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PAUL GOUGH  
OF COUNSEL

June 9, 2004

Public Records Office  
Federal Election Commission  
999 E Street, NW  
Washington, D.C. 20463

Dear Filing Officer:

Please find enclosed for filing the original and one copy of:

Form 1\_\_

Form 2\_\_

Form 3\_\_

Form 3X\_X

RECEIVED  
FEDERAL  
OPERATIONS CENTER  
JUN 14 A 9:43

for Health Net, Inc. Political Action Committee for the period 05/01/04 - 05/31/04.

Please return an endorsed filed copy in the enclosed self addressed envelope for our records.

Very truly yours,

*Thomas W. Hiltachk*

Thomas W. Hiltachk  
Assistant Treasurer

RECEIVED  
FEC MAIL  
OPERATIONS CENTER  
JUN 14 A 9 43  
Office Use Only

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

1. NAME OF COMMITTEE (or Bill) TYPE OR PRINT Example: If typing, type over five lines. 12F84MS

Health Net, Incorporated Political Action Committee

ADDRESS (number and street) 21650 Canyon Street, 25th Floor

Check if different than previously reported. (ACC)

Woodland Hills CA 91367

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00230789

3. IS THIS REPORT NEW OR AMENDED  
 NEW (N)  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11)
	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12)
	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
April 15 Quarterly Report (Q1)	July 15 Quarterly Report (Q2)	October 15 Quarterly Report (Q3)	January 31 Year-End Report (YE)	July 31 Mid-Year Report (Non-Election Year Only) (MY)
Termination Report (TER)	(b) Monthly Report Due On:	(c) 13-Day PRE-Election Report for the: Election on	(d) 30-Day POST-Election Report for the: Election on	
		Primary (12P)	General (12G)	Runoff (12R)
		Convention (12C)	Special (12S)	
				in the State of
				in the State of

5. Covering Period 05/01/2004 through 05/31/2004

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

Type or Print Name of Treasurer Thomas M. Hirschbach

Signature of Treasurer *[Signature]* Date 06/10/2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 02/2003)

Page 2

Write or Type Committee Name

Health Web, Incorporated Political Action Committee

Report Covering the Period: From: 05 01 2004 To: 05 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		25,628.60
(b) Cash on Hand at Beginning of Reporting Period	38,572.60	
(c) Total Receipts (from Line 19)	3,091.00	30,536.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B)	41,663.60	56,163.60
7. Total Disbursements (from Line 21)	4,000.00	18,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37,663.60	37,663.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

## For further information contact:

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Revised 02/2003)

Page 3

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

Report Covering the Period: From: 05 01 2004 To: 05 31 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Partners/Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2,293.00	
(ii) Unitemized .....	708.00	
(ii) TOTAL (add Lines 11(a)(i) and (ii)) .....	3,001.00	30,535.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(i), (ii), and (c)) (Carry Totals to Line 33, page 5) .....	3,001.00	30,535.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3,001.00	30,535.00
20. Total Federal Receipts (subtract Line 12(c) from Line 19) .....	3,001.00	30,535.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 2X (Revised 02/2003)

Page 4

B. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share .....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees .....	0.00	2,500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	4,000.00	16,000.00
24. Independent Expenditures (see Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	0.00	0.00
26. Loan Repayments Made .....	0.00	0.00
27. Loans Made .....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 30(c)) .....	4,000.00	18,500.00
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) From Line 31) .....	4,000.00	18,500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Revised 02/2003)

Page 5

III. Net Contributions / Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from line 11 (d), page 3).....	3,091.00	30,535.00
34. Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33).....	3,091.00	30,535.00
36. Total Federal Operating Expenditures (add Line 21(e)(i) and Line 21(e))..... ▶	0.00	0.00
37. Offset to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)..... ▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 1 OF 1  
 11a  11b  11c  12  
 13  14  15  17

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

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

**A. David Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 21251 Burbank Blvd.  
 City Woodland Hills, CA 91367 State Zip Code  
 Date of Receipt  
 05 03 2004  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee  
 C  
 Name of Employer  
 Health Net, Inc.  
 Occupation  
 Chief Sales Officer  
 Receipt For:  
 Primary  General  
 Other (specify)   
 Aggregate Year-to-Date  
 500.00

**B. Thomas E. Ash**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 123 Technology Drive  
 City Irvine, CA 92618 State Zip Code  
 Date of Receipt  
 05 31 2004  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee  
 C  
 Name of Employer  
 Health Net, Inc.  
 Occupation  
 Staff, 208 & managed Care  
 Receipt For:  
 Primary  General  
 Other (specify)   
 Aggregate Year-to-Date  
 500.00

