : 16013486 Amount of Each Disbursement Memo Item FEC Identification Number FEC Identification Number FEC Identification Number FEC Identification Number C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction Number C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C00543363 Transaction ID : 16013490 Amount of Each Disbursement this Per C C0 | | | | | | M = M / D | D / Y Y Y Y Y | |
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| Purpose of Disbursement 9/15 Zoom Event Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: | • | · | | | | FEC Identification Number | | |
| Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: | | ıt | C C00376673 | | | | | |
| Candidate Name Ruppersberger, C.A., Dutch, Rep., Office Sought: | 9/15 Zoom Event | | | | 011 | | | |
| Office Sought: | | | | | Category/ | | | |
| Senate President Other (specify) Full Name (Last, First, Middle Initial) Citizens For Boyle Mailing Address PO Box 11545 City Philadelphia PA 19116 Purpose of Disbursement Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: X House President President State: PA District: 02 Primary General Other (specify) Memo Item Date of Disbursement Zip Code PA 19116 FEC Identification Number Category/ Type Category/ Type Category/ Type Category/ Type Compared President President Compared President President President President President Other (specify) Memo Item | 000 | | | | Type | | 4000.00 | |
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| Citizens For Boyle Mailing Address PO Box 11545 City Philadelphia Purpose of Disbursement Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: House Senate President State: PA District: 02 Date of Disbursement Disburs | State: MD Distric | xt: 02 | | , ,, | | Memo Item | I | |
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| Mailing Address PO Box 11545 City Philadelphia Purpose of Disbursement Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: Value President Presiden | Citizens For Boy | le | | | | | | |
| Philadelphia Purpose of Disbursement Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: Very House Primary Primary President State: PA District: 02 PA 19116 C C C00543363 Transaction ID: 16013490 Amount of Each Disbursement this Per Zoom Event 9/22 Memo Item | Mailing Address PO Box | 11545 | | | | | | |
| Philadelphia Purpose of Disbursement Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: Very House President President State: PA District: 02 PA 19116 C C C00543363 Transaction ID: 16013490 Amount of Each Disbursement this Per Type Category/ Type Category/ Type Category/ Type Comparison of Each Disbursement this Per Comparison | City | | 1 | Zip Code | | FEC Identification | on Number | |
| Zoom Event 9/22 Candidate Name Boyle, Brendan, , Rep., Office Sought: President State: PA District: 02 Disbursement For: 2022 Primary Other (specify) Other (specify) Transaction ID: 16013490 Amount of Each Disbursement this Per Toom Event 9/22 Memo Item | • | * | PA | 19116 | | | | |
| Candidate Name Boyle, Brendan, , Rep., Office Sought: | 700m Fuent 0/22 | | | | | | | |
| Boyle, Brendan, , Rep., Office Sought: Senate President President President Other (specify) ■ State: PA District: 02 Disbursement For: 2022 I000.00 Zoom Event 9/22 Memo Item | Candidate Name | | | | | | | |
| Office Sought: Senate President State: PA District: 02 Disbursement For: 2022 Primary Other (specify) ▼ Disbursement For: 2022 Zoom Event 9/22 Memo Item | Category/ | | | | | Amount of Each | 1 Dispuisement tills Fellou | |
| State: PA District: 02 Other (specify) ▼ Memo Item | 000 0 11 | Office Sought: House Disbursement For: 2022 | | | | | 1000.00 | |
| State: PA District: 02 | | | - | | | | Zoom Event 9/22 | |
| 2000.00 | | | Other (spec | City) ▼ | | Memo Item | ı | |
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| NAME OF COMMITTEE (In Full) Health Underwriters Political Action | | | CONTRACTOR TO THE CONTRACTOR CONTRACTOR | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| A. Jeffries For Congress | | | Date of Disbursement | | | |
| Mailing Address 910 17th St NW Suite 925 | | | 09 14 2021 | | | |
