

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) 2000 14TH ST ARLINGTON VA 22201

Check if different than previously reported. (ACC)

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, 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 Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, Runoff, Special

5. Covering Period 08 01 2008 through 08 31 2008

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 Electronically Filed by Jennifer Murphy Date 09 19 2008

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

Table with 8 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		51869.19
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	65293.41									
(c) Total Receipts (from Line 19)	32936.11	235525.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	98229.52	287394.27								
7. Total Disbursements (from Line 31)	35308.76	224898.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62920.76	62495.76								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	20887.18	124451.72
(i) Itemized (use Schedule A)	12038.00	108983.45
(ii) Unitemized	32925.18	233435.17
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	32925.18	233435.17
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	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	10.93	89.91
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	32936.11	235525.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32936.11	235525.08

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1108.76	5750.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1108.76	5750.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	187500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2455.00
(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	2455.00
29. Other Disbursements.....	25700.00	29193.28
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35308.76	224898.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35308.76	224898.51

DETAILED SUMMARY PAGE
of Disbursements

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	32925.18	233435.17
34. Total Contribution Refunds (from Line 28(d))	0.00	2455.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32925.18	230980.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1108.76	5750.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1108.76	5750.23

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

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

FOR LINE NUMBER: PAGE 6 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Suzetta E. Alberts

Mailing Address 201W. Fort Street, Mail Code 7969

City State Zip Code
Detroit MI 48226

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

Name of Employer Occupation
Comerica Insurance Services Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10474

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Dulcinea M. Almazan

Mailing Address 10700 Amber Ridge Dr

City State Zip Code
Las Vegas NV 89144-4448

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

Name of Employer Occupation
Lovitt & Touche, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10707

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Laurie C. Anderson

Mailing Address 5703 Red Bug Lake Rd # 321

City State Zip Code
Winter Springs FL 32708-4969

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

Name of Employer Occupation
Working Well Connection Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2008

Transaction ID: 7831

Amount of Each Receipt this Period
365.00

SUBTOTAL of Receipts This Page (optional) ► 425.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 7 / 117
(check only one)
 11a 11b 11c 12
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
 William Chester Anderson
 Mailing Address 205 Whippoorwill Dr
 City State Zip Code
 Altamonte Springs FL 32701-7827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rogers Benefit Group Marketing Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00
 Date of Receipt MM / DD / YYYY
08 / 28 / 2008
Transaction ID: 7888-P10892
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
 Mary Kathryn Anderson-Haught
 Mailing Address 512 Cambridge Rd
 City State Zip Code
 Tyler TX 75703-5264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Strategies In Employee Benefits, Inc. agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00
 Date of Receipt MM / DD / YYYY
08 / 28 / 2008
Transaction ID: 7888-P10893
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10.00 Monthly)

C. Full Name (Last, First, Middle Initial)
 Elizabeth Ashmore
 Mailing Address 6102 82nd St # 6
 City State Zip Code
 Lubbock TX 79424-3690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ashmore & Associates Insurance Agency agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00
 Date of Receipt MM / DD / YYYY
08 / 28 / 2008
Transaction ID: 7888-P10768
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) 140.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Ginger T. Ashton-Vernon

Mailing Address 3702 Alton Rd SW

City State Zip Code
Roanoke VA 24014-3004

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

Name of Employer Occupation
Lewis-Gale Medical Center Director of Provider Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10835
Amount of Each Receipt this Period: 40.00
Payroll Deduction: (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Misty J. Baker

Mailing Address 502 Brookside Pass

City State Zip Code
Cedar Park TX 78613-4237

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

Name of Employer Occupation
Lonestar Benefit Solutions Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10690
Amount of Each Receipt this Period: 30.00
Payroll Deduction: (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Diane L. Barton

