

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Health Underwriters Political Action Committee

ADDRESS (number and street) 1212 New York Ave Suite 1100 Washington DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00283135 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

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

5. Covering Period 08 01 2016 through 08 31 2016

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 Jennifer Murphy

Signature of Treasurer Jennifer Murphy [Electronically Filed] Date 09 09 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="192613.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="112435.54"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="41130.50"/>	<input type="text" value="397629.07"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="153566.04"/>	<input type="text" value="590242.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31744.01"/>	<input type="text" value="468420.23"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="121822.03"/>	<input type="text" value="121822.03"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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 (Rev. 06/2004)

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28645.50	231377.42
(ii) Unitemized	12485.00	166251.65
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	41130.50	397629.07
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	41130.50	397629.07
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))..... ▶	41130.50	397629.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	41130.50	397629.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. 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	1244.01	11758.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1244.01	11758.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30500.00	456000.00
24. Independent Expenditures (use 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	662.00
(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	662.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(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), 29 and 30(c)) ..	31744.01	468420.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31744.01	468420.23

DETAILED SUMMARY PAGE
of Disbursements

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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)	41130.50	397629.07
34. Total Contribution Refunds (from Line 28(d))	0.00	662.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41130.50	396967.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1244.01	11758.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1244.01	11758.23

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

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

FOR LINE NUMBER: PAGE 6 OF 168
(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 Underwriters Political Action Committee

A. Tamela L. Southan
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 W. Renner Rd., Ste 160
 City Richardson State TX Zip Code 75082-2019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Solutions By Design Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 01 / 2016
Transaction ID : 10779652
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Thomas E. Shores
 Full Name (Last, First, Middle Initial)
 Mailing Address 8596 W Bolsa Ct.
 City Boise State ID Zip Code 83709-5196
 FEC ID number of contributing federal political committee. **C**
 Name of Employer T.A. Shores Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 08 / 01 / 2016
Transaction ID : 10779654
 Amount of Each Receipt this Period 42.00
 Memo Item

C. William Kite
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 629
 City Roanoke State VA Zip Code 24004-0629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer D&S Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2325.00

Date of Receipt 08 / 01 / 2016
Transaction ID : 10779658
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 384.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas M. Harte

Mailing Address 20 Mary E. Clark Drive,#10

City State Zip Code
 Hampstead NH 03841-2292

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

Name of Employer Occupation
 Landmark Benefits, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : 10779660

Amount of Each Receipt this Period
 2000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Michele Malooley

Mailing Address 2500 Quantum Lakes Drive Suite 203

City State Zip Code
 Boynton Beach FL 33426-8323

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

Name of Employer Occupation
 Michele Malooley Independent Insuranc Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : 10779661

Amount of Each Receipt this Period
 365.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Kim Foster

Mailing Address 14911 Quorum Drive Suite 100

City State Zip Code
 Dallas TX 75254-7012

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

Name of Employer Occupation
 Foster Benefit Resources, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : 10779662

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3365.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Ray M. Musser
Full Name (Last, First, Middle Initial)

Mailing Address 404 North Second Avenue, Suite E

City	State	Zip Code
Upland	CA	91786-4793

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

Name of Employer	Occupation
Ray Musser & Associates Insurance Serv	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2016

Transaction ID : 10779718

Amount of Each Receipt this Period

85.00

 Memo Item

B. William J. Brannon
Full Name (Last, First, Middle Initial)

Mailing Address 2 Terrace Way, Suite B

City	State	Zip Code
Greensboro	NC	27403-3663

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

Name of Employer	Occupation
Group US, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2016

Transaction ID : 10779719

Amount of Each Receipt this Period

30.00

 Memo Item

C. David R. Moore
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1006

City	State	Zip Code
Burlington	NC	27216-1006

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

Name of Employer	Occupation
David R. Moore, CLU & Associates	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2016

Transaction ID : 10779723

Amount of Each Receipt this Period

30.00

 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial) A. Bruce Frizen		Date of Receipt MM / DD / YYYY 08 / 03 / 2016 Transaction ID : 10780029
Mailing Address 8058 Corporate Center Dr. Suite 200		Amount of Each Receipt this Period 45.00
City Charlotte	State NC	Zip Code 28226-4359
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer L.E. Goodgame & Associates	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Chad P. Schneider		Date of Receipt MM / DD / YYYY 08 / 03 / 2016 Transaction ID : 10780035
Mailing Address 360 W. Hubbard St. Apt 1105		Amount of Each Receipt this Period 85.00
City Chicago	State IL	Zip Code 60654-5748
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Code SixFour	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 805.00	

Full Name (Last, First, Middle Initial) C. Julie A. Jennings		Date of Receipt MM / DD / YYYY 08 / 03 / 2016 Transaction ID : 10780040
Mailing Address 500 Faunce Corner Rd Bldg 100, Suite 120		Amount of Each Receipt this Period 250.00
City Dartmouth	State MA	Zip Code 02747-1255
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Sylvia & Co. Ins. Agency, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 168
<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 Underwriters Political Action Committee

A. Griffin Meredith
Full Name (Last, First, Middle Initial)
Mailing Address 550 S 5th St Unit 303

City Louisville	State KY	Zip Code 40202-4309
--------------------	-------------	------------------------

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

Name of Employer Commonwealth Insurance Partners	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2016

Transaction ID : 10780042

Amount of Each Receipt this Period
85.00

Memo Item

B. John L. Warwick
Full Name (Last, First, Middle Initial)
Mailing Address 1907 B Mangrove Ave.

City Chico	State CA	Zip Code 95926-2381
---------------	-------------	------------------------

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

Name of Employer John Warwick Insurance Services	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2016

Transaction ID : 10780145

Amount of Each Receipt this Period
85.00

Memo Item

C. Carolyn S. Lewis
Full Name (Last, First, Middle Initial)
Mailing Address 12401 Folsom Blvd, Suite 324

City Rancho Cordova	State CA	Zip Code 95742-9419
------------------------	-------------	------------------------

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

Name of Employer Lewis Benefits Group	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
321.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2016

Transaction ID : 10780189

Amount of Each Receipt this Period
12.00

Memo Item

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Holly V. Hanson

Mailing Address 20 Club Manor Dr
Unit A

City Pueblo State CO Zip Code 81008-1601

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

Name of Employer Benefits Broker Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
08 / 04 / 2016
Transaction ID : 10780197

Amount of Each Receipt this Period
365.00

Memo Item

Full Name (Last, First, Middle Initial)
B. David R. Gwin

Mailing Address I-20 At Alpine Rd.
AX-400

City Columbia State SC Zip Code 29219-0001

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

Name of Employer BlueChoice HealthPlan Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
08 / 04 / 2016
Transaction ID : 10780206

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Richard K. Manning

Mailing Address 10315 Woodley Avenue, #216

City Granada Hills State CA Zip Code 91344-6951

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

Name of Employer Accessible Health Insurance Services. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
08 / 05 / 2016
Transaction ID : 10780251

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 535.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Chelyn M. Briand

Mailing Address 14750 NW Glacier Lane

City State Zip Code
 Beaverton OR 97006-5892

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

Name of Employer Occupation
 The Standard Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 08 / 05 / 2016
Transaction ID : 10780256

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Paula Harrington

Mailing Address 1332 E Beltline Road

City State Zip Code
 Richardson TX 75081-3709

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

Name of Employer Occupation
 Harrington Insurance Solutions, LLC - Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 290.00

Date of Receipt
 08 / 05 / 2016
Transaction ID : 10780257

Amount of Each Receipt this Period
 85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. David M. Sherrill

Mailing Address 407 Centerpointe Circle, Suite 163

City State Zip Code
 Altamonte Springs FL 32701-3446

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

Name of Employer Occupation
 Sherrill Insurance Brokerage, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 08 / 05 / 2016
Transaction ID : 10780258

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 168
<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 Underwriters Political Action Committee

A. Luis A. Maceira
 Full Name (Last, First, Middle Initial)
 Mailing Address 4515 S Durango Dr
 Apt 2028
 City Las Vegas State NV Zip Code 89147-6087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Distinctive Insurance
 Occupation Benefits Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : 10780259
 Amount of Each Receipt this Period
 30.00
 Memo Item

B. R. Dane Rianhard
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 E. Pratt St., Unit 902
 City Baltimore State MD Zip Code 21202-1193
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TriBridg Partners, LLC
 Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : 10780260
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Robert L. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 1644 Plank Rd
 City Duncansville State PA Zip Code 16635-8376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer L.R. Webber Associates, Inc.
 Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : 10780439
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Ulrich S. Storz
 Full Name (Last, First, Middle Initial)
 Mailing Address 987 University Avenue, #14
 City Los Gatos State CA Zip Code 95032-7640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Storz Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 06 / 2016
Transaction ID : 10780470
 Amount of Each Receipt this Period 30.00
 Memo Item

B. J. J. Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 1219 W. 2nd St.
 City Grand Island State NE Zip Code 68801-5709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Primark, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 06 / 2016
Transaction ID : 10780471
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Paul Joseph Scholz
 Full Name (Last, First, Middle Initial)
 Mailing Address 17445 Arbor St Suite 310
 City Omaha State NE Zip Code 68130-4645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer OCI Insurance and Financial Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt 08 / 06 / 2016
Transaction ID : 10780473
 Amount of Each Receipt this Period 85.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 15 OF 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Emily Black Bremer

Mailing Address 8000 Bonhomme Ave., # 213

City Saint Louis	State MO	Zip Code 63105-3515
---------------------	-------------	------------------------

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

Name of Employer Bremer Conley LLC	Occupation Broker
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2016

Transaction ID : 10780474

Amount of Each Receipt this Period
63.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Joanne Bikmaz

Mailing Address 1860 Shaded Wood Road

City Diamond Bar	State CA	Zip Code 91789-4011
---------------------	-------------	------------------------

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

Name of Employer Fisher & Associates Insurance Services	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2016

Transaction ID : 10780476

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Alycia Riedl

Mailing Address 1600 Utica Ave S

City Saint Louis Park	State MN	Zip Code 55416-1443
--------------------------	-------------	------------------------

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

Name of Employer Willis Towers Watson	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2016

Transaction ID : 10780477

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	123.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mary Griffin

Mailing Address 14 Commerce Road

City State Zip Code
 Newtown CT 06470-1607

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

Name of Employer Occupation
 TR Paul, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 07 / 2016
Transaction ID : 10780478

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ashley Sullivan

Mailing Address PO Box 99565

City State Zip Code
 Louisville KY 40269-0565

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

Name of Employer Occupation
 Van Zandt Emrich and Cary Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 07 / 2016
Transaction ID : 10780479

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Frank H. McGill

Mailing Address 200 Arbor Lake Dr Ste 200

City State Zip Code
 Columbia SC 29223-4516

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

Name of Employer Occupation
 HealthPlan of South Carolina Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 07 / 2016
Transaction ID : 10780481

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00

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

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

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

FOR LINE NUMBER: PAGE 17 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Teresa F. DeBruin

Mailing Address 5441 Edgerton Drive

City State Zip Code
 Peachtree Corners GA 30092-2185

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

Name of Employer Occupation
 DeBruin Benefit Services, Inc./ The La Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 575.00

Date of Receipt
 08 / 07 / 2016
Transaction ID : 10780485

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Donald L. Balla

Mailing Address 1320 Grant Building

City State Zip Code
 Pittsburgh PA 15219-2213

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

Name of Employer Occupation
 Simpson & McCrady LLC Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 08 / 2016
Transaction ID : 10780491

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Matthew Graves

Mailing Address 4808 Broadmoor SE

City State Zip Code
 Grand Rapids MI 49512-5306

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

Name of Employer Occupation
 Lighthouse Insurance Group Account Executive

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 08 / 08 / 2016
Transaction ID : 10780494

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Richard F. Galardini

Mailing Address 7000 Stonewood Dr
 Suite 251

City State Zip Code
 Wexford PA 15090-7376

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

Name of Employer Occupation
 JRG Advisors, LLC Chairman & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 589.00

Date of Receipt
 08 / 08 / 2016
Transaction ID : 10780495

Amount of Each Receipt this Period
 84.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Neil R. Crosby

Mailing Address 32110 Agoura Road

City State Zip Code
 Westlake Village CA 91361-4026

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

Name of Employer Occupation
 Warner Pacific Insurance Services Director of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 595.00

Date of Receipt
 08 / 09 / 2016
Transaction ID : 10780633

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 4180 La Jolla Village Drive
 Suite 450

City State Zip Code
 La Jolla CA 92037-1472

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

Name of Employer Occupation
 AmCheck Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 09 / 2016
Transaction ID : 10780634

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 199.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Anthony C Buechler

Mailing Address 1203 Colonial Circle

City State Zip Code
 Papillion NE 68046-6109

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

Name of Employer Occupation
 Buechler Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : 10780637

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. William W. Wong

Mailing Address 43 Waverly Place

City State Zip Code
 San Francisco CA 94108-2118

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

Name of Employer Occupation
 Bill Wong & Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : 10780642

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Tammy Buffington

Mailing Address 3112 South 13th

City State Zip Code
 Lincoln NE 68502-4514

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

Name of Employer Occupation
 A+ Brokerage Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : 10780644

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Scott D. Snowden

Mailing Address 812 Lyndon Lane, Suite 101

City	State	Zip Code
Louisville	KY	40222-3844

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

Name of Employer	Occupation
Snowden & Associates, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2016

Transaction ID : 10780645

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Farren Baer

Mailing Address 402 Pitt Street

City	State	Zip Code
Fredericksburg	VA	22401-3631

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

Name of Employer	Occupation
NAHU	Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2016

Transaction ID : 10780646

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 4711 West Main, Suite 2

City	State	Zip Code
Belleville	IL	62226-5289

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

Name of Employer	Occupation
Bovinet Insurance Agency, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2016

Transaction ID : 10780699

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Allen D. Bress

Mailing Address 15025 E. Miravista

City State Zip Code
Fountain Hills AZ 85268-6393

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

Name of Employer Occupation
AIM Marketing Owner/President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 09 / 2016
Transaction ID : 10780757

Amount of Each Receipt this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Erika Sklar

Mailing Address 1415 Walton Blvd

City State Zip Code
Rochester Hills MI 48309-1775

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

Name of Employer Occupation
Tim Crawford Insurance Agency, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
469.00

Date of Receipt
08 / 10 / 2016
Transaction ID : 10780830

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Alexis Weilmuenster

Mailing Address 585 Grove St
Suite 145

City State Zip Code
Herndon VA 20170-4791

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

Name of Employer Occupation
Gallagher Benefit Services Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 10 / 2016
Transaction ID : 10780958

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	322.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 168
<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 Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas F. Ashby

Mailing Address P. O. Box 70

City State Zip Code
Zirconia NC 28790-0070

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

Name of Employer Occupation
Senior Healthcare Solutions, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
08 / 11 / 2016
Transaction ID : 10781036

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Heidi J. Sterner

Mailing Address 7881 Sw Charleston Blvd

City State Zip Code
Las Vegas NV 89117-8323

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

Name of Employer Occupation
LGBS Insurance Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
08 / 11 / 2016
Transaction ID : 10781041

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Greg Holley

Mailing Address 1135 E 33rd Place

City State Zip Code
Tulsa OK 74105-2501

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

Name of Employer Occupation
Flex Plan Administrators Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **299.00**

Date of Receipt
08 / 12 / 2016
Transaction ID : 10781225

Amount of Each Receipt this Period
12.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **72.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Steven T. Wisneski

Mailing Address 1050 W. Western Avenue
Suite 315

City Muskegon State MI Zip Code 49441-1666

FEC ID number of contributing federal political committee.