| | State Zip Code | | FEC Identification Number | | | |
| Washington | DC 20006 | | FEC Identification Number | | | |
| Purpose of Disbursement | | 011 | C C00503052 Transaction ID: 16013492 | | | |
| Candidate Name | | Category/ | Amount of Each Disbursement this Period | | | |
| Office Sought: House Disbursen | Jeffries, Hakeem, , Rep., Office Sought: House Disbursement For: 2022 | | | | | |
| President | Primary General Other (specify) ▼ | | Memo Item | | | |
| State: NY District: 08 | | | | | | |
| Full Name (Last, First, Middle Initial) 3. Julia Brownley For Congress | | Date of Disbursement | | | | |
| Mailing Address PO Box 2018 | | 09 14 2021 | | | | |
| Thousand Oaks | | | | | | |
| Purpose of Disbursement 9/21 Zoom Event | Purpose of Disbursement 9/21 Zoom Event 011 | | | | | |
| Candidate Name | Candidate Name | | | | | |
| Brownley, Julia, , Rep., Office Sought: House Disbursen | nent For: 2022 | Туре | 1000.00 | | | |
| | Primary General | | 9/21 Zoom Event | | | |
| | Other (specify) | | Memo Item | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Diaburgarant | | | |
| Maria Elvira Salazar For Congress | | | Date of Disbursement | | | |
| Mailing Address P.O. Box 558033 | | | 09 24 2021 | | | |
| City | State Zip Code | | FEC Identification Number | | | |
| Miami | FL 33255 | | C C00671859 | | | |
| | Purpose of Disbursement Wednesday September 22nd with a dinner at Ristorante Tosca | | | | | |
| Candidate Name | 011 | Transaction ID : 16018947 | | | | |
| Salazar, Maria, , , | Category/ Type | Amount of Each Disbursement this Period | | | | |
| | nent For: 2022 | .,,,,, | 1000.00 | | | |
| Senate x | Primary General Other (specify) ▼ | | Wednesday September 22nd dinner at Ristorante Tosca | | | |
| State: FL District: 27 | | | L | | | |
| SUBTOTAL of Disbursements This Page (optional) | | ······• | 4500.00 | | | |
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| ITEMIZED DISBURSEMENTS | | | rate schedule(s) category of the | (check only | y one) | | | | |
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| / | ricalli Oriuci Willers Pullical Action | COMMIN | llee | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | |
| Α. | Liz Cheney For Wyoming | | | | Date of | Disburse | ement | | |
| | - | | M M | / D | | | | | |
| | Mailing Address P. O. BOX 3167 | | | | 09 | 2 | 2021 | | |
| | City | State | Zip Code | | | n makini | a Niverbarr | | |
| | Cheyenne | WY | 82003 | | ⊢EC ld | entification | n Number | | |
| | Purpose of Disbursement | | | | С | C006075 | 56 | | |
| | Condidate Name | | | 011 | | nsaction | ID : 16018966 | | |
| | Change Elizabeth Mrs | | | Category/ | | | Disbursement this Period | | |
| | Cheney, Elizabeth, , Mrs, Office Sought: House Disbursen | nent For: 20 | 122 | Туре | | | 2500.00 | | |
| | | Primary | 022 General | | | 7 | | | |
| | | Other (speci | | | | mo Ita | | | |
| _ | State: WY District: 00 | | | | Me | mo Item | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | |
| В. | Kurt Schrader For Congress | | | | Date of | Disburse | ement | | |
| | Matter Add | | | | M = M | / D | | | |
| | Mailing Address PO Box 3314 | | | | 09 | 2 | 24 2021 | | |
| | - | State | Zip Code | | FFC 1d | entification | n Number | | |
| | | OR | 97045 | | | | | | |
| | Purpose of Disbursement 011 | | | | | C0044690 | 06 | | |
| | Candidate Name | | | | | | ID: 16018967 | | |
| | Schrader, Kurt, , Rep., | | | Category/ Type | Amoun | ∪ı ⊨ach | Disbursement this Period | | |
| | | nent For: 20 | 022 | -1 | | . T | 2500.00 | | |
| | Senate | Primary | General | | | -7 | 7 4 | | |
| | | Other (speci | ify) | | Me | mo Item | | | |
| _ | State: OR District: 05 | | | | <u> </u> | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | Det- | Dick | ımont | | |
| U. | Strickland For Washington | | | | | Disburse | | | |
| | Mailing Address 1625 E 72nd St | | | | 09 | 2 | | | |
| | Ste 700-139 | | | | | | | | |
| | | State | Zip Code | _ | FEC Ide | entification | n Number | | |
| | | WA | 98404 | | | | | | |
| | Purpose of Disbursement | | | 011 | | C0073282 | | | |