**C. Karen S. Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 1400 Data Drive  
 City Rancho Cordova, CA 95670 State Zip Code  
 Date of Receipt  
 05 31 2004  
 Amount of Each Receipt this Period  
 40.00  
 FEC ID number of contributing federal political committee  
 C  
 Name of Employer  
 Health Net, Inc.  
 Occupation  
 Dir. of Communication  
 Receipt For:  
 Primary  General  
 Other (specify)   
 Aggregate Year-to-Date  
 200.00

**SUBTOTAL of Receipts This Page (collected)** 240.00  
**TOTAL This Period (last page this line number only)**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 2 OF 22	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (in full)  
Health Net, Incorporated Political Action Committee

**A. Marshall Bentley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 3400 Dade Drive  
 City State Zip Code  
 Rancho Cordova, CA 95670  
 Name of Employer  
 Health Net, Inc.  
 Occupation  
 VP & Counsel  
 Receipt For:  
 Primary  General  
 Other (specify)   
 Aggregate Year-to-Date  
 250.00

Date of Receipt  
 05 31 2004  
 Amount of Each Receipt this Period  
 50.00  
 25-Percent Payroll Deduction

**B. Jeffrey A. Giordavelli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 12971 Foundation Place C  
 City State Zip Code  
 Rancho Cordova, CA 95670  
 Name of Employer  
 Health Net, Inc.  
 Occupation  
 Director Sales  
 Receipt For:  
 Primary  General  
 Other (specify)   
 Aggregate Year-to-Date  
 500.00

Date of Receipt  
 05 31 2004  
 Amount of Each Receipt this Period  
 100.00  
 25-Percent Payroll Deduction

**C. Renee D. Claborn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 11901 SE 57th Avenue  
 City State Zip Code  
 Clackamas, OR 97015  
 Name of Employer  
 Health Net, Inc.  
 Occupation  
 Director Healthcare Services  
 Receipt For:  
 Primary  General  
 Other (specify)   
 Aggregate Year-to-Date  
 200.00

Date of Receipt  
 05 31 2004  
 Amount of Each Receipt this Period  
 40.00  
 25-Percent Payroll Deduction

SUBTOTAL of Receipts This Page (optional) 150.00  
 TOTAL This Period (last page this line number only)



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

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

FOR LINE NUMBER:		PAGE		OF	
<input checked="" type="checkbox"/> Z	11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
	13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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

Full Name (Last, First, Middle Initial) A. Edward P. Colcer, Jr.		Date of Receipt M O Y 05 03 2004
Mailing Address 3400 Dana Drive City State Zip Code Rancho Cordova, CA 95670		Amount of Each Receipt This Period \$0.00
FEC ID number of contributing federal political committee C.		
Name of Employer Health Net, Inc.	Occupation VP, Natl Medicare Compliance	Bi-Weekly Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 125.00	

Full Name (Last, First, Middle Initial) B. Alida K. Dodd		Date of Receipt M O Y 05 03 2004
Mailing Address One Van Hill Crossing City State Zip Code Essex, VT 05454		Amount of Each Receipt This Period \$2.00
FEC ID number of contributing federal political committee C.		
Name of Employer Health Net, Inc.	Occupation Director Financial Analysis	Bi-Weekly Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 150.00	

Full Name (Last, First, Middle Initial) C. Susan H. Duback-Reinhold		Date of Receipt M O Y 05 01 2004
Mailing Address 303 Canal Blvd. City State Zip Code Point Richmond, CA 94804		Amount of Each Receipt This Period \$5.00
FEC ID number of contributing federal political committee C.		
Name of Employer Health Net, Inc.	Occupation VP Strategy and Development	Bi-Weekly Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	182.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 1 OF 1  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in full)  
Health Net, Incorporated Political Action Committee