Name of Employer Creative Benefit Systems, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt / /
Transaction ID : 10781227

Amount of Each Receipt this Period

Memo Item

Full Name (Last, First, Middle Initial)
B. Russell R. Dixon

Mailing Address PO Box 27

City Wheaton State IL Zip Code 60187-0027

FEC ID number of contributing federal political committee.

Name of Employer Colonial Life Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt / /
Transaction ID : 10781228

Amount of Each Receipt this Period

Memo Item

Full Name (Last, First, Middle Initial)
C. David S. Johnson

Mailing Address 12138 Big Canoe

City Big Canoe State GA Zip Code 30143-5157

FEC ID number of contributing federal political committee.

Name of Employer David S. Johnson Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt / /
Transaction ID : 10781229

Amount of Each Receipt this Period

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kate Banchy
Full Name (Last, First, Middle Initial)

Mailing Address 4233 Southtowne Drive

City Eau Claire State WI Zip Code 54701-2652

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

Name of Employer Spectrum Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : 10781233

Amount of Each Receipt this Period
 30.00

Memo Item

B. Raymond F. Buza
Full Name (Last, First, Middle Initial)

Mailing Address 214 East Lakewood Road

City West Palm Beach State FL Zip Code 33405-3316

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

Name of Employer Palm Beach Insurance Advisory Group, I Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : 10781234

Amount of Each Receipt this Period
 30.00

Memo Item

C. Richard R. Girdler
Full Name (Last, First, Middle Initial)

Mailing Address 5110 Maryland Way, Suite 250

City Brentwood State TN Zip Code 37027-7508

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

Name of Employer Cowan, a Division of HUB International Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016
Transaction ID : 10781236

Amount of Each Receipt this Period
 125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Julie A. Shepard-Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 3913 N. Post
 City Spokane State WA Zip Code 99205-1149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Integrity Insurance Solutions, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 12 / 2016
Transaction ID : 10781238
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Rosanne Wolfe
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 17236
 City Tucson State AZ Zip Code 85731-7236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wolfe Insurance & Consultants, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt 08 / 12 / 2016
Transaction ID : 10781240
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Thomas Allen Dorroh
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 996
 City Killeen State TX Zip Code 76540-0996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BKCW Insurance Agency Occupation Employee Benefits Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 08 / 13 / 2016
Transaction ID : 10782064
 Amount of Each Receipt this Period 85.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Al C. Schiebel

Mailing Address 200 Sandy Springs Pl., # 300A

City	State	Zip Code
Atlanta	GA	30328-3854

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

Name of Employer	Occupation
Schiebel & Associates, LLC dba Shopben	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2016

Transaction ID : 10782066

Amount of Each Receipt this Period
45.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Kevin W. Smith

Mailing Address 2000 RiverEdge Parkway Suite 1010

City	State	Zip Code
Sandy Springs	GA	30328-4657

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

Name of Employer	Occupation
KSA Insurance Agency, LLC	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		13		2016

Transaction ID : 10782070

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. John Thomas Scott

Mailing Address 11000 Milestone Drive

City	State	Zip Code
Mechanicsville	VA	23116-5846

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

Name of Employer	Occupation
Experient Health-A-Farm Bureau Company	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2016

Transaction ID : 10782071

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 27 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Kenneth Thomas Stevenson

Mailing Address 3131 Lonbladh Road

City State Zip Code
 Tallahassee FL 32308-4255

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

Name of Employer Occupation
 Earl Bacon Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 463.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : 10782080

Amount of Each Receipt this Period
 50.00

Memo Item

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

Mailing Address 100 North Weinbach Avenue

City State Zip Code
 Evansville IN 47711-6006

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

Name of Employer Occupation
 Schultheis Life & Health Agency Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 301.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : 10782081

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Joshua Weinstein

Mailing Address 3111 C St.
 Suite 500

City State Zip Code
 Anchorage AK 99503-3973

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

Name of Employer Occupation
 Northrim Benefits Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 495.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : 10782082

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 122.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. M. Hughes Waren

Mailing Address P.O. Box 7661

City State Zip Code
 Wilmington NC 28406-7661

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

Name of Employer Occupation
 Ebenconcepts, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 290.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : 10782160

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Bernard J. Hynes

Mailing Address 2999 N. 44th Street Suite 325

City State Zip Code
 Phoenix AZ 85018-7259

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

Name of Employer Occupation
 Hynes Benefits Consulting, LLC Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 16 / 2016
Transaction ID : 10782164

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Laura Blomgren

Mailing Address 935 National Parkway Suite 93550

City State Zip Code
 Schaumburg IL 60173-5150

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

Name of Employer Occupation
 BenAxis Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 08 / 17 / 2016
Transaction ID : 10782211

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Amy Purcilly
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7028

City Troy State MI Zip Code 48007-7028

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

Name of Employer Mason-McBride, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt **08 / 17 / 2016**

Transaction ID : 10782212

Amount of Each Receipt this Period **30.00**

Memo Item

B. Catherine Hyland Ziegler
Full Name (Last, First, Middle Initial)

Mailing Address 2001 Route 46 , Suite 310

City Parsippany State NJ Zip Code 07054-1315

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

Name of Employer The Hyland Group, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **08 / 17 / 2016**

Transaction ID : 10782218

Amount of Each Receipt this Period **42.00**

Memo Item

C. Mark Brooks
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 10876

City Lynchburg State VA Zip Code 24506-0876

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

Name of Employer Personal Design Financial Services, In Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **08 / 17 / 2016**

Transaction ID : 10782218

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **102.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Michael D. Lujan
Full Name (Last, First, Middle Initial)

Mailing Address 645 Harrison Street #200

City San Francisco State CA Zip Code 94107-3624

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

Name of Employer Limelight Health, Inc. Occupation Technology for Agents

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 17 / 2016
Transaction ID : 10782220

Amount of Each Receipt this Period 85.00

Memo Item

B. Daniel R. Tompkins
Full Name (Last, First, Middle Initial)

Mailing Address 1720 Windward Concourse Suite 290

City Alpharetta State GA Zip Code 30005-2291

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

Name of Employer Admin America, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 17 / 2016
Transaction ID : 10782228

Amount of Each Receipt this Period 85.00

Memo Item

C. Mark Riley
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1635

City Irmo State SC Zip Code 29063-1635

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

Name of Employer American Benefit Services, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 18 / 2016
Transaction ID : 10782277

Amount of Each Receipt this Period 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00

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

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

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

FOR LINE NUMBER: PAGE 31 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Robert Mark Fitzgerald
 Full Name (Last, First, Middle Initial)
 Mailing Address 2842 Landing Way
 City State Zip Code
 Marietta GA 30066-2362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Robert Fitzgerald Insurance Agency, In Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 805.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : 10782278
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. Terrie L. Trevino
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 7408
 City State Zip Code
 Boise ID 83707-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Blue Cross of Idaho Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : 10782281
 Amount of Each Receipt this Period
 42.00
 Memo Item

C. Barry Cogdill
 Full Name (Last, First, Middle Initial)
 Mailing Address 4710 4th Street
 Ste. 300
 City State Zip Code
 La Mesa CA 91941-5384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Business Choice Insurance Services President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : 10782282
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 32 OF 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Jeffrey L. Pierce

Mailing Address 730 Manzano

City Wolverine Lake State MI Zip Code 48390-2029

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

Name of Employer Healthwise Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : 10782284

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Kimberley Molthen

Mailing Address 3975 Fair Ridge Drive
110-N

City Fairfax State VA Zip Code 22033-2911

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

Name of Employer BB&T Occupation Employee Benefits Consultant & Vice Pr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : 10782288

Amount of Each Receipt this Period
 85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Judy Anne Johnson

Mailing Address 5581 N Barrasca Ave

City Tucson State AZ Zip Code 85750-6495

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

Name of Employer Optum Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016
Transaction ID : 10782293

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **165.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address 3312 W. Magistrate Loop

City Hayden State ID Zip Code 83835-5019

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

Name of Employer Occupation
Munger Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
08 / 18 / 2016
Transaction ID : 10782296

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Rosanne Wolfe

Mailing Address PO Box 17236

City Tucson State AZ Zip Code 85731-7236

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

Name of Employer Occupation
Wolfe Insurance & Consultants, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
08 / 18 / 2016
Transaction ID : 10782297

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Christine M. Grooms

Mailing Address 160 East Main Street
P O Box 638

City Lake Zurich State IL Zip Code 60047-2418

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

Name of Employer Occupation
Grooms Insurance Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
321.00

Date of Receipt
08 / 19 / 2016
Transaction ID : 10782489

Amount of Each Receipt this Period
12.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	212.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Denise R. VanPutten
Full Name (Last, First, Middle Initial)

Mailing Address 625 Kenmoor Ave

City Grand Rapids State MI Zip Code 49546-2395

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

Name of Employer HUB International Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : 10782490

Amount of Each Receipt this Period
 30.00

Memo Item

B. Joseph E. Pittman
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 24133

City Omaha State NE Zip Code 68124-0133

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

Name of Employer Creative Association Management Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : 10782492

Amount of Each Receipt this Period
 35.00

Memo Item

C. Sandra Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 12500 Network Blvd, # 403

City San Antonio State TX Zip Code 78249-3310

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

Name of Employer Hairston, Johnson & Associates, PLLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2016
Transaction ID : 10782493

Amount of Each Receipt this Period
 30.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 35 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. William D. Mann

Mailing Address PO Box 691967

City State Zip Code
 Houston TX 77269-1967

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

Name of Employer Occupation
 The Compliance Office CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 20 / 2016
Transaction ID : 10783594

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ingrid L. Martin

Mailing Address 3857 Grand Oak Drive

City State Zip Code
 Brunswick OH 44212-3594

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

Name of Employer Occupation
 Ameritas Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 20 / 2016
Transaction ID : 10783599

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Robert E. Sautter

Mailing Address 6330 S 3000 E, Suite 670

City State Zip Code
 Salt Lake City UT 84121-6234

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

Name of Employer Occupation
 Gallagher Benefit Services Client Adviser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 08 / 21 / 2016
Transaction ID : 10783618

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Kyle Miller

Mailing Address 9607 Scotsmoor Drive

City State Zip Code
Caledonia MI 49316-7553

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

Name of Employer Occupation
Aspire Benefit Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 21 / 2016
Transaction ID : 10783620

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. William L. Ritter

Mailing Address 138 W. Main Street, Suite 200

City State Zip Code
Williamston NC 27892-2490

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

Name of Employer Occupation
Triangle Planning Services, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 21 / 2016
Transaction ID : 10783621

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Clover Denise Willison

Mailing Address 355 Sprowel Creek Rd

City State Zip Code
Garberville CA 95542-3110

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

Name of Employer Occupation
Willison Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 21 / 2016
Transaction ID : 10783622

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00

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

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

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

FOR LINE NUMBER: PAGE 37 OF 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Patrick Casinelli

Mailing Address 450 B St # 1800

City San Diego	State CA	Zip Code 92101-8005
-------------------	-------------	------------------------

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

Name of Employer Cavnac & Associates	Occupation Principal
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2016

Transaction ID : 10783626

Amount of Each Receipt this Period
63.00

Memo Item

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

Mailing Address 12988 W. Paint Dr.

City Boise	State ID	Zip Code 83713-1947
---------------	-------------	------------------------

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

Name of Employer Scott Leavitt Insurance	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2016

Transaction ID : 10783633

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Charles A. Webb

Mailing Address 2670 Electric Rd

City Roanoke	State VA	Zip Code 24018-3511
-----------------	-------------	------------------------

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

Name of Employer Innovative Insurance Group	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2016

Transaction ID : 10783635

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	343.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 168
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Terry Singleton
Full Name (Last, First, Middle Initial)

Mailing Address 1773 Owasco Street

City Winter Springs State FL Zip Code 32708-5614

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

Name of Employer Occupation
Sihle Insurance Group Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 22 / 2016
Transaction ID : 10783637

Amount of Each Receipt this Period
63.00

Memo Item

B. Robert Hiram Goodman
Full Name (Last, First, Middle Initial)

Mailing Address 1901 6th Avenue North Suite 1720

City Birmingham State AL Zip Code 35203-2618

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

Name of Employer Occupation
Regions Insurance Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 22 / 2016
Transaction ID : 10783638

Amount of Each Receipt this Period
30.00

Memo Item

Member Contribution

C. Shawn F. Brashears
Full Name (Last, First, Middle Initial)

Mailing Address 1 Kelly Way

City Sparks State MD Zip Code 21152-9484

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

Name of Employer Occupation
Kelly & Associates Insurance Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
08 / 22 / 2016
Transaction ID : 10783642

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 168
<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 Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Cerrina Jensen

Mailing Address 2520 Venture Oaks Way #240

City Sacramento	State CA	Zip Code 95833-4228
--------------------	-------------	------------------------

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

Name of Employer CoreMark Insurance Services Inc	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
519.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	22	/	2016

Transaction ID : 10783643

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Joan A. Fusco

Mailing Address 25B Hanover Rd., Suite 220

City Florham Park	State NJ	Zip Code 07932-1443
----------------------	-------------	------------------------

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

Name of Employer Savoy Associates	Occupation Broker
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	22	/	2016

Transaction ID : 10783646

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mark Kolterman

Mailing Address P O Box 426
341 North 6th Street

City Seward	State NE	Zip Code 68434-0426
----------------	-------------	------------------------

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

Name of Employer Kolterman Agency, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	22	/	2016

Transaction ID : 10783647

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	127.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lori Bergsma

Mailing Address **Balanced Rock Insurance**
643 Canyon Drive

City **Twin Falls** State **ID** Zip Code **83301-3014**

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

Name of Employer **Balanced Rock Insurance Agency, Inc.** Occupation **Broker**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	2	/	2	0	1	6

Transaction ID : 10783648

Amount of Each Receipt this Period

3	0	0	0	0	0	0	0	0	0

30.00

Memo Item

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

Mailing Address **1550 Liberty Ridge Drive**
Suite 250

City **Chesterbrook** State **PA** Zip Code **19087-5567**

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

Name of Employer **Radnor Benefits Group, Inc.** Occupation **Broker**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	2	/	2	0	1	6

Transaction ID : 10783649

Amount of Each Receipt this Period

8	5	0	0	0	0	0	0	0	0

85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Donald L. Mathern

Mailing Address **7650 Cherrywood Drive**

City **Boise** State **ID** Zip Code **83704-3541**

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

Name of Employer **Insurance Specialists** Occupation **Broker**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	2	/	2	0	1	6

Transaction ID : 10783650

Amount of Each Receipt this Period

3	0	0	0	0	0	0	0	0	0

30.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 41 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas L. Henry

Mailing Address 19310 Sonoma Highway, #A

City State Zip Code
 Sonoma CA 95476-5454

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

Name of Employer Occupation
 RealCare Insurance Marketing, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt
 08 / 22 / 2016
Transaction ID : 10783653

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Trei Wild

Mailing Address 3724 Hearst Castle Way

City State Zip Code
 Plano TX 75025-3719

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

Name of Employer Occupation
 Protect Plans Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt
 08 / 22 / 2016
Transaction ID : 10783657

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Randy H. Klein

Mailing Address 3555 Reserve Commons Dr

City State Zip Code
 Medina OH 44256-5900

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

Name of Employer Occupation
 DS Benefits Group Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 08 / 22 / 2016
Transaction ID : 10783658

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **200.00**

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

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

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

FOR LINE NUMBER: PAGE 42 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. DianaLou Wolff

