NAME OF		E OR PRINT		ample: If ty	oing, type	12FE4M5	Office Use Only
COMMITTEE (in f	,			er the lines.			
lealth Net, Inco							
DRESS (number and		55 Capitol Mall,	Suite 600				
Check if diffe							
than previous reported. (AC		Sacramento				CA	95814
FEC IDENTIFICA	TION NUMB	ER 🔻	CITY 🔺		S		ZIP CODE
C C00230789			3. IS THIS REPORT	×	NEW (N) OR	AME (A)	ENDED
(Choose One) (a) Quarterly Repo	,	(b) Monthly Report Due On:	 Feb 20 (M2 Mar 20 (M3 Apr 20 (M4)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep 2	0 (M8) Nov 20 (M (Non-Election Year Only) 0 (M9) Dec 20 (M (Non-Election Year Only) 0 (M10) Jan 31 (YE
July 15 Quarterly October 1 Quarterly	Report (Q3)	(c) 12-Day PRE -E Report		Primary (12 Convention		General (1 Special (12	
July 31 M Report (N Year Only	Report (YE) lid-Year lon-election r) (MY)		Election on Election for the:	General (3	0G)	Runoff (30	State of
(TER)	on Report		Election on	M = M	/ D D /	Y Y Y Y	in the State of
Covering Period	01	01 /	2014	through	M M 01	/ D D / 31	2014
ertify that I have exa pe or Print Name of		eport and to th Thomas W. Hilta	-	owledge and	I belief it is tru	e, correct and	complete.
nature of Treasurer	Thomas W	. Hiltachk		[Electronica	dlv Filed 1	ate 02	/ D D / Y Y Y 14 2014

02/20/2014 15 : 06

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

•	C FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		
ŀ	lealth Net, Incorporated Political A	ction Committee	
R	eport Covering the Period: From: 01	M / D D / Y Y Y Y 01 2014	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		103806.96
	(b) Cash on Hand at Beginning of Reporting Period	103806.96	
	(c) Total Receipts (from Line 19)	11879.09	11879.09
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	115686.05	115686.05
7.	Total Disbursements (from Line 31)	3500.00	3500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	112186.05	112186.05
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

×

Image#	14960466801
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DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Health Net, Incorporated Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	3270.76	3270.76
		0000.00
(ii) Unitemized	8608.33	8608.33
(iii) TOTAL (add	11879.09	11879.09
Lines 11(a)(i) and (ii)▶	7 7 7 11079.09	7 7 7 7 11079.03
(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)	11879.09	11879.09
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
3. All Loans Received	7 7	
	0.00	
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		7
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
	0.00	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))►	11879.09	11879.09
0. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►	11879.09	11879.09

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
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b)) ►	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	3500.00	3500.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d))	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	3500.00	3500.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	3500.00	3500.00
	7 7 7	7

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DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	11879.09	11879.09
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	11879.09	11879.09
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

		category of the Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Health Net, Incorporated Poli	ical Action Commit	tee	
Full Name (Last, First, Middle Initial) Pamela Ann Bohall Mailing Address 2025 Aerojet Road City Rancho Cordova FEC ID number of contributing federal political committee. Name of Employer Health Net Federal Services, Inc. Receipt For: 2014 Yennary General Other (specify)	State Zip Co CA 95742 C Occupation VP, Claims Admin & Er Aggregate Year-to-Dat	nroll Svcs	Date of Receipt
Full Name (Last, First, Middle Initial) Paul A. Gilbertson Mailing Address 2025 Aerojet Road City Rancho Cordova FEC ID number of contributing federal political committee. Name of Employer Health Net Federal Services, Inc. Receipt For: 2014 Primary General Other (specify) ▼	State Zip Co CA 95742 C Occupation Operations Officer Aggregate Year-to-Dat		Date of Receipt
Full Name (Last, First, Middle Initial) C. Steven J. Sell Mailing Address 2370 Kerner Blvd. City San Rafael FEC ID number of contributing federal political committee. Name of Employer Health Net, Inc. Receipt For: 2014 Yerimary General Other (specify)	State Zip Co CA 94901 C Occupation President, West Region Aggregate Year-to-Dat	n Health Plan	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			