| | Candidate Name | | | | | | ID: 16018968 | | |
| | Strickland, Marilyn, , , | | | Category/ Type | Amoun | o ⊏acn | Disbursement this Period | | |
| | Office Sought: House Disbursen | 71 · | | - · · | 1000.00 | | | | |
| | | Primary | General | | | 7 | 7 4 | | |
| | President | Other (speci | ify) 🔻 | | Me | mo Item | | | |
| _ | State: WA District: 10 | | | | | | | | |
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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 Underwriters Political Action Committee Full Name (Last, First, Middle Initial) A. Lisa Blunt Rochester For Congress Mailing Address PO Box 9767 City Wilmington Purpose of Disbursement Candidate Name Blunt Rochester, Lisa, , Office Sought: X House Senate President State: DE District: 00 Full Name (Last, First, Middle Initial) For each category of the Detailed Summary Page 21b 22 X 23 26 27 22c 29 30b 22c 27 22c 29 30b 22c 29 30b 22c 27 22c 29 30b 22c 27 22c 24 20c 20c 22d 29 30b 22c 27 22c 24 20c 20c 22d 29 30b 22c 27 22d 29 30b 22c 27 22c 24 20c 20c 22d 20c 2 | SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS | Use separate schedule(s) | FOR LINE NUMBER: PAGE 153 OF 15 (check only one) | | | | |
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| And Continential purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) Lisa Blunt Rochester For Congress Mailing Address PO Box 9767 City Wilmington De 19809 Purpose of Disbursement Candidate Name Blunt Rochester, Lisa, , Office Sought: X House President State: DE District: 00 City Bagan Angie Craig For Congress Mailing Address PO Box 22116 City Bagan Craig, Angela, , Office Sought: X House President State: MN District: 02 Full Name (Last, First, Middle Initial) Joe Morelle For Congress Mailing Address P.O. Box 90914 City Rochester Candidate Name Craig, Angela, , City State: MN District: 02 Full Name (Last, First, Middle Initial) Joe Morelle For Congress Mailing Address P.O. Box 90914 City Rochester Furpose of Disbursement Candidate Name Craig, Angela, , City Rochester Furpose of Disbursement City Rochester Furpose of Disbursement Candidate Name Craig, Angela, , City Rochester Furpose of Disbursement City Rochester Furpose of Disbursement City Rochester Furpose of Disbursement Category' Type Office Sought: X House Rochester NY Lideou President State: NY District: 25 Disbursement For: 2022 X Primary General President Category' Type Total Category Type | | | 21b 28a | 22 X 23 26 27 28c 29 30b | | | |
| NAME OF COMMITTEE (In Full) Health Underwriters Political Action Committee Full Name (Last, First, Middle Initial) Lisa Blunt Rochester For Congress Mailing Address PO Box 9767 City Wilmington Purpose of Disbursement Candidate Name President State: DE District: 00 Full Name (Last, First, Middle Initial) 3. Angie Craig For Congress Mailing Address PO Box 22116 City Eagan Purpose of Disbursement Candidate Name Cardidate Name Cardidate Name Craig, Angela, , Office Sought: X House President State: MN District: 02 Full Name (Last, First, Middle Initial) Senate President State: MN District: 02 Full Name (Last, First, Middle Initial) Sonate President State: MN District: 02 Craig, Angela, , Office Sought: X House President State: MN District: 02 Full Name (Last, First, Middle Initial) Date of Disbursement Category/ Type Transaction ID: 16018972 Aromat of Each Disbursement For: 2022 Transaction ID: 16018972 Transaction ID: 16018972 Transaction ID: 16018973 Aromat of Each Disbursement Category/ Type Date of Disbursement Category/ Type Transaction ID: 16018973 Aromat of Each Disbursement City Rochester Purpose of Disbursement Category/ Type Date of Disbursement Category/ Type Transaction ID: 16018973 Aromat of Each Disbursement CC C00675108 Transaction ID: 16018973 Aromat of Each Disbursement CC C00675108 Transaction ID: 16018973 Aromat of Each Disbursement this Period Category/ Type | | | | | | | |
| A Lisa Blunt Rochester For Congress Mailing Address PO Box 9767 City | NAME OF COMMITTEE (In Full) | ,, | | The second secon | | | |
| Mailing Address PO Box 9767 City | _ | | | | | | |