Mailing Address 70 Maiden Lane
2nd Floor

City Kingston State NY Zip Code 12401-4508

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

Name of Employer Benefit Counseling Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : 10783659

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Richard P. Coburn

Mailing Address 19 Minor Court

City San Rafael State CA Zip Code 94903-3716

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

Name of Employer The Word and Brown Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : 10783660

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Don R. Griffey

Mailing Address 56294 Prim Rose Circle

City Elkhart State IN Zip Code 46516-1509

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

Name of Employer Hailey-Campbell, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : 10783662

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jeff A. Ranf
Full Name (Last, First, Middle Initial)

Mailing Address 3800 Centerpoint Drive
Suite 540

City Anchorage State AK Zip Code 99503-5826

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

Name of Employer USI Insurance Services, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 22 / 2016
Transaction ID : 10783663

Amount of Each Receipt this Period
42.00

Memo Item

B. Daniel J. Boaz
Full Name (Last, First, Middle Initial)

Mailing Address 5565 Roberts Drive
Suite 100

City Atlanta State GA Zip Code 30338-3350

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

Name of Employer HealthLife Group, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 22 / 2016
Transaction ID : 10783665

Amount of Each Receipt this Period
30.00

Memo Item

C. Ronald E. Seibel
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 317

City Driftwood State TX Zip Code 78619-0317

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

Name of Employer Advanced Benefits Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 22 / 2016
Transaction ID : 10783667

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 44 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Deborah Jeffs

Mailing Address 2458 Newport Blvd.
Suite 205

City State Zip Code
Costa Mesa CA 92627-1316

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

Name of Employer Occupation
Progressive Benefit Managers Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : 10783669

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Betty J. Lindstrom

Mailing Address PO Box 4026

City State Zip Code
Felton CA 95018-0349

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

Name of Employer Occupation
Lindstrom Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : 10783675

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Raymer M. Sale

Mailing Address 2905 Premiere Parkway
Suite 285

City State Zip Code
Duluth GA 30097-5246

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

Name of Employer Occupation
E2E Benefits Services, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016
Transaction ID : 10783676

Amount of Each Receipt this Period
 170.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Robert Lindsay
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Emerson Place
 City Davenport State IA Zip Code 52801-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arthur J. Gallagher & Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 08 / 22 / 2016
Transaction ID : 10783678
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Thomas R. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 Lamar
 City Wichita Falls State TX Zip Code 76301-6824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Boley Featherston Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784422
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Ronald David Knight
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 507
 City Carrollton State GA Zip Code 30112-0009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer J. Smith Lanier & Co., Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784423
 Amount of Each Receipt this Period 85.00
 Memo Item
 Monthly Contribution

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Eric Kohlsdorf
Full Name (Last, First, Middle Initial)

Mailing Address 1501 Ingersoll Ave
Suite 200

City Des Moines State IA Zip Code 50309-3102

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

Name of Employer Prisma Strategies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1531.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784424

Amount of Each Receipt this Period
85.00

Memo Item

B. Paul McLeod
Full Name (Last, First, Middle Initial)

Mailing Address 2801 Slater Rd Suite 200

City Morrisville State NC Zip Code 27560-8477

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

Name of Employer Coventry/Aetna Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784425

Amount of Each Receipt this Period
30.00

Memo Item

C. Carolyn Marie Andress
Full Name (Last, First, Middle Initial)

Mailing Address 1512 Highway 138

City Wall State NJ Zip Code 07719-3706

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

Name of Employer HUB International Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784426

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 47 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Steven Selinsky

Mailing Address 28638 Oak Point Drive

City Farmington Hills State MI Zip Code 48331-2706

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

Name of Employer Health Alliance Plan Occupation Director of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784428

Amount of Each Receipt this Period
 63.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Carey H. Brown

Mailing Address Six Concourse Parkway Suite 2750

City Atlanta State GA Zip Code 30328-6243

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

Name of Employer The Benefit Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784429

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. William D. Robinson

Mailing Address 739 East Jackson Street

City Martinsville State IN Zip Code 46151-2033

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

Name of Employer NewDay! Marketing Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784430

Amount of Each Receipt this Period
 42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **155.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jill Age
Full Name (Last, First, Middle Initial)
Mailing Address 397 Little Neck Road
Suite 300
City Virginia Beach State VA Zip Code 23452-5764
FEC ID number of contributing federal political committee. **C**
Name of Employer TFA Benefits Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784431
Amount of Each Receipt this Period 30.00
 Memo Item

B. John R. McConnaughey
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 805
City West Chester State OH Zip Code 45071-0805
FEC ID number of contributing federal political committee. **C**
Name of Employer JRM & Associates Agency, Inc Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 336.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784432
Amount of Each Receipt this Period 42.00
 Memo Item

C. Richard H. Todd
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 56166
City Little Rock State AR Zip Code 72215-6166
FEC ID number of contributing federal political committee. **C**
Name of Employer The Todd Agency, Inc Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784436
Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 102.00
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 49 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address PO Box 56166

City Little Rock State AR Zip Code 72215-6166

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

Name of Employer The Todd Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784437

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Jean M. Miller

Mailing Address 15433 E 480 Rd

City Claremore State OK Zip Code 74017-1826

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

Name of Employer Rogers Benefit Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 264.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784440

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mark K. Ackerman

Mailing Address 3700 Forest Drive
 Suite 300

City Columbia State SC Zip Code 29204-4010

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

Name of Employer Insurance Management Group, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784441

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Deborah Hebb

Mailing Address 1120 C Professional Ct

City Hagerstown State MD Zip Code 21740-5858

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

Name of Employer Keller Stonebraker Ins Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : 10784442

Amount of Each Receipt this Period **20.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Stephanie Berger

Mailing Address 79 Daily Dr #276

City Camarillo State CA Zip Code 93010-5807

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

Name of Employer Collaborative Insurance Solutions Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : 10784445

Amount of Each Receipt this Period **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. Bradford H. Blain

Mailing Address AI Torstrick Insurance Agency, Inc
343 Waller Av

City Lexington State KY Zip Code 40504-2912

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

Name of Employer AI Torstrick Insurance Agency, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : 10784447

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **80.00**

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

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

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

FOR LINE NUMBER: PAGE 51 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. David H. Eblen
 Mailing Address 112 South Liberty, # 221
 City Jackson State TN Zip Code 38301-6367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Eblen Agency/A Divison of IPSEO Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784451
 Amount of Each Receipt this Period 30.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. Albert Fogle
 Mailing Address 3111 C St. Suite 500
 City Anchorage State AK Zip Code 99503-3973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northrim Benefits Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784452
 Amount of Each Receipt this Period 30.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Jeffrey Wm. Gennaro
 Mailing Address 3820 W Happy Valley Rd Ste 141, PMB 606
 City Glendale State AZ Zip Code 85310-3292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Capitol Insurance Brokers, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784454
 Amount of Each Receipt this Period 85.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Hedy S. Hebert
Full Name (Last, First, Middle Initial)

Mailing Address 550 Boardwalk Blvd.

City State Zip Code
Bossier City LA 71111-4384

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

Name of Employer Occupation
Benefit Consulting Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784455

Amount of Each Receipt this Period
85.00

Memo Item

B. John S. Helms
Full Name (Last, First, Middle Initial)

Mailing Address 2940 Camino Diablo # 205

City State Zip Code
Walnut Creek CA 94597-3992

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

Name of Employer Occupation
John Helms Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784457

Amount of Each Receipt this Period
30.00

Memo Item

C. Donna D. Hill
Full Name (Last, First, Middle Initial)

Mailing Address 2905 Premiere Parkway Suite 285

City State Zip Code
Duluth GA 30097-5246

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

Name of Employer Occupation
E2E Benefit Services Inc Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784458

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Crystal Hoffman

Mailing Address P.O. Box 709

City State Zip Code
Sugar Land TX 77487-0709

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

Name of Employer Occupation
Benefit Concepts, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
905.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784459

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Carolyn J. King

Mailing Address 6 Country Lane

City State Zip Code
Sussex NJ 07461-4630

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

Name of Employer Occupation
Carolyn J King Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784460

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Stacey S. LaFay

Mailing Address 2444 East Hill Rd.

City State Zip Code
Grand Blanc MI 48439-5098

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

Name of Employer Occupation
Franklin Benefit Solutions Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784461

Amount of Each Receipt this Period
63.00

Memo Item

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

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Barbara A. McClaskey

Mailing Address 1965 Pine Street

City State Zip Code
 Redding CA 96001-1921

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

Name of Employer Occupation
 Barbara McClaskey Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784464

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. James Ming

Mailing Address P.O. Box 621

City State Zip Code
 Union MO 63084-0621

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

Name of Employer Occupation
 Ming Senior Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784465

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Susan Maley Rash

Mailing Address 2108 West Laburnum Avenue, Suite 3

City State Zip Code
 Richmond VA 23227-4300

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

Name of Employer Occupation
 BB&T Benefit Consultants of Virginia, Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1085.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784466

Amount of Each Receipt this Period
 120.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 192.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Valerie Reeves
Full Name (Last, First, Middle Initial)
Mailing Address 3702 Brownsboro Rd
City Louisville State KY Zip Code 40207-1820
FEC ID number of contributing federal political committee. **C**
Name of Employer Preferred Benefits, LLC Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **336.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : 10784467
Amount of Each Receipt this Period **42.00**
 Memo Item

B. Russell Lee Rice
Full Name (Last, First, Middle Initial)
Mailing Address 8000 IH-10 West, # 715
City San Antonio State TX Zip Code 78230-3880
FEC ID number of contributing federal political committee. **C**
Name of Employer AVESIS, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **730.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : 10784469
Amount of Each Receipt this Period **85.00**
 Memo Item

C. Michael P. Ripley
Full Name (Last, First, Middle Initial)
Mailing Address 200 East Main St. Suite 800
City Fort Wayne State IN Zip Code 46802-1900
FEC ID number of contributing federal political committee. **C**
Name of Employer Gibson Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 23 / 2016**
Transaction ID : 10784470
Amount of Each Receipt this Period **30.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **157.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 56 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Michael A. Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address 12200 Northwest Frwy, Suite 662
 City Houston State TX Zip Code 77092-4927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwest General Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784471
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Nicole Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 6200 Northwest Pkwy
 City San Antonio State TX Zip Code 78249-3348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Healthcare Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784473
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Daniel Severo
 Full Name (Last, First, Middle Initial)
 Mailing Address 231 Chestnut St. #410
 City Meadville State PA Zip Code 16335-3458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The DJB Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784474
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Barbara Shooshanian

Mailing Address 39500 High Pointe Blvd
Ste 400

City State Zip Code
Novi MI 48375-5517

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

Name of Employer Occupation
Health Alliance Administrators, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784475

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Michael John Simmang

Mailing Address 143 E Austin St

City State Zip Code
Giddings TX 78942-3201

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

Name of Employer Occupation
The Nitsche Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784476

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Cameron F. Strong

Mailing Address 2565 Dexter Ave. N
502

City State Zip Code
Seattle WA 98109-1955

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

Name of Employer Occupation
Self Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
08 / 23 / 2016
Transaction ID : 10784477

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 58 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Marsha Tellesbo-Kembel
 Mailing Address 1001 4th Avenue, Suite 3200
 City State Zip Code
 Seattle WA 98154-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tellesbo & Company Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1118.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784481
 Amount of Each Receipt this Period
 85.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. Helen M. Todd
 Mailing Address PO Box 56166
 City State Zip Code
 Little Rock AR 72215-6166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Todd Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784483
 Amount of Each Receipt this Period
 30.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Dennis E. Wright
 Mailing Address 1111 Chestnut Hills Pky
 City State Zip Code
 Fort Wayne IN 46814-8934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Employee Plans, LLC Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784485
 Amount of Each Receipt this Period
 85.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 59 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ashley Wynkoop Kapostins

Mailing Address 255 Primera Blvd, Suite 264

City State Zip Code
Lake Mary FL 32746-2148

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

Name of Employer Occupation
CIGNA Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
436.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784486

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Dwight Hall

Mailing Address 6107 Hazelwood Ave.

City State Zip Code
Indianapolis IN 46228-1316

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

Name of Employer Occupation
D Hall & Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784487

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Harry P. Thal

Mailing Address 11006 Kernville Rd. #1

City State Zip Code
Kernville CA 93238-9765

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

Name of Employer Occupation
Harry P. Thal Insurance Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784488

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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

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

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

FOR LINE NUMBER: PAGE 60 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Sergio Acuna

Mailing Address P O Box 960367

City State Zip Code
 El Paso TX 79996-0367

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

Name of Employer Occupation
 Sergio Acuna Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784489

Amount of Each Receipt this Period
 85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Tina Durand

Mailing Address P.O.Box 61157

City State Zip Code
 Corpus Christi TX 78466-1157

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

Name of Employer Occupation
 Heavin & Associates Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784490

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. John Baskett

Mailing Address 2601C Blanding Ave #222

City State Zip Code
 Alameda CA 94501-1507

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

Name of Employer Occupation
 John Baskett Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1240.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784493

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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

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

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

FOR LINE NUMBER: PAGE 61 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jodie E. Braner
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Concourse Parkway
 18th Floor
 City Atlanta State GA Zip Code 30328-5350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Willis Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784496
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Bob Copeland
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Larkspur Landing Circle, Suite
 City Larkspur State CA Zip Code 94939-1755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Copeland Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784499
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Carolyn L. Goodwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 12740 Hillcrest Road
 Suite 275
 City Dallas State TX Zip Code 75230-7129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Goodwin Benefits Group, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 23 / 2016
Transaction ID : 10784503
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Patricia A. Griffey

Mailing Address 17535 Generations Dr

City South Bend State IN Zip Code 46635-1589

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

Name of Employer The Healy Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **975.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784504

Amount of Each Receipt this Period
 100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Michelle S. Howard

Mailing Address 2850 West Grand Boulevard

City Detroit State MI Zip Code 48202-2643

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

Name of Employer Health Alliance Plan Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **805.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784506

Amount of Each Receipt this Period
 85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Karen K. Irwin

Mailing Address 116 S Main St

City Swanton State OH Zip Code 43558-1345

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

Name of Employer Kim Bradford & Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016
Transaction ID : 10784507

Amount of Each Receipt this Period
 42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	227.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 63 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Alan L. Jones

Mailing Address 3420 Pump Road, #144

City Richmond State VA Zip Code 23233-1111

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

Name of Employer TPA Benefits, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 23 / 2016**

Transaction ID : 10784508

Amount of Each Receipt this Period **30.00**

Memo Item

Full Name (Last, First, Middle Initial)
B. Michael A. Embry

Mailing Address 26555 Evergreen Road Suite 535

City Southfield State MI Zip Code 48076-4213

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

Name of Employer Comprehensive Benefits Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3020.00**

Date of Receipt **08 / 23 / 2016**

Transaction ID : 10784509

Amount of Each Receipt this Period **415.00**

Memo Item

Full Name (Last, First, Middle Initial)
C. Jeanne A. Embry

Mailing Address 26240 Wacker Drive

City Chesterfield State MI Zip Code 48051-3306

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

Name of Employer Comprehensive Benefits Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 23 / 2016**

Transaction ID : 10784510

Amount of Each Receipt this Period **30.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 64 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. William H. Pennington
 Full Name (Last, First, Middle Initial)
 Mailing Address 4640 Woodbridge Drive
 City Kenersville State NC Zip Code 27284-8850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pennington Associates Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784514
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Jeff Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 51019
 City Idaho Falls State ID Zip Code 83405-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Hartwell Corporation Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784516
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Dustin Stacy
 Full Name (Last, First, Middle Initial)
 Mailing Address 1151 Red Mile Road
 City Lexington State KY Zip Code 40504-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Insurance Marketing Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784521
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 65 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Julia Beckie Stockstill
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 E. San Augustine
 City State Zip Code
 Deer Park TX 77536-4160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Stockstill & Associates Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784523
 Amount of Each Receipt this Period
 30.00
 Memo Item