Form/Schedule: SA11AI Transaction ID : INCA30215

Payroll Deduction

Form/Schedule: SA11AI Transaction ID: INCA30244 Payroll Deduction

Form/Schedule: SA11AI Transaction ID : INCA30304

Payroll Deduction

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 9 OF

			Detailed Summary Page		11a 13		11b 14	11c	12	17					
			I ay not be sold or used by any p iddroop of any political committee		or the		pose of a	soliciting	contribu	tions					
· · · · · · · · · · · · · · · · · · ·	al purposes, other than usin OMMITTEE (In Full)	ig the name and a	ddress of any political committee	ະເບSO	IICIT CO	מוזוו	utions fr	om sucr	Commit	lee.					
	et, Incorporated Po	litical Action	Committee												
Full Name (La A. Virgina E.	ast, First, Middle Initial) White			Date of Receipt											
	ess 10540 White Rock Road	l, Suite 280		01 03 2014											
City		State	Zip Code		Transaction ID : INCA30321										
Rancho Cord	lova	CA	95670		Amount of Each Receipt this Period										
FEC ID numb federal politic	per of contributing al committee.	C					,	- 7	200	0.00					
Name of Emp	-	Occupation													
Health Net, In		VP, Operat	ions												
Receipt For: Primary		Aggregate	Year-to-Date ▼												
	specify)		600.00												
Full Name (La B. Gay Ann \	ast, First, Middle Initial) Williams		Date o	f Re	ceipt										
Mailing Addre	ess 21650 Oxnard Street														
City		State	Zip Code	_	01	۰.	03		2014						
Woodland Hil	lls	CA	91367				on ID : I								
		0,1	51507	′	Amoun	t oi	Each Re	eceipt tri	is Period	_					
federal politic		C					7	7	100	.00					
Name of Emp Health Net, In	,	Occupation	eg & Reg Compliance												
Receipt For:	2014		Year-to-Date ▼												
Primary	General	Aggregate		11.											
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Full Name (La C. James E.	ast, First, Middle Initial) . Woys				Date o	f Re	ceipt								
	ess 2025 Aerojet Road				м м 01	/	03	/ Y	ү ү 2014	Y					
City		State	Zip Code		Trans	sact	ion ID : I	NCA303	324						
Rancho Cord	lova	CA	95742	/	Amoun	t of	Each Re	eceipt th	is Period						
FEC ID numb federal politic	per of contributing al committee.	C					7	- 7	205	5.00					
Name of Emp	oloyer	Occupation	1												
Health Net Fe	ederal Services, Inc	EVP & CO	C												
Receipt For:		Aggregate	Year-to-Date ▼												
Primary			045.00	11.											
X Other (s	specify) 🔻		615.00	4											
SUBTOTAL of	Receipts This Page (option	al)		•					505	.00					
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Form/Schedule: SA11AI Transaction ID : INCA30321

Payroll Deduction

Form/Schedule: SA11AI Transaction ID: INCA30322 Payroll Deduction

Form/Schedule: SA11AI Transaction ID : INCA30324

Payroll Deduction

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 12 OF

			Detailed Summary Page		< 11a 13	\vdash	11b 14	11c		12 16	17			
	y information copied from such Reports and S for commercial purposes, other than using the				for the			soliciti		ontribut	tions			
	NAME OF COMMITTEE (In Full) Health Net, Incorporated Politic	al Action	Committee											
A .	Full Name (Last, First, Middle Initial) Roupen Berberian				Date of Receipt									
	Mailing Address 21650 Oxnard Street			01 / Y Y Y Y Y 01 10 2014										
	City Woodland Hills	State CA	Zip Code 91367		Trans Amount			INCA3 Receipt						
	FEC ID number of contributing federal political committee.	С					,	7	_	1000	.00			
	Name of Employer	Occupation												
	Health Net, Inc.	VP, Busine	ss Planning & Budget											
	Receipt For: 2014 Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00											
в.	Full Name (Last, First, Middle Initial) Pamela Ann Bohall		Date of	Re	eceipt									
	Mailing Address 2025 Aerojet Road		01 / Y Y Y Y 01 17 2014											
	City	State	Zip Code		Trans	acti	on ID :	INCA3	0339					
	Rancho Cordova	CA	95742	_	Amount	t of	Each F	Receipt	this F	Period				
	FEC ID number of contributing federal political committee.				,			76.	.92					
	Name of Employer Health Net Federal Services, Inc.	Occupation VP, Claims	Admin & Enroll Svcs											
	Receipt For: 2014 Primary General X Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76											
с.	Full Name (Last, First, Middle Initial) Paul A. Gilbertson				Date of	Re	eceipt							
	Mailing Address 2025 Aerojet Road				м м 01	/	D 17			014	Y			
	City Rancho Cordova	State CA	Zip Code 95742		Trans Amount			INCA3 Receipt						
	FEC ID number of contributing federal political committee.	С					,		_	75	.00			
	Name of Employer	Occupation												
	Health Net Federal Services, Inc.	Operations	Officer											
	Receipt For: 2014	Aggregate	Year-to-Date ▼											
	Primary General X Other (specify) ▼													
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Form/Schedule: SA11AI Transaction ID : INCA30339