| Mailing Address PO Box 9767 City Wilmington President State: DE Districts 00 Full Name (Last, First, Middle Initial) Angie Craig Angela,, Office Sought: X House Craig, Angela, Office Sought: X House Senate President State: MN District: 02 Full Name (Last, First, Middle Initial) And Category/ 1ype Transaction ID: 16018972 Amount of Each Disbursement C C00575209 Transaction ID: 16018972 Amount of Each Disbursement this Period City Senate President State: MN District: 02 Full Name (Last, First, Middle Initial) Joe Morelle For Congress Mailing Address P.O. Box 90914 City City City City City City City Cit | Lisa Blunt Rochester For Congress | | | | | | |
| Wilmington Purpose of Disbursement Candidate Name Blunt Rochester, Lisa, , , Office Sought: | Mailing Address PO Box 9767 | | | | | | |
| Blunt Rochester, Lisa, , Office Sought: | Wilmington | | | | | | |
| Blunt Rochester, Lisa, , , , Office Sought: | • | | | Transaction ID : 16018969 | | | |
| Office Sought: | | | | Amount of Each Disbursement this Period | | | |
| State: DE District: 00 Full Name (Last, First, Middle Initial) 3. Angie Craig For Congress Mailing Address PO Box 22116 City Eagan Purpose of Disbursement Craig, Angela, , , Office Sought: | Office Sought: X House Disbursem Senate X F | Primary General | | | | | |
| Mailing Address PO Box 22116 City Eagan Purpose of Disbursement Candidate Name Craig, Angela, , Office Sought: | | - in (op only) • | | Memo Item | | | |
| City Eagan MN Zip Code S5122 FEC Identification Number Cooperation Co | Full Name (Last, First, Middle Initial) B. Angie Craig For Congress | | | | | | |
| Eagan Purpose of Disbursement Candidate Name Craig, Angela, , Office Sought: | Mailing Address PO Box 22116 | | | | | | |
| Purpose of Disbursement Candidate Name Craig, Angela, , , Office Sought: | · | ' | | FEC Identification Number | | | |
| Candidate Name Craig, Angela, , , Office Sought: | =393.1 | 2393.1 | | | | | |
| Craig, Angela, , , Office Sought: | Candidate Name | Candidata Nama | | | | | |
| Senate President Other (specify) Full Name (Last, First, Middle Initial) Joe Morelle For Congress Mailing Address P.O. Box 90914 City Rochester Purpose of Disbursement Candidate Name Morelle, Joseph, , Office Sought: X House President President State: NY District: 25 Memo Item Memo Item Date of Disbursement Tell (Acceptable) FEC Identification Number C C00675108 Transaction ID: 16018973 Amount of Each Disbursement this Period Disbursement For: 2022 Primary General Other (specify) Memo Item | | | | | | | |
| State: MN District: 02 Full Name (Last, First, Middle Initial) Joe Morelle For Congress Mailing Address P.O. Box 90914 City Rochester Purpose of Disbursement Candidate Name Morelle, Joseph, , , Office Sought: Y House Senate President State: NY District: 25 Other (specify) Memo Item Memo Item Date of Disbursement TEC Identification Number C C00675108 Transaction ID: 16018973 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Memo Item | | | | 2000.00 | | | |
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| Mailing Address P.O. Box 90914 City Rochester Purpose of Disbursement Candidate Name Morelle, Joseph, , Office Sought: Very Normal President State: NY District: 25 State Zip Code NY 14609 CC00675108 Transaction ID: 16018973 Amount of Each Disbursement this Period Todo 00 Memo Item | _ | | | | | | |
| Rochester Purpose of Disbursement Candidate Name Morelle, Joseph, , Office Sought: Very House President State: NY District: 25 NY 14609 C C00675108 Transaction ID: 16018973 Amount of Each Disbursement this Period C C00675108 Transaction ID: 16018973 Amount of Each Disbursement this Period Memo Item | Mailing Address P.O. Box 90914 | | | | | | |
| Candidate Name Morelle, Joseph, , , Office Sought: | Rochester | | | | | | |
| Morelle, Joseph, , , Office Sought: | | | Transaction ID : 16018973 | | | | |
| Senate President State: NY District: 25 Primary General Other (specify) ▼ Memo Item | Morelle, Joseph, , , | (:ategory/ | | | | | |
| State: NY District: 25 | Office Sought: X House Disbursem Senate X F | Primary General | | | | | |