B. Michael Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 3219 E. Camelback Road #569
 City State Zip Code
 Phoenix AZ 85018-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Emerging Benefits Consultants, LLC Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784525
 Amount of Each Receipt this Period
 42.00
 Memo Item

C. Chris Otto Wickizer
 Full Name (Last, First, Middle Initial)
 Mailing Address 16619 74th Ave NE
 City State Zip Code
 Kenmore WA 98028-4261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Chris Wickizer Insurance Solutions Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 23 / 2016
Transaction ID : 10784526
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Ledgerwood

Mailing Address 12022 FOREST MOON DR

City CYPRESS	State TX	Zip Code 77433-3834
-----------------	-------------	------------------------

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

Name of Employer RELI Benefit Specialists LLC	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	23	/	2016

Transaction ID : 10784527

Amount of Each Receipt this Period

30.00

 Memo Item

Full Name (Last, First, Middle Initial)
B. Charles L. Westmoreland

Mailing Address 532 Cloiffview Drive

City Brandon	State MS	Zip Code 39047-9183
-----------------	-------------	------------------------

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

Name of Employer Allstate Benefits	Occupation Broker
---------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	23	/	2016

Transaction ID : 10784528

Amount of Each Receipt this Period

30.00

 Memo Item

Full Name (Last, First, Middle Initial)
C. Ronald S. Buffum

Mailing Address 106 South Harris Street # 237

City Round Rock	State TX	Zip Code 78664-6081
--------------------	-------------	------------------------

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

Name of Employer The Buffum Group	Occupation Broker
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	24	/	2016

Transaction ID : 10835352

Amount of Each Receipt this Period

42.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Mitchell West
Full Name (Last, First, Middle Initial)

Mailing Address Health Choice One, Attn: Mitch Wes
6436 S Racine Cir

City Centennial State CO Zip Code 80111-6479

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

Name of Employer MW Family Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 24 / 2016
Transaction ID : 10835359

Amount of Each Receipt this Period
30.00

Memo Item

B. Daniel R Hart
Full Name (Last, First, Middle Initial)

Mailing Address 2237 E. 32nd Street

City Tulsa State OK Zip Code 74105-2215

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

Name of Employer Guardian Life Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
08 / 24 / 2016
Transaction ID : 10835362

Amount of Each Receipt this Period
30.00

Memo Item

C. Dale Bear
Full Name (Last, First, Middle Initial)

Mailing Address 2550 NE Douglas St

City Lees Summit State MO Zip Code 64064-2224

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

Name of Employer Education Services International Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
08 / 24 / 2016
Transaction ID : 10835363

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Paige W. Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 1434 Hwy 301
 City Calera State AL Zip Code 35040-5466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AWM, Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.00

Date of Receipt 08 / 24 / 2016
Transaction ID : 10835628
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Philip W. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 935 Moraga Road Suite 240
 City Lafayette State CA Zip Code 94549-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLIS Corp. dba Lee Health Insurance Se Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 614.00

Date of Receipt 08 / 25 / 2016
Transaction ID : 10835634
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Jo L. Middleton
 Full Name (Last, First, Middle Initial)
 Mailing Address 9525 Katy Freeway, Suite 125
 City Houston State TX Zip Code 77024-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TradeMark Insurance Agency LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 25 / 2016
Transaction ID : 10835636
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Joni Robin Reents
Full Name (Last, First, Middle Initial)

Mailing Address 5760 W. 120th Avenue
Suite 260

City Broomfield State CO Zip Code 80020-6939

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

Name of Employer Reents Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
346.00

Date of Receipt
08 / 25 / 2016
Transaction ID : 10835638

Amount of Each Receipt this Period
42.00

Memo Item

B. David Sokol
Full Name (Last, First, Middle Initial)

Mailing Address 901 Wilshire Drive
Suite 300

City Troy State MI Zip Code 48084-5611

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

Name of Employer Wilshire Benefits Group Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
08 / 25 / 2016
Transaction ID : 10835639

Amount of Each Receipt this Period
85.00

Memo Item

C. David R. Kross
Full Name (Last, First, Middle Initial)

Mailing Address 5556-B Cheviot Rd.

City Cincinnati State OH Zip Code 45247-5202

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

Name of Employer United Benefits Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 25 / 2016
Transaction ID : 10835641

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jason Gootee
Full Name (Last, First, Middle Initial)

Mailing Address 510 L Street
Suite 270

City Anchorage State AK Zip Code 99501-1949

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

Name of Employer Modra Health Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 25 / 2016
Transaction ID : 10835642

Amount of Each Receipt this Period
30.00

Memo Item

B. Christine M. Bogott
Full Name (Last, First, Middle Initial)

Mailing Address 125 Grand Avenue, Unit B

City Grand Junction State CO Zip Code 81501-2251

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

Name of Employer MHIB Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
08 / 25 / 2016
Transaction ID : 10835643

Amount of Each Receipt this Period
30.00

Memo Item

C. Jeremy Feldman
Full Name (Last, First, Middle Initial)

Mailing Address 15324 Sweetbay St

City Woodbine State MD Zip Code 21797-7726

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

Name of Employer Aflac Occupation Broker Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
08 / 25 / 2016
Transaction ID : 10835646

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 102.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Edward P. Williams
Full Name (Last, First, Middle Initial)

Mailing Address 191 North Ave

City Mount Clemens State MI Zip Code 48043-9703

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

Name of Employer Action Health Insurance Agency Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : 10835647

Amount of Each Receipt this Period
 42.00

Memo Item

B. Cynthia Whaley
Full Name (Last, First, Middle Initial)

Mailing Address 408 N. Washington Street Suite A

City Easton State MD Zip Code 21601-3704

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

Name of Employer Avery Hall Benefit Solutions, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : 10835648

Amount of Each Receipt this Period
 30.00

Memo Item

C. Shelly K. Winson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1914

City Chandler State AZ Zip Code 85244-1914

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

Name of Employer True Choice Benefits LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **435.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2016
Transaction ID : 10835725

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	102.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 72 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Rebecca L. Wooden
 Full Name (Last, First, Middle Initial)
 Mailing Address 7604 NE Hazel Dell Ave
 City Vancouver State WA Zip Code 98665-8224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer A.L. Insurance Group Inc Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835728
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Sam Drysdale
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 8222
 City Springfield State MO Zip Code 65801-8222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mercy Health Plans Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 469.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835734
 Amount of Each Receipt this Period 42.00
 Memo Item

C. James M. Morrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 6096 Innovation Way
 City Carlsbad State CA Zip Code 92009-1741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Morrison Insurance Services, Inc Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835735
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Stephanie A. Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 11100 Mead Rd, Ste 300
 City Baton Rouge State LA Zip Code 70816-2260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HUB International Occupation Benefit Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835736
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Amanda Gibson
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 E Capitol Street Suite 1200
 City Jackson State MS Zip Code 39201-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fisher Brown Bottrell Occupation Employee Benefits Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835738
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Sue Wakamoto-Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 2nd St
 City San Francisco State CA Zip Code 94107-1366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Zenefits Occupation Benefits Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835739
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Troy J. Cook
Full Name (Last, First, Middle Initial)

Mailing Address 6428 Wilcot Ct.

City Johnston State IA Zip Code 50131-2859

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

Name of Employer Telligent Health Management Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : 10835742

Amount of Each Receipt this Period
 30.00

Memo Item

B. Reid Lenhart
Full Name (Last, First, Middle Initial)

Mailing Address 715 Douglas Ave, Ste 14

City Altamonte Springs State FL Zip Code 32714-2576

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

Name of Employer The Canadian Medstore Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : 10835743

Amount of Each Receipt this Period
 12.00

Memo Item

C. John H. Hinck
Full Name (Last, First, Middle Initial)

Mailing Address 211 McLaws Circle, Ste2

City Williamsburg State VA Zip Code 23185-5871

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

Name of Employer Hinck Financial Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : 10835745

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Vicki Michele Dickert
Full Name (Last, First, Middle Initial)

Mailing Address 8833 Perimeter Park Blvd
Suite 802

City Jacksonville State FL Zip Code 32216-1113

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

Name of Employer BenTec Workplace Solutions Occupation Vice President of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
08 / 26 / 2016
Transaction ID : 10835746

Amount of Each Receipt this Period
30.00

Memo Item

B. Steven L. Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 1151 Red Mile Road

City Lexington State KY Zip Code 40504-2649

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

Name of Employer Benefit Insurance Marketing Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt
08 / 26 / 2016
Transaction ID : 10835748

Amount of Each Receipt this Period
85.00

Memo Item

C. Matthew Kim Dinkel
Full Name (Last, First, Middle Initial)

Mailing Address 13720 Six Mile Cypress, Suite B

City Fort Myers State FL Zip Code 33912-4324

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

Name of Employer Alan Williams & Associates Insurance A Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
645.00

Date of Receipt
08 / 26 / 2016
Transaction ID : 10835749

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jeff Kramer
Full Name (Last, First, Middle Initial)
Mailing Address 1640 NW 132nd ST
City Clive State IA Zip Code 50325-8517
FEC ID number of contributing federal political committee. **C**
Name of Employer NRECA Occupation Benefit Specialist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835754
Amount of Each Receipt this Period 30.00
 Memo Item

B. Consuelo Helbling
Full Name (Last, First, Middle Initial)
Mailing Address 4101 N Broadway Ste 100
City Chicago State IL Zip Code 60613-2104
FEC ID number of contributing federal political committee. **C**
Name of Employer LegalShield Business Solutions Occupation General Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 309.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835756
Amount of Each Receipt this Period 12.00
 Memo Item

C. Heather Ambro
Full Name (Last, First, Middle Initial)
Mailing Address 2157 Welsch Industrial Ct.
City Saint Louis State MO Zip Code 63146-4220
FEC ID number of contributing federal political committee. **C**
Name of Employer The ECCHIC Group Occupation VP of Administration Services
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 980.00

Date of Receipt 08 / 26 / 2016
Transaction ID : 10835757
Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 127.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. David Munger
 Full Name (Last, First, Middle Initial)
 Mailing Address 3312 W. Magistrate Loop
 City Hayden State ID Zip Code 83835-5019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Munger Insurance Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : 10835758
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Suzanne K. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5955 Carnegie Blvd Suite 150
 City Charlotte State NC Zip Code 28209-4664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Employee Benefit Advisors of the Carol Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt
 08 / 26 / 2016
Transaction ID : 10835759
 Amount of Each Receipt this Period
 42.00
 Memo Item

C. Elizabeth J. Underhill
 Full Name (Last, First, Middle Initial)
 Mailing Address 5951 Canoga Avenue
 City Woodland Hills State CA Zip Code 91367-5010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Underhill Insurance Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 572.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : 10835916
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	172.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Keith Wallace
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Broadway

City Bellingham State WA Zip Code 98225-3036

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

Name of Employer Wallace-Rice Benefits, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : 10835917

Amount of Each Receipt this Period
85.00

Memo Item

B. Fred Cartier
Full Name (Last, First, Middle Initial)

Mailing Address 11555 Sorrento Valley Road Suite 203

City San Diego State CA Zip Code 92121-1331

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

Name of Employer Rogers Benefit Group, Inc. Occupation Employee Benefits Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : 10835919

Amount of Each Receipt this Period
42.00

Memo Item

C. Michael S. Reddy
Full Name (Last, First, Middle Initial)

Mailing Address 13800 Jackson Road

City Mishawaka State IN Zip Code 46544-9195

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

Name of Employer Keystone Insurers Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2016
Transaction ID : 10835923

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	212.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Erin Nevins
Full Name (Last, First, Middle Initial)

Mailing Address 1717 Central Avenue Suite 202

City Albany	State NY	Zip Code 12205-4759
----------------	-------------	------------------------

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

Name of Employer EP Nevins Insurance Agency Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
491.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2016

Transaction ID : 10835925

Amount of Each Receipt this Period
63.00

Memo Item

B. Douglas F. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 1010 Ohio River Blvd

City Pittsburgh	State PA	Zip Code 15202-2835
--------------------	-------------	------------------------

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

Name of Employer Seubert & Associates, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2016

Transaction ID : 10835927

Amount of Each Receipt this Period
30.00

Memo Item

C. Mark Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 165 Churchill Ct.

City Fayetteville	State GA	Zip Code 30214-7801
----------------------	-------------	------------------------

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

Name of Employer Self	Occupation Broker
--------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2016

Transaction ID : 10835928

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	103.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 168
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Annette Bechtold
Full Name (Last, First, Middle Initial)

Mailing Address 200 Galleria Pkwy SE
Ste 1950

City Atlanta State GA Zip Code 30339-5946

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

Name of Employer Digital Insurance, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.00

Date of Receipt
08 / 27 / 2016
Transaction ID : 10835929

Amount of Each Receipt this Period
42.00

Memo Item

B. Justin Lord
Full Name (Last, First, Middle Initial)

Mailing Address 935 East 36th Place

City Tulsa State OK Zip Code 74105-3001

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

Name of Employer Wilcox & McGrath, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
08 / 27 / 2016
Transaction ID : 10835930

Amount of Each Receipt this Period
10.00

Memo Item

C. Russell B. Childers
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1547

City Americus State GA Zip Code 31709-1547

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

Name of Employer Russ Childers, CLU Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
845.00

Date of Receipt
08 / 27 / 2016
Transaction ID : 10835932

Amount of Each Receipt this Period
90.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	142.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. William Hepscher
Full Name (Last, First, Middle Initial)

Mailing Address 38176 Medical Center Avenue

City Zephyrhills State FL Zip Code 33540-1380

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

Name of Employer The Canadian Drugstore Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **805.00**

Date of Receipt **08 / 27 / 2016**

Transaction ID : 10835933

Amount of Each Receipt this Period **85.00**

Memo Item

B. Roger J. Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 710 East Main St Suite 110

City Lexington State KY Zip Code 40502-1602

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

Name of Employer Epic Insurance Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **08 / 27 / 2016**

Transaction ID : 10835934

Amount of Each Receipt this Period **42.00**

Memo Item

C. David Mordo
Full Name (Last, First, Middle Initial)

Mailing Address 15 Main St

City Holmdel State NJ Zip Code 07733-2105

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

Name of Employer SlatteryGA, A division of Arthur J. Ga Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **511.00**

Date of Receipt **08 / 27 / 2016**

Transaction ID : 10835936

Amount of Each Receipt this Period **42.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	169.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jeffrey Sherrod
 Full Name (Last, First, Middle Initial)
 Mailing Address 3810 Holly Ridge Drive
 City Longview State TX Zip Code 75605-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Healthcare Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 27 / 2016
Transaction ID : 10835938
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Judy Anne Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5581 N Barrasca Ave
 City Tucson State AZ Zip Code 85750-6495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 27 / 2016
Transaction ID : 10835939
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Craig Gussin
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 Palomar Airport Road #260
 City Carlsbad State CA Zip Code 92011-1047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Auerbach & Gussin Insurance and Financ Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt 08 / 27 / 2016
Transaction ID : 10835940
 Amount of Each Receipt this Period 170.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kelly J. Witt
Full Name (Last, First, Middle Initial)

Mailing Address 1017 Pine Hill Way

City Carmel State IN Zip Code 46032-7701

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

Name of Employer American Health and Wellness Group Occupation Chief Operating Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 27 / 2016**