Payroll Deduction

Form/Schedule: SA11AI Transaction ID: INCA30368 Payroll Deduction

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE 14 OF

			Detailed Summary Page		11a 13		11b 14	11c	12 16	17					
Ar or	y information copied from such Reports and for commercial purposes, other than using th	Statements manual and a	ay not be sold or used by any p address of any political committe	erson f	or the	pur ntrib	pose of outions f	soliciting	g contrib	utions					
$\left\rangle$	NAME OF COMMITTEE (In Full) Health Net, Incorporated Politic														
A.	Full Name (Last, First, Middle Initial) Steven J. Sell	teven J. Sell													
	Mailing Address 2370 Kerner Blvd.				01 / Y Y Y Y 01 17 2014										
	City San Rafael	State CA	Zip Code 94901	<i>A</i>				INCA304 Receipt th		ł					
	FEC ID number of contributing federal political committee.	С					,	7	10	0.00					
	Name of Employer Health Net, Inc.	Occupation President,	n West Region Health Plan												
	Receipt For: 2014 Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]											
в.	Full Name (Last, First, Middle Initial) Virgina E. White		Date o	f Re	eceipt										
	Mailing Address 10540 White Rock Road, Sui				01 / Y Y Y Y 01 17 2014										
	City Rancho Cordova	State CA	Zip Code 95670	Transaction ID : INCA30445 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C			Amoun	tot	Each F	receipt tr		2 0.00					
	Name of Employer Health Net, Inc.	Occupation VP, Operat													
	Receipt For: 2014 Primary General X Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00]											
C.	Full Name (Last, First, Middle Initial) Gay Ann Williams				Date o	f Re	eceipt								
	Mailing Address 21650 Oxnard Street				м м 01	/	D 17		ү ү 2014	Y					
	City Woodland Hills	State CA	Zip Code 91367					INCA30 Receipt th		ł					
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	Health Net, Inc.	VP State L	eg & Reg Compliance												
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Payroll Deduction