**A. Mark S. B. Tawil**

Full Name (Last, First, Middle Initial)  
Date of Receipt: 05 31 2004

Mailing Address  
2800 N. 44th Street #400  
City: Phoenix, AZ Zip Code: 85008

Amount of Each Receipt this Period: 500.00

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: President AZ Arizona

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: 500.00

SI-Weekly Payroll Deduction

**B. David G. Friedman**

Full Name (Last, First, Middle Initial)  
Date of Receipt: 05 31 2004

Mailing Address  
3900 Dana Drive  
City: Rancho Cordova, CA Zip Code: 95675

Amount of Each Receipt this Period: 50.00

FEC ID number of contributing federal political committee: C

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: 50.00

SI-Weekly Payroll Deduction

**C. Lisa Kabanjian**

Full Name (Last, First, Middle Initial)  
Date of Receipt: 05 31 2004

Mailing Address  
51261 Burbank Blvd.  
City: Woodland Hills, CA Zip Code: 91367

Amount of Each Receipt this Period: 25.00

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: VP Public Relations

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: 25.00

SI-Weekly Payroll Deduction

SUBTOTAL of Receipts This Page (optional) 655.00

TOTAL This Period (last page this line number only) 655.00

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

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

FOR LINE NUMBER:		PAGE 5 OF 11	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Karin Mayhew</b>		Date of Receipt 08 21 2004
Mailing Address 3400 Data Drive City Rancho Cordova, CA 95670		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee C		
Name of Employer Health Net, Inc.	Occupation SVP Organization Effectiveness	SI-Monthly Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Adrienne Biggest Maxwell</b>		Date of Receipt 05 31 2004
Mailing Address 21550 Canyon Street City Woodland Hills, CA 91367		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee C		
Name of Employer Health Net, Inc.	Occupation VP Government Relations	SI-Monthly Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. David M. Olson</b>		Date of Receipt 05 31 2004
Mailing Address 3400 Data Drive City Rancho Cordova, CA 95670		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee C		
Name of Employer Health Net, Inc.	Occupation SVP Investor Relations	SI-Monthly Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	170.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

PAGE 6 OF 11

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

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

**A. Steven Raffin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 3400 Deza Drive  
 City State Zip Code  
 Rancho Cordova, CA 95670  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Health Net, Inc.  
 Occupation: VP & Chief Medical Officer  
 Receipt For:  
 Primary  General  
 Other (specify)

Date of Receipt  
05 21 2004  
 Amount of Each Receipt this Period  
40.00  
 21-Weekly Payroll Deduction  
 200.00

**B. Terese Raypolda**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 2181 Burbank Blvd.  
 City State Zip Code  
 Woodland Hills, CA 91367  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Health Net, Inc.  
 Occupation: VP Procurement  
 Receipt For:  
 Primary  General  
 Other (specify)

Date of Receipt  
05 31 2004  
 Amount of Each Receipt this Period  
50.00  
 21-Weekly Payroll Deduction  
 250.00

**C. Craig R. Sieney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 2150 Grand Street  
 City State Zip Code  
 Woodland Hills, CA 91367  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Health Net, Inc.  
 Occupation: Sr. Vice President, Controller  
 Receipt For:  
 Primary  General  
 Other (specify)

Date of Receipt  
05 31 2004  
 Amount of Each Receipt this Period  
200.00  
 21-Weekly Payroll Deduction  
 1,000.00

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

200.00  
 1,000.00

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

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

FOR LINE NUMBER: (check only one)		PAGE 2 OF 11	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

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

Full Name (Last, First, Middle Initial) <b>A. Richard Bello</b>		Date of Receipt 05 31 2004
Mailing Address 21650 Oxnard Street City Woodland Hills, CA 91367		Amount of Each Receipt This Period 50.00
State Zip Code		
FEC ID number of contributing federal political committee C		Bi-Weekly Payroll Deduction
Name of Employer Health Sec, Inc.	Occupation VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 240.00	

Full Name (Last, First, Middle Initial) <b>B. Union Salaman</b>		Date of Receipt 05 31 2004
Mailing Address 21650 Oxnard Street City Woodland Hills, CA 91367		Amount of Each Receipt This Period 50.00
State Zip Code		
FEC ID number of contributing federal political committee C		Bi-Weekly Payroll Deduction
Name of Employer Health Sec, Inc.	Occupation SVP Corporate Business Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 235.00	

Full Name (Last, First, Middle Initial) <b>C. Bijan Sarrafzadeh</b>		Date of Receipt 05 31 2004
Mailing Address 10834 International Drive City Rancho Cordova, CA 95670		Amount of Each Receipt This Period 50.00
State Zip Code		
FEC ID number of contributing federal political committee C		Bi-Weekly Payroll Deduction
Name of Employer Health Sec, Inc.	Occupation VP Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	Aggregate Year-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional)	190.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)		PAGE a		OF 11	
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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 (as Full)  
Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeffrey Lee Shelton		Date of Receipt 05 31 2004
Mailing Address 3400 Data Drive City Rancho Cordova, CA 95670		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee C		
Name of Employer Health Net, Inc.	Occupation VP State Govt. Affairs	Eligible Payroll Deductions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Aggregate Year-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Ricky Dean Simmons		Date of Receipt 05 31 2004
Mailing Address 21271 Burbank Blvd City Woodland Hills, CA 91367		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee C		
Name of Employer Health Net, Inc.	Occupation VP Information Systems	Eligible Payroll Deductions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Aggregate Year-to-Date 425.00	

Full Name (Last, First, Middle Initial) C. Thomas V. Smith		Date of Receipt 05 31 2004
Mailing Address 3400 Data Drive City Rancho Cordova, CA 95670		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee C		
Name of Employer Health Net, Inc.	Occupation Dir. Natl. Mtg. and Events	Eligible Payroll Deductions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	176.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 3 OF 11  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