Transaction ID : 10835941

Amount of Each Receipt this Period **30.00**

Memo Item

B. Karen L. Kirkpatrick
Full Name (Last, First, Middle Initial)

Mailing Address 263 N Matteson Lake Road

City Bronson State MI Zip Code 49028-9313

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

Name of Employer On Your Mark Consulting Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **301.00**

Date of Receipt **08 / 27 / 2016**

Transaction ID : 10835942

Amount of Each Receipt this Period **42.00**

Memo Item

C. Jerry D. Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 5113 N. Executive Drive Suite 102

City Peoria State IL Zip Code 61614-4893

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

Name of Employer Jackson Financial Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **08 / 27 / 2016**

Transaction ID : 10835947

Amount of Each Receipt this Period **42.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **114.00**

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

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

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

FOR LINE NUMBER: PAGE 84 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. A. Andra Grava
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 E. McDermott
 City State Zip Code
 Allen TX 75002-2802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The DI Center Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : 10835951
 Amount of Each Receipt this Period
 170.00
 Memo Item

B. Carolyn Beck
 Full Name (Last, First, Middle Initial)
 Mailing Address 7321 Eagle Crest Blvd.
 City State Zip Code
 Evansville IN 47715-8157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SIHO Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 386.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : 10835954
 Amount of Each Receipt this Period
 42.00
 Memo Item

C. Peter L. Rowe
 Full Name (Last, First, Middle Initial)
 Mailing Address 3033 N. Central Ave
 Suite 810
 City State Zip Code
 Phoenix AZ 85012-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Sunwest Benefits Consulting, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 08 / 27 / 2016
Transaction ID : 10835955
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 312.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Margaret Evelyn Stedt
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 74325
 City San Clemente State CA Zip Code 92673-0145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stedt Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **730.00**

Date of Receipt **08 / 28 / 2016**
Transaction ID : 10835957
 Amount of Each Receipt this Period **85.00**
 Memo Item

B. Robert A. Lackey
 Full Name (Last, First, Middle Initial)
 Mailing Address 458 High Street, NE
 City Warren State OH Zip Code 44481-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Navigators Agency Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 28 / 2016**
Transaction ID : 10835958
 Amount of Each Receipt this Period **30.00**
 Memo Item

C. Andrea Brody
 Full Name (Last, First, Middle Initial)
 Mailing Address 6018 E Lowden Rd.
 City Cave Creek State AZ Zip Code 85331-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bravo Wellness Occupation Vice President of Business Developmen
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **331.00**

Date of Receipt **08 / 28 / 2016**
Transaction ID : 10835964
 Amount of Each Receipt this Period **12.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	127.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ruppert Reinstadler

Mailing Address 6443 SW Beaverton-Hillsdale Hwy
Suite 200

City State Zip Code
Portland OR 97221-4230

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

Name of Employer Occupation
Coordinated Resources Group, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 28 / 2016
Transaction ID : 10835965

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Anya Y. Simpson

Mailing Address 700 Newtown Road, Suite 104

City State Zip Code
Norfolk VA 23502-3925

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

Name of Employer Occupation
Benefit Plans, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 28 / 2016
Transaction ID : 10835966

Amount of Each Receipt this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Charles E. Underhill

Mailing Address PO Box 626

City State Zip Code
Woodland Hills CA 91365-0626

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

Name of Employer Occupation
Underhill Insurance Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 28 / 2016
Transaction ID : 10835968

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	157.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Terry Allard
Full Name (Last, First, Middle Initial)

Mailing Address 3000 A Street, Suite 400

City Anchorage State AK Zip Code 99503-4040

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

Name of Employer The Wilson Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1465.00

Date of Receipt
08 / 28 / 2016
Transaction ID : 10835969

Amount of Each Receipt this Period
170.00

Memo Item

B. Kevin Shively
Full Name (Last, First, Middle Initial)

Mailing Address 3800 Paluxy Dr Ste 540

City Tyler State TX Zip Code 75703-1664

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

Name of Employer Blue Cross Blue Shield Occupation Carrier Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 28 / 2016
Transaction ID : 10835975

Amount of Each Receipt this Period
30.00

Memo Item

C. Audra I. Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 1201 N Watson Rd Ste 287

City Arlington State TX Zip Code 76006-6222

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

Name of Employer Vogue Insurance Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
08 / 28 / 2016
Transaction ID : 10835976

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Candius Michelle Stearns
 Full Name (Last, First, Middle Initial)
 Mailing Address 3290 W Big Beaver Rd
 Ste 503
 City Troy State MI Zip Code 48084-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mason-McBride/DFB Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : 10835977
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. Craig Thomas Currier
 Full Name (Last, First, Middle Initial)
 Mailing Address 11213 Davenport St.
 Ste. 201
 City Omaha State NE Zip Code 68154-2604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aon Risk Solutions Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : 10835988
 Amount of Each Receipt this Period
 63.00
 Memo Item

C. Paul E. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Queen Street
 City Southington State CT Zip Code 06489-2052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Paul E Smith Insurance, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1625.00

Date of Receipt
 08 / 28 / 2016
Transaction ID : 10835989
 Amount of Each Receipt this Period
 175.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 323.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Al Hombroek
Full Name (Last, First, Middle Initial)

Mailing Address 30 Lumpkin St, Suite D

City Lawrenceville State GA Zip Code 30046-8410

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

Name of Employer Multiple Benefits Corporation Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2016
Transaction ID : 10835993

Amount of Each Receipt this Period 85.00

Memo Item

B. Brett Michelle Hamilton
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6398

City Charleston State WV Zip Code 25362-0398

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

Name of Employer Black Horse Financial Advisors Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 08 / 28 / 2016
Transaction ID : 10835997

Amount of Each Receipt this Period 30.00

Memo Item

C. Heather Louise LaValle-Tumbleson
Full Name (Last, First, Middle Initial)

Mailing Address 2214 5th St Suite 1

City White Bear Lake State MN Zip Code 55110-3039

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

Name of Employer Athena Resource Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 28 / 2016
Transaction ID : 10836000

Amount of Each Receipt this Period 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jay Hazelbaker
 Full Name (Last, First, Middle Initial)
 Mailing Address 5007 Pine Creek Drive
 City Westerville State OH Zip Code 43081-4849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tabit, Arganbright & Hazelbaker, Inc. Occupation President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **336.00**

Date of Receipt **08 / 29 / 2016**
Transaction ID : 10836009
 Amount of Each Receipt this Period **42.00**
 Memo Item

B. Douglas Lubenow
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 West Main Street Suite 203
 City Moorestown State NJ Zip Code 08057-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lubenow Agency Occupation Broker
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **336.00**

Date of Receipt **08 / 29 / 2016**
Transaction ID : 10836015
 Amount of Each Receipt this Period **42.00**
 Memo Item

C. Karen T. Kane
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 20185
 City Portland State OR Zip Code 97294-0185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Solutions NW, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **310.00**

Date of Receipt **08 / 30 / 2016**
Transaction ID : 10836238
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	184.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 91 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Heather Lee McDougall
 Full Name (Last, First, Middle Initial)
 Mailing Address 1312 W Kiva Ave
 City State Zip Code
 Mesa AZ 85202-6633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Affiliated Insurance Solutions Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433059213999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Denise S. Villagran
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 Santa Fe, #205
 City State Zip Code
 Corpus Christi TX 78404-2343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Entrust, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433061213999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Lynn M. Schreder
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 North 25th Street
 City State Zip Code
 Fort Dodge IA 50501-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KHI Solutions Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433076113999
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Tiffany Stock

Mailing Address 3111 C St.
Suite 500

City Anchorage State AK Zip Code 99503-3973

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

Name of Employer Northrim Benefits Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR433079013999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Carla Adams

Mailing Address 2229 Mesa Brook

City Schertz State TX Zip Code 78154-1975

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

Name of Employer Total Administrative Services Corporat Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR433095013999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Melissa Davies

Mailing Address 9425 Double R Blvd
Ste F

City Reno State NV Zip Code 89521-5928

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

Name of Employer Clark and Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR433115413999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 168
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Madeleine Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1490,
 City Jackson State MS Zip Code 39215-1490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fisher Brown Bottrell Insurance, Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR433118913999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Joseph H. Deacon
 Full Name (Last, First, Middle Initial)
 Mailing Address 221 1/2 Hale Street PO Box 2831
 City Charleston State WV Zip Code 25301-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Deacon & Deacon Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR433129313999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Dwane C. McFerrin
 Full Name (Last, First, Middle Initial)
 Mailing Address 8420 West Dodge Road Suite 510
 City Omaha State NE Zip Code 68114-3432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Market Sales, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR433168113999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 94 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. William J. Barrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 7400 West Campus Road
 City State Zip Code
 New Albany OH 43054-8725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Aetna Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433180613999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. H Elizabeth Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3013 Sonora Canyon Rd
 City State Zip Code
 Weatherford TX 76087-8215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Senior Services of Texas Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433187713999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Robert L. Rifkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Stonewall Lane
 City State Zip Code
 Mamaroneck NY 10543-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Insurance & Financial Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433196813999
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 95 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Harry Dorman

Mailing Address 1500 N Casaloma Dr Suite 411

City Appleton State WI Zip Code 54913-8219

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

Name of Employer Medicare Masters, LLC Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433197413999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Scott W. Long

Mailing Address 1715 Greenway Village Dr.

City Katy State TX Zip Code 77494-2175

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

Name of Employer Transamerica Employee Benefits Occupation Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433206813999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Jennifer Brittain

Mailing Address 208 N. Mill

City Pryor State OK Zip Code 74361-2422

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

Name of Employer Brown & Brown, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **427.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR433214313999

Amount of Each Receipt this Period
 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **102.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Barbara Ann Gerken
 Full Name (Last, First, Middle Initial)
 Mailing Address 1775 Indian Wood Circle
 City Maumee State OH Zip Code 43537-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer First Insurance Group Occupation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : PR433268313999
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Amanda McCann Potter
 Full Name (Last, First, Middle Initial)
 Mailing Address 911 Midkiff
 City Midland State TX Zip Code 79701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aflac Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : PR433277613999
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Michael Spleet
 Full Name (Last, First, Middle Initial)
 Mailing Address 2444 East Hill Rd.
 City Grand Blanc State MI Zip Code 48439-5098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Franklin Benefit Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **576.00**

Date of Receipt **08 / 31 / 2016**
Transaction ID : PR433316613999
 Amount of Each Receipt this Period **75.00**
 Memo Item
 P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Laura Drake
Full Name (Last, First, Middle Initial)
Mailing Address 401 Gooding St N #106
City Twin Falls State ID Zip Code 83301-6177
FEC ID number of contributing federal political committee. **C**
Name of Employer Laura Drake Insurance Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR433504413999
Amount of Each Receipt this Period 30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

B. Mindy Payne Farnsley
Full Name (Last, First, Middle Initial)
Mailing Address 3702 Brownsboro Rd
City Louisville State KY Zip Code 40207-1820
FEC ID number of contributing federal political committee. **C**
Name of Employer Preferred Benefits Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR433519213999
Amount of Each Receipt this Period 30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

C. Roger W. Skinner
Full Name (Last, First, Middle Initial)
Mailing Address 4010 State Street
City Tampa State FL Zip Code 33609-1264
FEC ID number of contributing federal political committee. **C**
Name of Employer Argus Dental and Vision Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 244.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436789413999
Amount of Each Receipt this Period 30.50
 Memo Item
P/R Deduction (\$30.50 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	90.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John P. Garven
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 8
11715 East Main Street -

City State Zip Code
Huntley IL 60142-0008

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

Name of Employer Occupation
Benico, LTD Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436791113999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. John F. Rippinger
Full Name (Last, First, Middle Initial)

Mailing Address 1501 East Woodfield Rd. #110 E

City State Zip Code
Schaumburg IL 60173-4945

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

Name of Employer Occupation
Rippinger Financial Group, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436793513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Catherine Van Zant
Full Name (Last, First, Middle Initial)

Mailing Address 5500 Euper Lane
P.O. Box 3529

City State Zip Code
Fort Smith AR 72903-3234

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

Name of Employer Occupation
Brown-Hiller-Clark & Associates, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436801913999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 102.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Gerald G Hartman
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5716

City Boise State ID Zip Code 83705-0716

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

Name of Employer Insurance Network America Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436808013999

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Eugene L. Rowe
Full Name (Last, First, Middle Initial)

Mailing Address 16000 Ventura Blvd

City Encino State CA Zip Code 91436-2744

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

Name of Employer R & R Retirement and Insurance Service Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436817913999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Brad L Christian
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 188

City Clatonia State NE Zip Code 68328-0188

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

Name of Employer Insurance & Investments Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436821013999

Amount of Each Receipt this Period 10.00

Memo Item

P/R Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Janet Trautwein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 New York Ave. NW, Ste 1100
 City Washington State DC Zip Code 20005-3987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAHU Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436821413999
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

B. William L. Sutherland
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 795008
 131 Interpark Blvd.
 City San Antonio State TX Zip Code 78279-5008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wortham Insurance & Risk Management Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436823413999
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

C. Elizabeth E. Rios-Carl
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 North Campbell
 City El Paso State TX Zip Code 79901-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Houghton Financial Partners LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436824513999
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 101 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas Besselman

Mailing Address 6421 Perkins Rd., # 2B, Bldg A

City State Zip Code
 Baton Rouge LA 70808-6200

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

Name of Employer Occupation
 Gallagher Benefit Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436824613999

Amount of Each Receipt this Period
 250.00

Memo Item

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jesse A. Patton

Mailing Address 1112 Maple Street

City State Zip Code
 West Des Moines IA 50265-4420

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

Name of Employer Occupation
 Associations Marketing Group, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2800.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436829513999

Amount of Each Receipt this Period
 350.00

Memo Item

P/R Deduction (\$350.00 Monthly)

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

Mailing Address 6510 N. Shadeland Avenue

City State Zip Code
 Indianapolis IN 46220-4369

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

Name of Employer Occupation
 Neace Lukens Holding Company, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 805.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436829713999

Amount of Each Receipt this Period
 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 685.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Elizabeth Ashmore
Full Name (Last, First, Middle Initial)

Mailing Address 6102 82nd St, Bldg #6

City Lubbock State TX Zip Code 79424-0803

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

Name of Employer Ashmore & Associates Insurance Agency, Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436830313999

Amount of Each Receipt this Period 170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

B. Mary B. Kramer
Full Name (Last, First, Middle Initial)

Mailing Address 13810 National Bank Parkway, Suite

City Omaha State NE Zip Code 68154

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

Name of Employer Holmes Murphy & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436836213999

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

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

Mailing Address 7412 Karl Drive

City Lincoln State NE Zip Code 68516-4368

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

Name of Employer Senior Benefit Strategies Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436838913999

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	262.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 168
<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 Underwriters Political Action Committee

A. Michael E. Matznick
Full Name (Last, First, Middle Initial)

Mailing Address 3150 N. Elm Street
Suite 201

City Greensboro State NC Zip Code 27408-3840

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

Name of Employer EbenConcepts Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436839813999

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

B. Dorothy M. Cociu
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 6677

City Fullerton State CA Zip Code 92834-6677

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

Name of Employer Advanced Benefit Consulting & Insuranc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436844613999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Keith L. Wright
Full Name (Last, First, Middle Initial)

Mailing Address 401 W Front St
Ste 4

City Traverse City State MI Zip Code 49684-2259

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

Name of Employer Wright Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436848513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	215.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 104 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. H. Larry Fortenberry
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 16566
 City Jackson State MS Zip Code 39236-6566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Executive Planning Group, P.A. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436852613999
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Darrald T. Bean
 Full Name (Last, First, Middle Initial)
 Mailing Address 3922 Rampart ST
 City Boise State ID Zip Code 83704-4557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bean Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436853313999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Tom Swayne
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 31029
 City Charleston State SC Zip Code 29417-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer David M. Gilston Insurance Agency, Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436853713999
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 172.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 168
<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 Underwriters Political Action Committee

A. Michael J. Freeman
Full Name (Last, First, Middle Initial)

Mailing Address 3511 Camino Del Rio South
Suite 303

City San Diego State CA Zip Code 92108-4043

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

Name of Employer Countywide Health Ins. Services, Inc. Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436861813999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. George R. Keeling
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Drawer K-1630
507 Avenue G

City Levelland State TX Zip Code 79336-3720

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

Name of Employer George R. Keeling Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436865513999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Sandra V. Mobley
Full Name (Last, First, Middle Initial)

Mailing Address 137 Executive Dr. Suite D

City Madison State MS Zip Code 39110-8456

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

Name of Employer Mobley Insurance Agency LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436869313999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	165.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 106 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Paula L. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 31930 Daniel Way
 City Temecula State CA Zip Code 92591-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Paula Wilson, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436873513999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Kathy M. Rainwater
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 West Southwest Loop 323
 City Tyler State TX Zip Code 75701-9455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Threlkeld & Company Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436873713999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Rodney Stuart
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 E Carmel Dr Suite 100
 City Carmel State IN Zip Code 46032-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Strategic Insurance Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436883313999
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 107 OF 168
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

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

Mailing Address 502 Paris St.