Form/Schedule: SA11AI Transaction ID: INCA30445 Payroll Deduction

Form/Schedule: SA11AI Transaction ID : INCA30446

Payroll Deduction

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE 17 OF

			Detailed Summary Page		X 11a		11b	11c		12						
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\backslash	NAME OF COMMITTEE (In Full)		o : <i>u</i>													
/	Health Net, Incorporated Politic	al Action	Committee													
Α.	Full Name (Last, First, Middle Initial) James E. Woys				Date of	Re	ceipt									
	Mailing Address 2025 Aerojet Road				M M		D	/	Y Y	Y	Y					
					01		17		2	014						
	City	State	Zip Code		Trans	acti	on ID :	INCA3	0448							
	Rancho Cordova	CA	95742	_	Amount	of	Each F	Receipt	this F	Period						
	FEC ID number of contributing federal political committee.	С					Ţ	. ,	_	205.	.00					
	Name of Employer	Occupation														
	Health Net Federal Services, Inc	EVP & COO)													
	Receipt For: 2014	Aggregate	Year-to-Date 🔻													
	Primary General		615.00													
в.	Full Name (Last, First, Middle Initial) Pamela Ann Bohall	Date of Receipt														
	Mailing Address 2025 Aerojet Road				M = M / D = D / Y = Y = Y											
					01		31		20	014						
	City	State	Zip Code		Transa	acti	on ID :	INCA3	0459							
	Rancho Cordova	CA	95742	_	Amount	of	Each F	Receipt	this F	^o eriod						
	FEC ID number of contributing	С								76.	92					
	federal political committee.				-	7	7	_								
	Name of Employer	Occupation														
	Health Net Federal Services, Inc.	VP, Claims	Admin & Enroll Svcs													
	Receipt For: 2014	Aggregate	Year-to-Date ▼													
	Primary General		230.76													
				1												
~	Full Name (Last, First, Middle Initial) Paul A. Gilbertson				Dete -1	Dr	agint									
C.	Mailing Address 2025 Aerojet Road				Date of	нe			V	Y	V					
					01	<i>'</i>	31	5 /		014	Y					
	City	State	Zip Code		Trans	act	ion ID :	INCA3	0488		_					
	Rancho Cordova	CA	95742	_	Amount	of	Each F	Receipt	this F	Period						
	FEC ID number of contributing federal political committee.	С					9		_	75	.00					
	Name of Employer	Occupation														
	Health Net Federal Services, Inc.	Operations	Officer													
	Receipt For: 2014	Aggregate	Year-to-Date 🔻													
	Primary General		225.00													
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Form/Schedule: SA11AI Transaction ID : INCA30448

Payroll Deduction

Form/Schedule: SA11AI Transaction ID: INCA30459 Payroll Deduction

Form/Schedule: SA11AI Transaction ID : INCA30488

Payroll Deduction

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b	\vdash	11c		12 16	17			
Ar	y information copied from such Reports and Si	tatements ma	ay not be sold or used by any pe	erson f	or the	pur	pose	of s	oliciting	con	ntributi	ons			
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committee	e to sol	licit co	ntrib	outions	s fro	om such	i con	nmitte	е.			
	Health Net, Incorporated Politica	al Action	Committee												
Α.	Full Name (Last, First, Middle Initial) Steven J. Sell			Date of Receipt											
	Mailing Address 2370 Kerner Blvd.				м м 01	/	3	D 31	/ Y	ү 20	Y 14	Y			
	City	State	Zip Code		Trans	sact	ion ID): IN	NCA305	48		_			
	San Rafael	CA	94901	/	Amoun	t of	Each	Re	ceipt th	is Pe	əriod				
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	Name of Employer	Occupation													
	Health Net, Inc.	President, V	Vest Region Health Plan												
	Receipt For: 2014	Aggregate	Year-to-Date ▼												
	Other (specify) ▼														
в.	Full Name (Last, First, Middle Initial) Virgina E. White		Date o	f Re	eceipt										
	Mailing Address 10540 White Rock Road, Suite 280						01 31 2014								
	City	State	Zip Code		Trans	acti	ion ID) : IN	ICA305	65					
	Rancho Cordova	CA	95670	/	Amoun	t of	Each	Ree	ceipt thi	is Pe	əriod				
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	Health Net, Inc.	VP, Operati	ons												
	Receipt For: 2014	Aggregate	Year-to-Date ▼												
	Primary General → Other (specify) →		600.00												
			, , , , , , , , , , , , , , , , , , , ,												
с.	Full Name (Last, First, Middle Initial) Gay Ann Williams				Date o	f Re	eceipt								
	Mailing Address 21650 Oxnard Street				м м 01	/		D 31	/ Y	y 201	ү 14	Y			
	City	State	Zip Code						NCA305						
	Woodland Hills	CA	91367	/	Amoun	t of	Each	Red	ceipt th	is Pe	əriod				
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	Name of Employer	Occupation		\neg											
	Health Net, Inc.	VP State Le	eg & Reg Compliance												
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Form/Schedule: SA11AI Transaction ID : INCA30548