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| SCHEDULE B (FEC Form 3X) | Use separa | ate schedule(s) | FOR LINE N | FOR LINE NUMBER: PAGE 154 OF | | | | |
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| ITEMIZED DISBURSEMENTS | for each ca | ategory of the ummary Page | 21b 28a | | 23 26 27 28c 29 30b | | | |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | nents may no le and addres | ot be sold or used ss of any politica | d by any perso I committee to | n for the p solicit cont | urpose of soliciting contributions ributions from such committee. | | | |
| NAME OF COMMITTEE (In Full) | | | | | | | | |
| Health Underwriters Political Action | Commit | tee | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Doto of | Diahuraamant | | | |
| A. Susie Lee For Congress Mailing Address 5130 S Fort Apache Rd | | | | M M M O9 | Disbursement | | | |
| Ste. 215-382 | | | | 00 | 24 2021 | | | |
| , | State : | Zip Code | | FEC Ide | ntification Number | | | |
| Las Vegas Purpose of Disbursement | INV | 89148 | | | | | | |
| • | | | 011 | | 000655613 Saction ID : 16018974 | | | |
| Candidate Name Lee, Susie, , , | | | Category/ | Amount | of Each Disbursement this Period | | | |
| Office Sought: House Disbursem | nent For: 20 | | Type | | 1000.00 | | | |
| President | Primary Other (specif | General fy) ▼ | | Mem | no Item | | | |
| State: NV District: 03 | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. Menendez For Senate | | | | Date of | Disbursement | | | |
| Mailing Address PO Box 32248 | | | | 09 | 24 2021 | | | |
| , | State | Zip Code 07102 | | FEC Ide | ntification Number | | | |
| Purpose of Disbursement | | | 011 | | :00264564 saction ID : 16018975 | | | |
| Candidate Name | | | Category/ | | of Each Disbursement this Period | | | |
| Menendez, Robert, , Sen., | | | Туре | | 1000.00 | | | |
| x Senate | nent For: 20 Primary Other (specif | General | | | 1000.00 | | | |
| State: NJ District: | Other (specin | у) | | Men | no Item | | | |
| Full Name (Last, First, Middle Initial) C. Texans For Henry Cuellar Congres | eional C | ampaign | | Date of | Disbursement | | | |
| | | ampaign | | M M | / D D / Y Y Y Y | | | |
| Mailing Address 1519 Washington Street Suite 200 | | | | 09 | 24 2021 | | | |
| , | State TX | Zip Code 78040 | | FEC Ide | ntification Number | | | |
| Purpose of Disbursement | | | 011 | C | 000371302 | | | |
| Candidate Name | | | | | nsaction ID : 16018976 of Each Disbursement this Period | | | |
| Cuellar, Henry, , Rep., Office Sought: March Ma | nent For: 20 | 22 | Туре | | 1000.00 | | | |
| President | Primary Other (specif | General fy) ▼ | | Men | no Item | | | |
| State: TX District: 28 | | | | | | | | |
| Senate President | Primary Other (specif | General fy) ▼ | | Men | 4-1-4-1-4 | | | |

| SCHEDULE B (FEC Form 3X) | | FOR LINE N | NUMBER: PAGE 155 OF 158 |
|--|---|-------------------|---|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | |
| | Detailed Summary Page | 21b | 22 🗶 23 26 27 |
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| NAME OF COMMITTEE (In Full) | | | |
| Health Underwriters Political Action | Committee | | |
| Full Name (Last, First, Middle Initial) | | | |
| A. Ami Bera For Congress | | | Date of Disbursement |
| Mailing Address PO Box 582496 | | | 09 29 2021 |
| , | State Zip Code | | FEC Identification Number |
| 2 0.010 | CA 95758 | | |
| Purpose of Disbursement | | 011 | C C00461061 |
| Candidate Name | | | Transaction ID: 16020107 |
| Bera, Ami, , Rep., MD | | Category/ Type | Amount of Each Disbursement this Period |
| | nent For: 2022 | 1,700 | 1500.00 |
| Senate x | Primary General | | |
| State: CA District: 07 | Other (specify) ▼ | | Memo Item |
| Full Name (Last, First, Middle Initial) | | | |
| B. Delbene For Congress | | | Date of Disbursement |
| Mailing Address PO Box 477 | | | 09 29 2021 |
| City | State Zip Code | | FEC Identification Number |
| 1 1111111111111111111111111111111111111 | WA 98083 | | |
| Purpose of Disbursement | | 011 | C C00459099 |
| Candidate Name | | 011 | Transaction ID: 16020110 |