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

Mailing Address  
9320 Sandy Elaine Avenue  
Las Vegas, NV 89131

FEC ID number of contributing federal political committee: C

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt  
05 31 2004

Amount of Each Receipt this Period  
100.00

Bi-Weekly Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Robert T. Lakotama

Mailing Address  
21385 Burbank Blvd.  
Woodland Hills, CA 91367

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc.  
Occupation: VP Pharmacy

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt  
05 31 2004

Amount of Each Receipt this Period  
50.00

Bi-Weekly Payroll Deduction

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

Mailing Address  
3400 Taca Drive  
Rancho Cordova, CA 95670

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc.  
Occupation: VP Legal

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt  
05 31 2004

Amount of Each Receipt this Period  
100.00

Bi-Weekly Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (see page this line number only)

100.00

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

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

FOR LINE NUMBER:		PAGE 10 OF 11	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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

**A. Jennifer Hubbard Vargas**

Full Name (Last, First, Middle Initial)  
Jennifer Hubbard Vargas

Mailing Address  
3400 Dana Drive  
City State Zip Code  
San Jose, CA 95130

FEC ID number of contributing federal political committee: C

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt  
05 31 2004

Amount of Each Receipt this Period: 100.00

2-Weekly payroll deduction

**B. Gail Watts**

Full Name (Last, First, Middle Initial)  
Gail Watts

Mailing Address  
21650 Oxford Street  
City State Zip Code  
Woodland Hills, CA 91367

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: VP Organizational Development

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt  
05 31 2004

Amount of Each Receipt this Period: 50.00

2-Weekly payroll deduction

**C. Curtis Keaton**

Full Name (Last, First, Middle Initial)  
Curtis Keaton

Mailing Address  
21650 Oxford Street  
City State Zip Code  
Woodland Hills, CA 91367

FEC ID number of contributing federal political committee: C

Name of Employer: Health Net, Inc. Occupation: SVP General Counsel/Secy

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt  
05 31 2004

Amount of Each Receipt this Period: 100.00

2-Weekly payroll deduction

SUBTOTAL of Receipts This Page (optional): 250.00

TOTAL This Period (last page the line number only): 250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 11e	<input type="checkbox"/> 11f
	<input type="checkbox"/> 11g	<input type="checkbox"/> 11h
	<input type="checkbox"/> 11i	<input type="checkbox"/> 11j
	<input type="checkbox"/> 11k	<input type="checkbox"/> 11l

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

Full Name (Last, First, Middle Initial) A. Gay Ann Williams		Date of Receipt 05 31 2004
Mailing Address 2806 N 44th Street #200 City: Phoenix, AZ 85018		Amount of Each Receipt this Period 50.00
State: AZ Zip Code: 85018		
FEC ID number of contributing federal political committee: C		Amount of Each Receipt this Period 50.00
Name of Employer Health Net, Inc.	Occupation state govt affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Aggregate Year-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Christopher P. Wing		Date of Receipt 05 31 2004
Mailing Address 21581 Eurbank Blvd. City: Redland Hills, CA 91367		Amount of Each Receipt this Period 250.00
State: CA Zip Code: 91367		
FEC ID number of contributing federal political committee: C		Amount of Each Receipt this Period 250.00
Name of Employer Health Net of California	Occupation Executive VP, Reg. Health Plans	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Aggregate Year-to-Date 1,000.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City: State: Zip Code:		
FEC ID number of contributing federal political committee: C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	3,325.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 20
<input type="checkbox"/> 27	<input type="checkbox"/> 25a	<input type="checkbox"/> 26b	<input type="checkbox"/> 29	<input type="checkbox"/> 25	<input type="checkbox"/> 20a

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NAME OF COMMITTEE (in full)

Health Net, Incorporated Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. The Hawkeye PAC</b>		Date of Disbursement M O B Y Y Y 05 07 2004
Mailing Address P. O. Box 7455 City State Zip Code Des Moines, IA 50309		Amount of Each Disbursement this Period 2,000.00
Purpose of Disbursement Monetary contribution	Category/Type 011	
Candidate Name The Hawkeye PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Johnson to Congress Committee</b>		Date of Disbursement M O B Y Y Y 05 10 2004
Mailing Address P. O. Box 1986 City State Zip Code New Britain, CT 06050		Amount of Each Disbursement this Period 2,500.00
Purpose of Disbursement Monetary contribution	Category/Type 011	
Candidate Name Nancy Johnson	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	State: CT District: 05	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	State: District:	

SUBTOTAL of Disbursements This Page (optional)	9,000.00
TOTAL This Period (last page this line number only)	4,000.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 6-15-04
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> No Postmark	Postmarked
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JTW  
 PREPARER  
 (5/2004)

6-14-04  
 DATE PREPARED