City State Zip Code
 Lafayette LA 70506-5249

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

Name of Employer Occupation
 Oxford Asset Management,LLC Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436894613999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jackie L. Spragins

Mailing Address P O Box 2073

City State Zip Code
 Wichita Falls TX 76307-2073

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

Name of Employer Occupation
 Allred-Thompson-Mason-Daugherty Insura Producer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436895313999

Amount of Each Receipt this Period
 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Leah-Anne Janway

Mailing Address 2225 SW 96

City State Zip Code
 Oklahoma City OK 73159-6861

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

Name of Employer Occupation
 Self Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436901513999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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

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

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

FOR LINE NUMBER: PAGE 108 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Todd Morrow
 Full Name (Last, First, Middle Initial)
 Mailing Address 1173 Brittmore
 City Houston State TX Zip Code 77043-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Concepts, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436903713999
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Tonya S. Booth
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 Gateway Blvd. Suite 200
 City Richardson State TX Zip Code 75080-3646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Upshaw Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436911013999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Annette Shaffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 418 South Main Street
 City Findlay State OH Zip Code 45840-3273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Group Benefit Consultants Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436917213999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 102.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 109 OF 168
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Dennis J. Recker

Mailing Address 971 North Perry Street
P.O. Box 276

City Ottawa State OH Zip Code 45875-1218

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

Name of Employer Fawcett, Lammon, Recker & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436919013999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

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

Mailing Address P.O. Box 345

City Ravenna State OH Zip Code 44266-0345

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

Name of Employer Kaczmarek Ins. Services Agency, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436923413999

Amount of Each Receipt this Period 31.00

Memo Item

P/R Deduction (\$31.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Louie L. Cason

Mailing Address PO Box 11229

City Columbia State SC Zip Code 29211-1229

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

Name of Employer The Cason Group, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436934813999

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.00

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

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Jimmie Whitmire
 Mailing Address 503 Eighth Street
 City State Zip Code
 Wichita Falls TX 76301-6507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Whitmire & Whitmire, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436939113999
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
B. James R. Stenger
 Mailing Address 8926 Crown Colony Boulevard
 City State Zip Code
 Fort Myers FL 33908-5627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAHU Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1485.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436939913999
 Amount of Each Receipt this Period
 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Gregory J. Seifert
 Mailing Address PO Box 189
 916 Main Street
 City State Zip Code
 Vancouver WA 98666-0189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Biggs Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR436941613999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 297.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 111 OF 168
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. John Woods

Mailing Address 458 High Street

City Warren State OH Zip Code 44481-1200

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

Name of Employer INSURANCE NAVIGATORS AGENCY Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436950013999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Nicole Fairbairn

Mailing Address 8069 Little Circle Road

City Noblesville State IN Zip Code 46060-1071

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

Name of Employer Creative Insurance Concepts Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436957113999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Robert V. Holland

Mailing Address PO Box 698

City Centralia State WA Zip Code 98531-0698

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

Name of Employer Centralia General Agencies Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR436961713999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John E Schneider
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Sidco Drive, Suite 200

City Nashville	State TN	Zip Code 37204-4537
-------------------	-------------	------------------------

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

Name of Employer Colonial Life	Occupation Broker
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436963513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. John C. Parker
Full Name (Last, First, Middle Initial)

Mailing Address 38 Hope St
Unit 1312

City Niantic	State CT	Zip Code 06357-2454
-----------------	-------------	------------------------

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

Name of Employer Parker Agency	Occupation Broker
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436986813999

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. Bob Bentley
Full Name (Last, First, Middle Initial)

Mailing Address 9557 Silverdale Loop Road, NW

City Silverdale	State WA	Zip Code 98383-9132
--------------------	-------------	------------------------

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

Name of Employer Albers Company	Occupation Broker
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR436990413999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 113 OF 168
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. William Craig Splawn

Mailing Address 800 Avenue C

City State Zip Code
Katy TX 77493-2302

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

Name of Employer Occupation
Splawn & Associates Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
08 / 31 / 2016

Transaction ID : PR436992813999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Charla S. Rose

Mailing Address PO Box 1299

City State Zip Code
Amarillo TX 79105-0299

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

Name of Employer Occupation
Upshaw Insurance Agency Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
08 / 31 / 2016

Transaction ID : PR436999113999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Kelly Don Fristoe

Mailing Address 807 8th Street, Suite 300

City State Zip Code
Wichita Falls TX 76301-3317

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

Name of Employer Occupation
Financial Partners Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt
08 / 31 / 2016

Transaction ID : PR437002313999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

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

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

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

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ryan P. Thorn

Mailing Address 10342 South Springcrest Lane

City State Zip Code
South Jordan UT 84095-4538

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

Name of Employer Occupation
Ryan P. Thorn Insurance Planning, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437004013999

Amount of Each Receipt this Period
40.00

Memo Item

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Betty R. Doyle

Mailing Address 108 SE 3rd, Suite A

City State Zip Code
Moore OK 73160-5234

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

Name of Employer Occupation
Doyle-Crow & Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437006913999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Scott T. Buie

Mailing Address 6440 South Wasatch Blvd., #150

City State Zip Code
Salt Lake City UT 84121-3513

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

Name of Employer Occupation
Buie Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437010513999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

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

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

FOR LINE NUMBER: PAGE 115 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. James P Better

Mailing Address 11 Summer Street, Suite 6

City Chelmsford State MA Zip Code 01824-3064

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

Name of Employer New England Medical Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437011513999

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Michael D. Gray

Mailing Address 233 South 13th Street, Suite 1650

City Lincoln State NE Zip Code 68508-2036

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

Name of Employer The Harry A. Koch Co Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437016713999

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Dee Forshee

Mailing Address 203 E Main #B

City Union State MO Zip Code 63084-1645

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

Name of Employer Ming Senior Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437017013999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **200.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Keith M. Duhon
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 80158

City Lafayette State LA Zip Code 70598-0158

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

Name of Employer The Family Insurance Center, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437017113999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Tammy Winn
Full Name (Last, First, Middle Initial)

Mailing Address 9811 S IH 35, Building 1 Suite 100

City Austin State TX Zip Code 78744-7901

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

Name of Employer SWBC Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437022713999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. T. Darlene Kaczmarek
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 345

City Ravenna State OH Zip Code 44266-0345

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

Name of Employer Kaczmarek Ins. Services Agency, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437026313999

Amount of Each Receipt this Period 31.00

Memo Item

P/R Deduction (\$31.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 91.00

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

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

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

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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Donna J. Blizman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1939 Racimo Dr
 City Sarasota State FL Zip Code 34240-9426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Employee Benefits Marketing Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437031513999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Matt B. Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2950 Breckenridge Lane, Suite 8
 City Louisville State KY Zip Code 40220-1462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Schwartz Insurance Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437037813999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Wesley P. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 604
 City Darlington State SC Zip Code 29540-0604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Moore Insurance Agency, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437039413999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 118 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Leesa Kay Hayes

Mailing Address 812 Lyndon Lane Suite 101

City State Zip Code
 Louisville KY 40222-3844

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

Name of Employer Occupation
 Snowden & Associates, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437043313999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jonathan S. Clark

Mailing Address 6084 South 900 East, Suite 102

City State Zip Code
 Salt Lake City UT 84121-1743

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

Name of Employer Occupation
 Fringe Benefits Analysts Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437051513999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Eleanor M. Brockhurst

Mailing Address 1212 East Osborn Road, Suite 110

City State Zip Code
 Phoenix AZ 85014-5537

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

Name of Employer Occupation
 Brockhurst & Associates, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437052813999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Kimberly C. Martin
Full Name (Last, First, Middle Initial)

Mailing Address 1027 S Pendleton Street
Suite B-217

City Easley State SC Zip Code 29642-1046

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

Name of Employer Ebenconcepts Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437058213999

Amount of Each Receipt this Period
40.00

Memo Item

P/R Deduction (\$40.00 Monthly)

B. Terri M. Olson
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 21479

City Keizer State OR Zip Code 97307-1479

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

Name of Employer Olson Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437070213999

Amount of Each Receipt this Period
65.00

Memo Item

P/R Deduction (\$65.00 Monthly)

C. Suzetta E. Alberts
Full Name (Last, First, Middle Initial)

Mailing Address 26555 Evergreen Drive
Ste 535

City Southfield State MI Zip Code 48076-4213

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

Name of Employer Comprehensive Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
847.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437076113999

Amount of Each Receipt this Period
84.00

Memo Item

P/R Deduction (\$84.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	189.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Juan R. Lopez
Full Name (Last, First, Middle Initial)

Mailing Address 22431 Antonio Pkwy
Suite B160-420

City Rancho Santa Margarita State CA Zip Code 92688-2804

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437079013999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Shelley A Chornak
Full Name (Last, First, Middle Initial)

Mailing Address 7251 Engle Rd. Suite 103

City Cleveland State OH Zip Code 44130-3400

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

Name of Employer Sage Partners, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437080813999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

C. Lori R. Rice
Full Name (Last, First, Middle Initial)

Mailing Address 3611 Paesanos Pkwy
Ste 100

City San Antonio State TX Zip Code 78231-1256

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

Name of Employer Frost Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437086413999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	157.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Linda Rose Koehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 Main Street
 City Pleasanton State CA Zip Code 94566-8206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Herzog Insurance Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437090113999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Dierdre Kennedy-Simington
 Full Name (Last, First, Middle Initial)
 Mailing Address 17200 Ventura Blvd., Suite 312
 City Encino State CA Zip Code 91316-5018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Genesis Financial & Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437094113999
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. Joseph E. Henehan
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 Carnegie Dr., Ste. #205
 City San Bernardino State CA Zip Code 92408-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Henehan Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437097913999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	212.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Mario Roiz
Full Name (Last, First, Middle Initial)

Mailing Address 10446 NW 31st Terrace

City Doral State FL Zip Code 33172-1200

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

Name of Employer HR Benefit Services, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437104913999

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

B. James R. Stephens
Full Name (Last, First, Middle Initial)

Mailing Address 100 Mansell Ct East Suite 400

City Roswell State GA Zip Code 30076-4859

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

Name of Employer Humana Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437110713999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Joseph W. Buyalos
Full Name (Last, First, Middle Initial)

Mailing Address 9713 Key West Ave, Suite 401

City Rockville State MD Zip Code 20850-4082

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

Name of Employer The Insurance Exchange, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437111613999

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	157.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. G. Russell Garner
Full Name (Last, First, Middle Initial)

Mailing Address 1308 Murraywood Drive

City Columbia State SC Zip Code 29212-1159

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

Name of Employer G. Russell Garner LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437113213999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Cynthia H. Doucet
Full Name (Last, First, Middle Initial)

Mailing Address 104 Mondrian Way

City Lafayette State LA Zip Code 70501-7730

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

Name of Employer Global Financial Resources, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437116413999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. BRIAN J. MCEVILLY
Full Name (Last, First, Middle Initial)

Mailing Address 4455 S. Pecos Rd.

City Las Vegas State NV Zip Code 89121-5029

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

Name of Employer GLB Insurance Group of Nevada Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437117713999

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Joseph K. Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 1128 Lincoln Mall
Suite 200

City Lincoln State NE Zip Code 68508-2878

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

Name of Employer UNICO Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1460.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437118013999

Amount of Each Receipt this Period
170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

B. Lonnie Klene
Full Name (Last, First, Middle Initial)

Mailing Address 14339 Torrey Chase Blvd., Ste F

City Houston State TX Zip Code 77014-1631

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

Name of Employer Core Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437119613999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Wendy Vanderwater Bratteli
Full Name (Last, First, Middle Initial)

Mailing Address 515 West Southwest Loop 323

City Tyler State TX Zip Code 75701-9455

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

Name of Employer Threlkeld & Company Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437122413999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	242.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 125 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Bruce D. Benton
 Mailing Address 17200 Ventura Blvd
 Suite 312
 City State Zip Code
 Encino CA 91316-5018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Genesis Financial & Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1485.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437123013999
 Amount of Each Receipt this Period
 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Joanna Antongiovanni
 Mailing Address P.O. Box 795008
 City State Zip Code
 San Antonio TX 78279-5008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Wortham Insurance & Risk Management Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437128013999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Linda K. Friedrich
 Mailing Address 4435 O Street
 City State Zip Code
 Lincoln NE 68510-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNICO Group, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437129113999
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 126 OF 168
<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 Underwriters Political Action Committee

A. Jeffrey Papenfus
Full Name (Last, First, Middle Initial)

Mailing Address 32110 Agoura Road

City Westlake Village State CA Zip Code 91361-4026

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

Name of Employer Warner Pacific Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437137813999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Timothy P. Walsh
Full Name (Last, First, Middle Initial)

Mailing Address 701 Oyster Catcher Drive

City Hampstead State NC Zip Code 28443-8340

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

Name of Employer Advanced Insurance Systems Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437149413999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Laura L. Hebert
Full Name (Last, First, Middle Initial)

Mailing Address 935 Graham Road
PO BOX 18508

City Corpus Christi State TX Zip Code 78418-5123

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

Name of Employer Hebert Insurance Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437154813999

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 102.00

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

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

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

FOR LINE NUMBER: PAGE 127 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Robert H. White
 Full Name (Last, First, Middle Initial)
 Mailing Address 6724 S 29th W Place
 City State Zip Code
 Tulsa OK 74132-1766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Plan Benefit Analysts, a Division of H Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **336.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437174113999
 Amount of Each Receipt this Period
42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Robert J. Tierney
 Full Name (Last, First, Middle Initial)
 Mailing Address 830 N Main St, Ste 200
 City State Zip Code
 Meridian ID 83642-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Compass Benefit Advisors Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437175213999
 Amount of Each Receipt this Period
30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Neal Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1314 East Atlantic Boulevard
 City State Zip Code
 Pompano Beach FL 33060-6745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Frank H. Furman, Inc Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437183413999
 Amount of Each Receipt this Period
30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **102.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Dale Ducote
Full Name (Last, First, Middle Initial)

Mailing Address 7922 Summa Avenue, Suite B-1

City	State	Zip Code
Baton Rouge	LA	70809-3475

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

Name of Employer	Occupation
Health Plus Consulting Services	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : PR437184613999

Amount of Each Receipt this Period

42.00

 Memo Item

P/R Deduction (\$42.00 Monthly)

B. Alan R. Schulman
Full Name (Last, First, Middle Initial)

Mailing Address 6500 Rock Spring Drive Suite 410

City	State	Zip Code
Bethesda	MD	20817-1199

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

Name of Employer	Occupation
The Meltzer Group	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : PR437194613999

Amount of Each Receipt this Period

15.00

 Memo Item

P/R Deduction (\$15.00 Monthly)

C. Johnnie O. Debler
Full Name (Last, First, Middle Initial)

Mailing Address 1102 E. Laurel St.