| DelBene, Suzan, , Rep., | | Category/ Type | Amount of Each Disbursement this Period |
| | nent For: 2022 | Туре | 3000.00 |
| | Primary General | | |
| | Other (specify) | | Memo Item |
| State: WA District: 01 | | | Intellio Itelli |
| Full Name (Last, First, Middle Initial) | | | |
| C. Katko For Congress | | | Date of Disbursement |
| Mailing Address 228 S Washington St | | | 09 29 2021 |
| Ste 115 | | | |
| , | State Zip Code | | FEC Identification Number |
| Alexandria Purpose of Disbursement | VA 22314 | | 0 0000000 |
| r dipose or bisbursement | | 011 | C C00556365 |
| Candidate Name | | | Transaction ID: 16020114 Amount of Each Disbursement this Period |
| Katko, John, , Rep., | | Category/ Type | Amount of Each Dispulsement this Fellou |
| | nent For: 2022 | | 3000.00 |
| Senate x | Primary General | | |
| | Other (specify) ▼ | | Memo Item |
| State: NY District: 24 | | | |
| SUBTOTAL of Disbursements This Page (optional) | | ······ | 7500.00 |
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| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | | NUMBER: PAGE 156 OF 158 | | | | |
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| NAME OF COMMITTEE (In Full) Health Underwriters Political Action | • | | 7 CONTROL CONTRIBUTION COOK CONTRIBUTION | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| A. Tom Rice For Congress | | | Date of Disbursement | | | | |
| Mailing Address PO Box 70098 | | | 09 29 2021 | | | | |
| , | State Zip Code | | FEC Identification Number | | | | |
| Myrtle Beach | SC 29572 | | | | | | |
| Purpose of Disbursement | | 011 | C C00506048 | | | | |
| Candidate Name | | Category/ | Transaction ID : 16020115 Amount of Each Disbursement this Period | | | | |
| Rice, Tom, , Rep., | | Type | Amount of Each Disbursement this Feriod | | | | |
| Office Sought: House Disburser | ment For: 2022 | | 1000.00 | | | | |
| Senate X President | Primary General Other (specify) ▼ | | Memo Item | | | | |
| State: SC District: 07 | | | | | | | |
| Full Name (Last, First, Middle Initial) 3. Kevin Mccarthy For Congress | | | Date of Disbursement | | | | |
| Mailing Address PO Box 12667 | Mailing Address PO Box 12667 | | | | | | |
| City Bakersfield | State Zip Code CA 93389 | | FEC Identification Number | | | | |
| Purpose of Disbursement Take Back The House Lunch in LA | C C00420935 | | | | | | |
| Candidate Name | | 011 | Transaction ID : 16020116 | | | | |
| McCarthy, Kevin, , Rep., | | Category/ Type | Amount of Each Disbursement this Period | | | | |
| | ment For: 2022 | 71 | 1500.00 | | | | |
| Senate | Primary General | | Take Back The House Lunch in | | | | |
| President State: CA District: 23 | Other (specify) | | Memo Item | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| Guy For Congress | | | Date of Disbursement | | | | |
| Mailing Address P.O. Box 23177 | | | 09 29 2021 | | | | |
| City | State Zip Code | | FEC Identification Number | | | | |
| Pittsburgh | PA 15222 | | 1 20 Identification (variable) | | | | |
| Purpose of Disbursement | | 244 | C C00657833 | | | | |
| Candidate Name | 011 | Transaction ID: 16020119 | | | | | |
| Reschenthaler, Guy, , , | | Category/ Type | Amount of Each Disbursement this Period | | | | |
| | ment For: 2022 | туре | 1000.00 | | | | |
| Senate Season | Primary General | | 4- 4- 4- | | | | |
| President | Other (specify) ▼ | Memo Item | | | | | |
| State: PA District: 14 | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | ·····• | 3500.00 | | | | |
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| SCHEDULE B (FEC Form 3X) | Liee congrete cohedui | | FOR LINE NUMBER: PAGE 157 OF 19 | | | | |
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| TEMIZED DISBURSEMENTS | Use separate schedul for each category of t Detailed Summary Pa | the Collection | 22 🗶 23 🔲 26 🔲 27 | | | | |
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| NAME OF COMMITTEE (In Full) | io and address of ally p | Jonatour Committee | to constructions from such committee. | | | | |
| Health Underwriters Political Action | Committee | | | | | | |
| Full Name (Lock Firek Middle Initial) | | | | | | | |