Payroll Deduction

Form/Schedule: SA11AI Transaction ID: INCA30565 Payroll Deduction

Form/Schedule: SA11AI Transaction ID : INCA30566

Payroll Deduction

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			Detailed Summary Page		11a 13		11b 14	11c	12	17					
	formation copied from such Reports and Sta commercial purposes, other than using the				or the		pose of	soliciting	g contribu	tions					
∖ NA	ME OF COMMITTEE (In Full) ealth Net, Incorporated Politica														
	Name (Last, First, Middle Initial) mes E. Woys				Date of Receipt										
	Mailing Address 2025 Aerojet Road					01 31 2014									
City	•	State Zip Code					Transaction ID : INCA30568								
	ancho Cordova	CA	95742	A	Amount of Each Receipt this Period										
	C ID number of contributing eral political committee.	С			205	5.00									
	me of Employer alth Net Federal Services, Inc	Occupation EVP & COC													
	ceipt For: 2014	Aggregate	Year-to-Date ▼												
\succ	Primary General		615.00]											
Ful B.	I Name (Last, First, Middle Initial)			Date of	f Re	eceipt									
	Mailing Address														
City	/	Zip Code		Amount of Each Receipt this Period											
	C ID number of contributing eral political committee.	С													
Na	me of Employer	Occupation													
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼]		_									
Ful C.	I Name (Last, First, Middle Initial)				Date of	f Re	eceipt								
	Mailing Address					/	D D) / Y	YYY	Y					
City	/		mound	t of	Each P	eceint th	nis Period								
	C ID number of contributing eral political committee.	С			Amount of Each Receipt this Perio										
Na	me of Employer	Occupation													
Re	ceipt For:	Aggregate	Year-to-Date ▼												
	Other (specify)		y]											
SUB.	TOTAL of Receipts This Page (optional)			<u> </u>	-	-	y 1	7	205	.00					
тоти	AL This Period (last page this line number o	nly)		► [_		7		3270	.76					

Form/Schedule: SA11AI Transaction ID : INCA30568

Payroll Deduction

SC	HEDULE B (FEC Form 3X)				LINE NUMBER: PAGE 25 OF 25											
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	⁵⁾ ((chec	k only											
		Detailed Summary Page		-	21b 27	22 28a	×	23 28b	$\left - \right $	24 28c		25 29	26 30b			
	y information copied from such Reports and Staten for commercial purposes, other than using the name															
$\left \right\rangle$	NAME OF COMMITTEE (In Full)															
	Health Net, Incorporated Political A	Action Committee														
Α.	Full Name (Last, First, Middle Initial) Bera for Congress							Date of Disbursement								
	Mailing Address P.O. Box 582496						01 13 2014									
	City State Zip Code Elk Grove CA 95758							Transaction ID : EXPB30327								
	Purpose of Disbursement	011 00100				-										
	Monetary Contribution			011		Amount of Each Disbursement this Period										
	Candidate Name Amerish Bera			tego Type		2500.00										
		ment For: 2014		ype												
		Primary General														
	State: CA District: 07	Other (specify)														
	Full Name (Last, First, Middle Initial)															
В.	Roskam for Congress Committee						Date of Disbursement									
	Meiling Address D.O.D. 740						01 / D D / Y Y Y Y 01 30 2014									
	Mailing Address P.O. Box 713															
	City S Wheaton	State Zip Code IL 60187				Transaction ID : EXPB30329										
	Purpose of Disbursement Monetary Contribution 011						nt of	Each	Dich	urcon	oont ti	nie De	riod			
	Candidate Name			n/	Amount of Each Disbursement this Period											
	Peter Roskam		ego ype				7			1	000.0	0				
	Senate X	nent For: 2014 Primary General														
	State: IL District: 06	Other (specify)														
~	Full Name (Last, First, Middle Initial) Mailing Address							abura								
C.								Date of Disbursement								
	City State Zip Code															
	Purpose of Disbursement															
	Candidate Name				ry/	Amount of Each Disbursement this Period										
	Office Sought: House Disburser Senate	nent For: Primary General						, -								
		Other (specify)														
	State: District:															
e	UBTOTAL of Disbursements This Page (optional)										3	500.0	0			
Ľ	CETTE OF ENDERSEMENTS THIS FAGE (OPTIONAL)				•	-	÷	,		7	-					
Т	OTAL This Period (last page this line number only))						7	_	7	3	500.0	0			