City	State	Zip Code
Rockport	TX	78382-2815

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

Name of Employer	Occupation
GSM Insurors Group	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : PR437196413999

Amount of Each Receipt this Period

30.00

 Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	87.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 168
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. John B. Crable
Full Name (Last, First, Middle Initial)

Mailing Address 5000 Dearborn Cir. Ste 100

City Mount Laurel	State NJ	Zip Code 08054-4108
----------------------	-------------	------------------------

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

Name of Employer Corporate Synergies Group, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : PR437199713999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Victoria J. Braden
Full Name (Last, First, Middle Initial)

Mailing Address 3875 Johns Creek Parkway, Suite C

City Suwanee	State GA	Zip Code 30024-1294
-----------------	-------------	------------------------

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

Name of Employer Braden Benefit Strategies, Inc	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : PR437201913999

Amount of Each Receipt this Period
250.00

Memo Item

P/R Deduction (\$250.00 Monthly)

C. Joshua D. Nace
Full Name (Last, First, Middle Initial)

Mailing Address 100 W. Harrison Street, Suite S440

City Seattle	State WA	Zip Code 98119-4116
-----------------	-------------	------------------------

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

Name of Employer Dental Health Services	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : PR437203313999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Lon G. Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 3000 A Street, Suite 400

City Anchorage State AK Zip Code 99503-4040

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

Name of Employer The Wilson Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437204313999

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Jennifer Bundy-Cobb
Full Name (Last, First, Middle Initial)

Mailing Address 3000 A Street, Suite 400

City Anchorage State AK Zip Code 99503-4040

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

Name of Employer The Wilson Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **605.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437204413999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Marilyn A. Stenger
Full Name (Last, First, Middle Initial)

Mailing Address 8926 Crown Colony Blvd

City Fort Myers State FL Zip Code 33908-5627

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

Name of Employer MVS Consulting Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437206413999

Amount of Each Receipt this Period **85.00**

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 131 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James S. Garbina
 Full Name (Last, First, Middle Initial)
 Mailing Address 14010 FNB Pkwy Ste 300
 City State Zip Code
 Omaha NE 68154-5235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Harry A. Koch Co Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437212213999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Catherine L. Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 39500 High Pointe Blvd., Suite 400
 City State Zip Code
 Novi MI 48375-5517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Health Alliance Administrators Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1005.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437218313999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Rita A. Musser
 Full Name (Last, First, Middle Initial)
 Mailing Address 3330 Thames Drive
 City State Zip Code
 Fort Wayne IN 46815-5994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Senior Insurance Solutions Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437229113999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 132 OF 168
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Joy K. Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 9424 Double R Blvd
City Reno State NV Zip Code 89521-5977
FEC ID number of contributing federal political committee. **C**
Name of Employer Comstock Insurance Agencies, Inc. Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 601.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437231213999
Amount of Each Receipt this Period 47.00
 Memo Item
P/R Deduction (\$47.00 Monthly)

B. Michael A. Norris
Full Name (Last, First, Middle Initial)
Mailing Address 295 E Palmer Street
City Franklin State NC Zip Code 28734-3049
FEC ID number of contributing federal political committee. **C**
Name of Employer Wayah Employee Benefits / EbenConcepts Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437250013999
Amount of Each Receipt this Period 30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

C. Diane L. Barton-Lewis
Full Name (Last, First, Middle Initial)
Mailing Address Arthur J Gallagher & Co
615 E. Britton Road
City Oklahoma City State OK Zip Code 73114-7710
FEC ID number of contributing federal political committee. **C**
Name of Employer Gallagher Benefit Services, Inc. Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437254113999
Amount of Each Receipt this Period 30.00
 Memo Item
P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 107.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 133 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Sandra Lee Powers-Booth
 Full Name (Last, First, Middle Initial)
 Mailing Address 4817 S. 175th Street
 City Seatac State WA Zip Code 98188-3710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Benefits Northwest Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437264313999
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Allen D. Hardy
 Full Name (Last, First, Middle Initial)
 Mailing Address 802 Kosciusko Road P.O. Box 89
 City Philadelphia State MS Zip Code 39350-3555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Philadelphia Security Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437264913999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Jennifer L. Toups
 Full Name (Last, First, Middle Initial)
 Mailing Address #1 Galleria Blvd, Suite 1122
 City Metairie State LA Zip Code 70001-2092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Humana Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437270513999
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 157.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 134 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Bill Eastin
 Mailing Address 1504 Hackberry Street
 City State Zip Code
 Metairie LA 70001-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dardis Couvillion & Associates Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437271713999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. James H. Hissong
 Mailing Address 8401 Widmer Rd
 City State Zip Code
 Lenexa KS 66215-5416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437274713999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Margaret S. Tolbert
 Mailing Address 6501 Peake Rd Bld 950
 City State Zip Code
 Macon GA 31210-8063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tolbert & Associates Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437280513999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. James F. Summers
Full Name (Last, First, Middle Initial)

Mailing Address 8420 West Dodge Road, 5th Floor

City Omaha	State NE	Zip Code 68114-3443
---------------	-------------	------------------------

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

Name of Employer Senior Market Sales, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437281013999

Amount of Each Receipt this Period
125.00

Memo Item

P/R Deduction (\$125.00 Monthly)

B. Don E. Hensley
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 20626

City Oklahoma City	State OK	Zip Code 73156-0626
-----------------------	-------------	------------------------

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

Name of Employer Bigbie, Hensley & Janway Insurance Age	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437293513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Luann S. Yarberry
Full Name (Last, First, Middle Initial)

Mailing Address 1300 10th Street

City Wichita Falls	State TX	Zip Code 76301-3227
-----------------------	-------------	------------------------

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

Name of Employer Higginbotham Ins Agency, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437301013999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 136 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Angela Oakes

Mailing Address 301 Cedar St
 Suite 203

City Sandpoint State ID Zip Code 83864-1425

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

Name of Employer Summit Insurance Resource Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437309013999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. T.J. Sullivan

Mailing Address 1786 State Street

City Salem State OR Zip Code 97301-4341

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

Name of Employer Huggins Insurance Services, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437310513999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Russ Blakely

Mailing Address PO Box 11310

City Chattanooga State TN Zip Code 37401-2310

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

Name of Employer Russ Blakely & Associates, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437317313999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

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

FOR LINE NUMBER: PAGE 137 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Marie D. Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 4th Ave S. #1500
 City State Zip Code
 Minneapolis MN 55415-1637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DeRuyter-Bell, LLC Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437323313999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Patricia Mihalyi-Stiffler
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 N. Riverview Drive
 City State Zip Code
 Anaheim CA 92808-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Options in Insurance Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437326113999
 Amount of Each Receipt this Period
 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. Susan R. Pittman
 Full Name (Last, First, Middle Initial)
 Mailing Address 32418 51st Avenue, SW
 City State Zip Code
 Federal Way WA 98023-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Insure NW Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437343513999
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 122.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 138 OF 168
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Jim Lawless
 Full Name (Last, First, Middle Initial)
 Mailing Address Epic Insurance Solutions, LLC
 710 East Main Street
 City Lexington State KY Zip Code 40502-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Epic Insurance Solutions, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437348013999
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. Catherine A. Bajkowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 188 Industrial Drive, Suite 226
 City Elmhurst State IL Zip Code 60126-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CB Health Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437361113999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. David M. Block
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 1809
 City Candler State NC Zip Code 28715-1809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Specialties, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437364413999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 139 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Rina Tikia
 Full Name (Last, First, Middle Initial)
 Mailing Address 3525 N. Causeway Blvd., Suite 815
 City State Zip Code
 Metairie LA 70002-3655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tikia Consulting Group, Inc. Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 264.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437375313999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Jeffery C. Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 6200 Reynolds Road
 City State Zip Code
 Jackson MI 49201-9386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Small Business Association of Michigan Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437385413999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Brenda Cutting
 Full Name (Last, First, Middle Initial)
 Mailing Address 4356 Bonney Road
 Suite 2-101
 City State Zip Code
 Virginia Beach VA 23452-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Sterling Benefits, LLC Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 204.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437388313999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Antonio Gutierrez
Full Name (Last, First, Middle Initial)

Mailing Address 12833 Riverdance Dr.

City Raleigh State NC Zip Code 27613-7093

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

Name of Employer ACA Dudes, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437402013999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Valerie Lynn Cramer
Full Name (Last, First, Middle Initial)

Mailing Address 588 - 3 Mile Road, NW Suite 101

City Grand Rapids State MI Zip Code 49544-8221

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

Name of Employer Grotenhuis Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437416413999

Amount of Each Receipt this Period 100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. Monique E. Hahn
Full Name (Last, First, Middle Initial)

Mailing Address 1701 1st Ave S Unit 400

City Birmingham State AL Zip Code 35233-1847

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

Name of Employer Synergy Benefits & Risk Mgt Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437417013999

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 141 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Hollie Gandy

Mailing Address 2920 Duniven Circle, #2

City State Zip Code
 Amarillo TX 79109-1650

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

Name of Employer Occupation
 Senior Solutions Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437425013999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Robert S. Clark

Mailing Address 7548 Preston Road

City State Zip Code
 Frisco TX 75034-5683

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

Name of Employer Occupation
 Clark Insurance Associates, PLLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437427213999

Amount of Each Receipt this Period
 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Joel Rosenblum

Mailing Address 230 Lipan Way

City State Zip Code
 Boulder CO 80303-3635

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

Name of Employer Occupation
 Insurance for Asset Protection Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 336.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437427413999

Amount of Each Receipt this Period
 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 114.00

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

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

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

FOR LINE NUMBER: PAGE 142 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Victoria A. Major-Bell

Mailing Address 3602 Harwich Ct

City State Zip Code
Greenacres FL 33467-1532

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

Name of Employer Occupation
VMB Solutions Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 / /
Transaction ID : PR437432013999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Amy D. Mutter

Mailing Address 2670 Electric Road

City State Zip Code
Roanoke VA 24018-3511

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

Name of Employer Occupation
Innovative Insurance Group, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.00

Date of Receipt
 / /
Transaction ID : PR437454913999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Reed Damron

Mailing Address 5880 Live Oak Parkway, Suite 250

City State Zip Code
Norcross GA 30093-1740

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

Name of Employer Occupation
HIRE Benefits, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
 / /
Transaction ID : PR437468913999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

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

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

FOR LINE NUMBER: PAGE 143 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Melinda S. Anderson-Wallis
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 N. Meridian St.
 Suite 200
 City State Zip Code
 Indianapolis IN 46204-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 IU Health Plans Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437470813999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. David C. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 915 Englewood Avenue
 City State Zip Code
 Durham NC 27701-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ebenconcepts Company Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437474513999
 Amount of Each Receipt this Period
 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

C. Marcus Creasy
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 220
 City State Zip Code
 Heber Springs AR 72543-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Adams & Creasy Insurance Agency, Inc. Broker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : PR437474913999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas Siino

Mailing Address 1126 Clifton Avenue

City Clifton State NJ Zip Code 07013-3622

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

Name of Employer Executive Benefits Group, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : PR437477513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Carol C. Pennington

Mailing Address 4640 Woodbridge Drive

City Kernersville State NC Zip Code 27284-8850

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

Name of Employer Pennington Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : PR437485413999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Randy L. McDaniel

Mailing Address 575 Chambers Road

City McDonough State GA Zip Code 30253-6447

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

Name of Employer McDaniel Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : PR437485713999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	102.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Colleen J. Gransee
Full Name (Last, First, Middle Initial)

Mailing Address 1277 Deming Way

City Madison State WI Zip Code 53717-1971

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

Name of Employer Dean Health Plan Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437490413999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

B. Barry S. Cohn
Full Name (Last, First, Middle Initial)

Mailing Address 21515 Vanowen St Ste 200

City Canoga Park State CA Zip Code 91303-2715

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

Name of Employer RGEB Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437497313999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

C. Susan M. Rider
Full Name (Last, First, Middle Initial)

Mailing Address 1402 N Capital #400

City Indianapolis State IN Zip Code 46202-2375

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

Name of Employer Gregory & Appel Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **613.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437510713999

Amount of Each Receipt this Period **63.00**

Memo Item

P/R Deduction (\$63.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **123.00**

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

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

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

FOR LINE NUMBER: PAGE 146 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Maggie Coley

Mailing Address 29 Olde Gate Court

City Pooler State GA Zip Code 31322-8281

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

Name of Employer Coley Benefit Services, Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437534013999

Amount of Each Receipt this Period **42.00**

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Charles J. Giardina

Mailing Address 5440 Mounes Street, Suite 112

City New Orleans State LA Zip Code 70123-3296

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

Name of Employer MetLife Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437562813999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. David Contorno

Mailing Address 109 Professional Park Dr Ste 103

City Mooresville State NC Zip Code 28117-5538

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

Name of Employer Lake Norman Benefits, Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt **08 / 31 / 2016**

Transaction ID : PR437566613999

Amount of Each Receipt this Period **30.00**

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **102.00**

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

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

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

FOR LINE NUMBER: PAGE 147 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Daniel Alm

Mailing Address P.O. Box 3248

City State Zip Code
Omaha NE 68180-1001

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

Name of Employer Occupation
Blue Cross and Blue Shield of Nebraska Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437585513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Dennis F. Mobley

Mailing Address 137 Executive Drive Suite D

City State Zip Code
Madison MS 39110-8456

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

Name of Employer Occupation
Mobley Insurance Agency, LLC, a Divisi Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437587513999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Doris Waller

Mailing Address 1778 N. Plano Rd. Suite 310

City State Zip Code
Richardson TX 75081-1958

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

Name of Employer Occupation
Pan-American Life Insurance Group Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437591513999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 122.00

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

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

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

FOR LINE NUMBER: PAGE 148 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Judith L. Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 10071
 City State Zip Code
 Tyler TX 75711-0071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CFG Insurance Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 636.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437594113999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Ryan R. Swinton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1128 Lincoln Mall
 Suite 200
 City State Zip Code
 Lincoln NE 68508-2878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNICO Group, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437594913999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Patrick Burns
 Full Name (Last, First, Middle Initial)
 Mailing Address 5653 Maxwellton Road
 City State Zip Code
 Oakland CA 94618-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Burns Employee Benefits Insurance Serv Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437600513999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Eugene Starks

Mailing Address 613 Crescent Circle
Suite 201

City State Zip Code
Ridgeland MS 39157-8686

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

Name of Employer Occupation
Benefit Administration Services, Ltd. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1070.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437603113999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. George Williams

Mailing Address 4109 Woodway Dr.