| - Friends Of Dave Joyce | Full Name (Last, First, Middle Initial) Friends Of Dave Joyce | | | | | | |
| Mailing Address 9856 Archer Ln | | | 09 29 2021 | | | | |
| City | State Zip Code | | | | | | |
| | OH 43017 | | FEC Identification Number | | | | |
| Purpose of Disbursement | | | C C00527457 | | | | |
| | | 011 | | | | | |
| Candidate Name | | Category/ | Transaction ID : 16020120 Amount of Each Disbursement this Period | | | | |
| Joyce, Dave, , Rep., | | Type | , another the Lacit bisbuisement this reliou | | | | |
| | nent For: 2022 | 76.5 | 1000.00 | | | | |
| Senate x | | | | | | | |
| President State: OH District: 14 | Other (specify) ▼ | | Memo Item | | | | |
| | | | _ | | | | |
| Full Name (Last, First, Middle Initial) 3. | | | Date of Disbursement | | | | |
| • | | | | | | | |
| Mailing Address | | | M = M / D = D / Y = Y = Y | | | | |
| Cit. | | | | | | | |
| City | State Zip Code | | FEC Identification Number | | | | |
| Purpose of Disbursement | l l | | С | | | | |
| Candidate Name | Candidata Name | | | | | | |
| | Candidate Indiffe | | | | | | |
| Office Sought: House Disbursen | nent For: | Type | 11 | | | | |
| Senate | Primary Gener | ral | | | | | |
| | Other (specify) | | Memo Item | | | | |
| State: District: | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Disbursement | | | | |
| | | | M M / D D / Y Y Y | | | | |
| Mailing Address | | | | | | | |
| City | State Zip Code | | FEC Identification Number | | | | |
| Purpose of Disbursement | | | | | | | |
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| Candidate Name | | | Amount of Each District and this D | | | | |
| | Category/ Type | Amount of Each Disbursement this Period | | | | | |
| Office Sought: House Disbursen | | | | | | | |
| Senate | ral | | | | | | |
| President | Other (specify) ▼ | | Memo Item | | | | |
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| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE | | F | PAGE 158 OF 158 | | |
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| TEMIZED DISBURSEMENTS | | | (check only 21b | one) | 23 26 | 26 27 | | |
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| NAME OF COMMITTEE (In Full) Health Underwriters Political Action | | | | | | | | |
| Full Name (Last, First, Middle Initial) Scidmore, Connie, , , | | | | | Date of Disbursement | | | |
| Mailing Address 700 Main St Suite 100 | | | | 09 | 28 | 2021 | _ | |
| Alamosa | State Zip Code CO 81101-2527 | | | FEC Identification Number | | | | |
| Purpose of Disbursement Requested Refund of Donation Candidate Name October | | | | Transaction ID : 16020103 Amount of Each Disbursement this Period | | | | |
| Office Sought: House Disbursement For: | | | | 150.00 | | | | |
| Senate President State: District: | President Other (specify) ▼ | | | | Requested Refund of Donatio Memo Item | | | |
| Full Name (Last, First, Middle Initial) 3. Adam, Ashely, N., CEBS, GBA,, | | | | | Date of Disbursement | | | |
| Mailing Address 2717 N 118th Street Suite 300 | | | | 09 | 28 | 2021 | | |
| City State Zip Code Omaha NE 68164-9684 | | | | FEC Ident | FEC Identification Number | | | |
| Purpose of Disbursement Requested Refund 010 | | | | Transaction ID: 16020104 Amount of Each Disbursement this Period 30.00 Requested Refund Memo Item | | | | |
| Candidate Name Category/ Type | | | | | | | | |
| Office Sought: House Senate Primary Other (specify) State: Disbursement For: Other (specify) | | | | | | | | |
| Full Name (Last, First, Middle Initial) - Muniz, Jose, , , | | | | Date of D | isbursement | | | |
| Mailing Address 2801 SW 149th Ave #100 | | | | 09 / 09 / 2021 | | | | |
| City | State | Zip Code | | FEC Ident | tification Numb |)er | | |
| Purpose of Disbursement Refund of Contribution 010 | | | | Transaction ID : 16025961 | | | | |
| Candidate Name | | | Category/ Type | Amount of | Each Disburs | sement this Per | riod | |
| Office Sought: House Senate President Disbursement For: Primary Other (specify) ▼ State: | | | | Refund of Contribution Memo Item | | | | |
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