City State Zip Code
Monroe LA 71201-2218

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

Name of Employer Occupation
Financial Planning Resources Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437605713999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Andrew M. LaRocco

Mailing Address 5880 Live Oak Parkway, # 230

City State Zip Code
Norcross GA 30093-1740

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

Name of Employer Occupation
The LaRocco Companies Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437640913999

Amount of Each Receipt this Period
40.00

Memo Item

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 150 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Steven Israel

Mailing Address 4204 Manor Forest Trail

City State Zip Code
Boynton Beach FL 33436-8851

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

Name of Employer Occupation
S. Florida Affiliated Health Insurers, Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
511.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437654413999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Mark Rose

Mailing Address 11225 SE 6 Th St Suite 110

City State Zip Code
Bellevue WA 98004-6478

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

Name of Employer Occupation
The Partners Group Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437657713999

Amount of Each Receipt this Period
170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Dominic Siciliano

Mailing Address 4500 Cascade Road SE Suite 106

City State Zip Code
Grand Rapids MI 49546-3665

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

Name of Employer Occupation
Benefit Profiles, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437669513999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 242.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial) A. Marcie Strouse		Date of Receipt 08 / 31 / 2016 Transaction ID : PR437683113999
Mailing Address 1501 Ingersoll Ave Ste 200		Amount of Each Receipt this Period 42.00
City Des Moines	State IA	Zip Code 50309-3102
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Prisma Strategies	Occupation Broker	P/R Deduction (\$42.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) B. Dianne M. Kelley		Date of Receipt 08 / 31 / 2016 Transaction ID : PR437684513999
Mailing Address 7320 N La Cholla Blvd. Suite 154-219		Amount of Each Receipt this Period 50.00
City Tucson	State AZ	Zip Code 85741-2309
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Sandbrook Benefits Group, LLC	Occupation Broker	P/R Deduction (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Arthur Granado		Date of Receipt 08 / 31 / 2016 Transaction ID : PR437693213999
Mailing Address 418 Peoples, # 505		Amount of Each Receipt this Period 85.00
City Corpus Christi	State TX	Zip Code 78401-2350
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer The Granado Group	Occupation Broker	P/R Deduction (\$85.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 168
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Heidi Michaels Mathson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2319 175th Lane NW
 City Andover State MN Zip Code 55304-1444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dyste Williams Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437693513999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Yolanda Marie Webb
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Via Piemonte
 City Ontario State CA Zip Code 91710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Trinity Financial Partners Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437705613999
 Amount of Each Receipt this Period 142.00
 Memo Item
 P/R Deduction (\$142.00 Monthly)

C. Penny E. NIKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 917 S Main St., Ste 200
 City Longmont State CO Zip Code 80501-6400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nikel Insurance Associates LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : PR437728913999
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	202.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 153 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ernest Berry

Mailing Address 5121 69th St., A9A

City Lubbock State TX Zip Code 79424-1631

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

Name of Employer Berry Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437737413999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Teresa Conto

Mailing Address 15800 Crabbs Branch Way #350

City Rockville State MD Zip Code 20855-2697

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

Name of Employer Gallagher Benefit Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1360.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437740813999

Amount of Each Receipt this Period
 170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Leslie A. Williams

Mailing Address 2295 Hilltop Drive Suite 5

City Redding State CA Zip Code 96002-0515

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

Name of Employer Leslie A. Williams Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437742913999

Amount of Each Receipt this Period
 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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

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

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

FOR LINE NUMBER: PAGE 154 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

A. Tommy ABNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 Hereford Drive
 City State Zip Code
 Tupelo MS 38804-9104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Bottrell Agency Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437745813999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Les Perlson
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 Crossways Park Dr
 City State Zip Code
 Woodbury NY 11797-2015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CB Planning Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437767513999
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Kareim R. Cade
 Full Name (Last, First, Middle Initial)
 Mailing Address 28411 Northwestern Hwy., Ste 950
 City State Zip Code
 Southfield MI 48034-5515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Great Lakes Benefit Group Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : PR437778613999
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 155 OF 168
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Julie Hulsey

Mailing Address 6601 I-40 West, Ste. 1
PO Box 32015

City Amarillo State TX Zip Code 79120-2015

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

Name of Employer Insurance Professionals Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437785813999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Gregory J. Schell

Mailing Address 545 South Third Street
Suite 300

City Louisville State KY Zip Code 40202-1936

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

Name of Employer Sterling G. Thompson Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437797613999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Liz Taggart

Mailing Address 8530 Belnor Dr.

City Cicero State NY Zip Code 13039-8845

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

Name of Employer United Healthcare Medicare Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437825113999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 156 OF 168
<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 Underwriters Political Action Committee

A. Debbie R. Hediger
Full Name (Last, First, Middle Initial)

Mailing Address 400 N Tampa St
Suite 1900

City Tampa State FL Zip Code 33602-4776

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

Name of Employer Lykes Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437852413999

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Suzanne Kolterman
Full Name (Last, First, Middle Initial)

Mailing Address 344 Main Street
PO Box 426

City Seward State NE Zip Code 68434-2117

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

Name of Employer Kolterman Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437855213999

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

c. Sher Sparano
Full Name (Last, First, Middle Initial)

Mailing Address 70-20 108th St, #5-0

City Forest Hills State NY Zip Code 11375-4449

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

Name of Employer Benefits Advisory Service Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437859413999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	122.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 157 OF 168
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mike Emidy

Mailing Address P O Box 2021

City State Zip Code
Ridgeland MS 39158-2021

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

Name of Employer Occupation
Colonial Life Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR437878313999

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jessica Fulginiti Waltman

Mailing Address 10 Doyle Road

City State Zip Code
Wayne PA 19087-3903

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

Name of Employer Occupation
Forward Health Consulting Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt
08 / 31 / 2016
Transaction ID : PR470100113999

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	28645.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address 7300 Chapman Way

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2016

Transaction ID : 10836487

Amount of Each Disbursement this Period

299.72

Memo Item
Credit Card Fees

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2016

Transaction ID : 10836488

Amount of Each Disbursement this Period

89.19

Memo Item
Credit Card Fees

Full Name (Last, First, Middle Initial)

C. PayPal

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2016

Transaction ID : 10836526

Amount of Each Disbursement this Period

855.10

Memo Item
Credit Card Fees

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

1244.01

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

1244.01

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steve Chabot For Congress

Mailing Address 3030 Harrison Ave.

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement
8/24 Local Breakfast

011

Candidate Name

Steven Chabot

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : 10780441

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item
8/24 Local Breakfast

Full Name (Last, First, Middle Initial)

B. ISAKSON VICTORY COMMITTEE

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
8/30 Local Reception

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : 10780442

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item
8/30 Local Reception

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Linda Sanchez

Mailing Address 410 1st St Se
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement
8/23 Local Breakfast

011

Candidate Name

Linda Sanchez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : 10780443

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item
8/23 Local Breakfast

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

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bucshon For Congress

Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement
8/22 Local Meeting

Candidate Name

Larry Bucshon

Office Sought: House
 Senate
 President
State: IN District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2016

Transaction ID : 10780607

Amount of Each Disbursement this Period

1000.00

Memo Item
8/22 Local Meeting

Full Name (Last, First, Middle Initial)

B. Hatch Election Committee Inc

Mailing Address PO Box 3986

City Washington State DC Zip Code 20027

Purpose of Disbursement
Void - Hatch Election Committee Inc-Event not attended.

Candidate Name

Orrin Hatch

Office Sought: House
 Senate
 President
State: UT District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

Transaction ID : 10780942

Amount of Each Disbursement this Period

-5000.00

Memo Item
Void - Hatch Election Committee Inc-Event not attended.

Full Name (Last, First, Middle Initial)

C. Castor For Congress

Mailing Address 301 W Platt Street, #385

City Tampa State FL Zip Code 33606

Purpose of Disbursement
Local August Event

Candidate Name

Kathy Castor

Office Sought: House
 Senate
 President
State: FL District: 11

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2016

Transaction ID : 10780944

Amount of Each Disbursement this Period

2000.00

Memo Item
Local August Event

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

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

-2000.00

**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)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mica For Congress

Mailing Address P. O. Box 181546

City Casselberry State FL Zip Code 32718

Purpose of Disbursement
Local August Event

011
Category/
Type

Candidate Name
John Mica

Office Sought: House
 Senate
 President
State: FL District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10780945

Amount of Each Disbursement this Period

Memo Item
Local August Event

Full Name (Last, First, Middle Initial)

B. George Holding For Congress Inc.

Mailing Address PO Box 97187

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
Local August 24th Meeting

011
Category/
Type

Candidate Name
George Holding

Office Sought: House
 Senate
 President
State: NC District: 13

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10780947

Amount of Each Disbursement this Period

Memo Item
Local August 24th Meeting

Full Name (Last, First, Middle Initial)

C. Faso For Congress

Mailing Address PO Box 448

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement
Local August Event

011
Category/
Type

Candidate Name
John Faso

Office Sought: House
 Senate
 President
State: NY District: 19

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10781051

Amount of Each Disbursement this Period

Memo Item
Local August Event

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hall For Congress

Mailing Address 249 E. Ocean Blvd. Suite 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement
Future Comp Event

011

Category/
Type

Candidate Name

Isadore Hall III

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : 10781052

Amount of Each Disbursement this Period

2000.00

Memo Item
Future Comp Event

Full Name (Last, First, Middle Initial)

B. Friends Of John McCain Inc

Mailing Address PO Box 16664

City Arlington State VA Zip Code 22215

Purpose of Disbursement
Future Comp Event

011

Category/
Type

Candidate Name

Mr. John McCain

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : 10781157

Amount of Each Disbursement this Period

1000.00

Memo Item
Future Comp Event

Full Name (Last, First, Middle Initial)

C. Scott Peters For Congress

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
8/19 Local Reception

011

Category/
Type

Candidate Name

Scott Peters

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : 10782133

Amount of Each Disbursement this Period

1000.00

Memo Item
8/19 Local Reception

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marsha Blackburn For Congress, Inc.

Mailing Address PO Box 3750

City State Zip Code
Brentwood TN 37024

Purpose of Disbursement
August Weekend Trip

011

Category/
Type

Candidate Name

Marsha Blackburn

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : 10782134

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Memo Item
August Weekend Trip

Full Name (Last, First, Middle Initial)

B. Mullin For Congress

Mailing Address PO Box 3681

City State Zip Code
Muskogee OK 74402

Purpose of Disbursement
Local 8/29 Meeting

011

Category/
Type

Candidate Name

Rep. Markwayne Mullin

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OK District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : 10782147

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Memo Item
Local 8/29 Meeting

Full Name (Last, First, Middle Initial)

C. Larson For Congress

Mailing Address PO Box 261172

City State Zip Code
Hartford CT 06126

Purpose of Disbursement
Local 8/25 Reception

011

Category/
Type

Candidate Name

John Larson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : 10782149

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Memo Item
Local 8/25 Reception

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

4	0	0	0	0	0
---	---	---	---	---	---

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

4	0	0	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Local 8/10 Event

011
Category/
Type

Candidate Name

Joseph Donnelly

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IN District:

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2016

Transaction ID : 10782168

Amount of Each Disbursement this Period

1000.00

Memo Item
Local 8/10 Event

Full Name (Last, First, Middle Initial)

B. Katko For Congress

Mailing Address PO Box 133

City Camillus State NY Zip Code 13031

Purpose of Disbursement
Local August Meeting

011
Category/
Type

Candidate Name

Rep. John Katko

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 24

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2016

Transaction ID : 10782300

Amount of Each Disbursement this Period

1000.00

Memo Item
Local August Meeting

Full Name (Last, First, Middle Initial)

C. Issa For Congress

Mailing Address PO Box 760

City Vista State CA Zip Code 92085

Purpose of Disbursement
8/19 Lunch

011
Category/
Type

Candidate Name

Darrell Issa

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 48

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2016

Transaction ID : 10782301

Amount of Each Disbursement this Period

1000.00

Memo Item
8/19 Lunch

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

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

3000.00

**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)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brad Ashford For Congress

Mailing Address PO Box 24023

City Omaha State NE Zip Code 68124

Purpose of Disbursement
8/24 Local Breakfast

011
Category/
Type

Candidate Name

Rep. Brad Ashford

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

/ /

Transaction ID : 10783681

Amount of Each Disbursement this Period

Memo Item
8/24 Local Breakfast

Full Name (Last, First, Middle Initial)

B. Drew Ferguson For Congress Inc.

Mailing Address PO Box 387

City West Point State GA Zip Code 31833

Purpose of Disbursement
Local August Event

011
Category/
Type

Candidate Name

Anderson Ferguson IV

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 03

Date of Disbursement

/ /

Transaction ID : 10835349

Amount of Each Disbursement this Period

Memo Item
Local August Event

Full Name (Last, First, Middle Initial)

C. Friends Of Roy Blunt

Mailing Address PO Box 10178

City Columbia State MO Zip Code 65205

Purpose of Disbursement
Local 8/31 Reception

011
Category/
Type

Candidate Name

Roy Blunt

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District:

Date of Disbursement

/ /

Transaction ID : 10835350

Amount of Each Disbursement this Period

Memo Item
Local 8/31 Reception

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Yarmuth For Congress

Mailing Address 1815 Brownsboro Road

City Louisville State KY Zip Code 40202

Purpose of Disbursement
Local 8/29 Meeting

Category/
Type

Candidate Name

John Yarmuth

Office Sought: House
 Senate
 President
State: KY District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10835689

Amount of Each Disbursement this Period

Memo Item
Local 8/29 Meeting

Full Name (Last, First, Middle Initial)

B. Pete Aguilar For Congress

Mailing Address PO Box 10954

City San Bernardino State CA Zip Code 92423

Purpose of Disbursement
Local 8/12 Meeting

Category/
Type

Candidate Name

Rep. Pete Aguilar

Office Sought: House
 Senate
 President
State: CA District: 31

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10835690

Amount of Each Disbursement this Period

Memo Item
Local 8/12 Meeting

Full Name (Last, First, Middle Initial)

C. Randy Hultgren For Congress

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174

Purpose of Disbursement
Local August Meeting

Category/
Type

Candidate Name

Randy Hultgren

Office Sought: House
 Senate
 President
State: IL District: 14

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10836016

Amount of Each Disbursement this Period

Memo Item
Local August Meeting

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Walorski For Congress Inc

Mailing Address PO Box 954

City State Zip Code
Mishawaka IN 46546

Purpose of Disbursement
8/30 Local Reception

011

Category/
Type

Candidate Name

Jackie Walorski

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2016

Transaction ID : 10836017

Amount of Each Disbursement this Period

1000.00

Memo Item
8/30 Local Reception

Full Name (Last, First, Middle Initial)

B. Dold For Congress

Mailing Address PO Box 6312

City State Zip Code
Libertyville IL 60048

Purpose of Disbursement
Local 8/30 Meeting

011

Category/
Type

Candidate Name

Robert Dold Jr

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2016

Transaction ID : 10836206

Amount of Each Disbursement this Period

1000.00

Memo Item
Local 8/30 Meeting

Full Name (Last, First, Middle Initial)

C. Steve Chabot For Congress

Mailing Address 3030 Harrison Ave.

City State Zip Code
Cincinnati OH 45211

Purpose of Disbursement
Comp Event

011

Category/
Type

Candidate Name

Steven Chabot

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2016

Transaction ID : 10836207

Amount of Each Disbursement this Period

1000.00

Memo Item
Comp Event

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Congressman Joe Barton Committee

Mailing Address P.O. Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement
Local 9/2 Event

Category/
Type

Candidate Name
Joe Barton

Office Sought: House
 Senate
 President
State: TX District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10836245

Amount of Each Disbursement this Period

Memo Item
Local 9/2 Event

Full Name (Last, First, Middle Initial)

B. The Walberg Victory Fund

Mailing Address PO BOX 1362

City Jackson State MI Zip Code 49204

Purpose of Disbursement
Local 9/9 Reception

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10836317

Amount of Each Disbursement this Period

Memo Item
Local 9/9 Reception

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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