Mailing Address 2732 Kerry Ln

City State Zip Code
Oklahoma City OK 73120-2810

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

Name of Employer Occupation
Blue Cross Blue Shield of OK Account Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10739
Amount of Each Receipt this Period: 30.00
Payroll Deduction: (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Kathryn A. Beals	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5151 W River Rd	Transaction ID: 7888-P11036
	City State Zip Code Waunakee WI 53597-9523	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$55.00 Monthly)
	Name of Employer: Wisconsin Manufactures & Commerce Occupation: Manager, Employee Benefit Sale Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) Ann C. Bell	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 2171 S Pebblecreek Ln	Transaction ID: 7888-P10728
	City State Zip Code Boise ID 83706-6123	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)
	Name of Employer: self employed Occupation: agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Bruce D. Benton	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 20161 Delita Dr	Transaction ID: 7888-P10894
	City State Zip Code Woodland Hills CA 91364-3521	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$85.00 Monthly)
	Name of Employer: Genesis SmithBenton Insurance & Finan Occupation: Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 117
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 8805 Sawleaf Rd

City Indianapolis State IN Zip Code 46260-1534

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

Name of Employer Neace Lukens Holding Company, Inc. Occupation agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P11037

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$60.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jason Beyrouy

Mailing Address 1011 Commercial St NE Ste 135

City Salem State OR Zip Code 97301-1049

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

Name of Employer Benefit Advisors, LLC Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 07 / 2008

Transaction ID: 7746

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
C. Sue Bisbee

Mailing Address 4211 Parsifal St NE

City Albuquerque State NM Zip Code 87111-3374

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

Name of Employer Infinisource, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P11055

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 590.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 117
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Robert J Bishop

Mailing Address 2785 E Desert Inn Rd Ste 260

City State Zip Code
Las Vegas NV 89121-3693

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

Name of Employer Occupation
KIA Insurance President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **674.72**

Date of Receipt **08 / 28 / 2008**

Transaction ID: 7887-P10442

Amount of Each Receipt this Period **84.34**

Payroll Deduction
(\$84.34 Monthly)

B.

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

Mailing Address 2205 Abbeywood Rd

City State Zip Code
Lexington KY 40515-1157

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

Name of Employer Occupation
Al Torstrick Insurance Agency, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 28 / 2008**

Transaction ID: 7887-P10711

Amount of Each Receipt this Period **30.00**

Payroll Deduction
(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Russ Blakely

Mailing Address PO Box 11310

City State Zip Code
Chattanooga TN 37401-2310

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

Name of Employer Occupation
Russ Blakely & Associates Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 28 / 2008**

Transaction ID: 7887-P10404

Amount of Each Receipt this Period **30.00**

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **144.34**

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 80 Challedon Dr

City State Zip Code
Candler NC 28715-9417

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

Name of Employer Insurance Specialties, Inc.
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10896

Amount of Each Receipt this Period 20.00

Payroll Deduction (\$20.00 Monthly)

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

Mailing Address 2213A Walnut St

City State Zip Code
Harrisburg PA 17103-2427

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

Name of Employer Lillis, McKibben & Company
Occupation Plan Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.36

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P11038

Amount of Each Receipt this Period 30.42

Payroll Deduction (\$30.42 Monthly)

C. Full Name (Last, First, Middle Initial)
Diane Borrison

Mailing Address 5448 Thornwood Dr Ste 200

City State Zip Code
San Jose CA 95123-1225

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

Name of Employer Advanced Professionals
Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 8 / 2 0 0 8

Transaction ID: 7886-P10339

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 80.42

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 13 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
James C. Bosier

Mailing Address 6410 N Butler Rd

City State Zip Code
Cedar Falls IA 50613-9317

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Net Worth Advisors Account Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10566

Amount of Each Receipt this Period 85.00

Payroll Deduction
 (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Lacy N. Boswell

Mailing Address 6 Guano Dr

City State Zip Code
Ponte Vedra Beach FL 32082-4200

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 AvMed Health Plans Sales Representative

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10567

Amount of Each Receipt this Period 30.00

Payroll Deduction
 (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Eleanor M. Brockhurst

Mailing Address 5812 N 12th St Unit 4

City State Zip Code
Phoenix AZ 85014-2020

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Brockhurst & Associates, Inc. Agent

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10565

Amount of Each Receipt this Period 30.00

Payroll 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) Andrea Brody</p> <p>Mailing Address 6018 E Lowden Rd</p> <p>City State Zip Code Cave Creek AZ 85331-3004</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation United Healthcare Dental Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 8</p> <p>Transaction ID: 7888-P10903</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Walter S Brown</p> <p>Mailing Address 56 Madison St</p> <p>City State Zip Code Gillette NJ 07933-1802</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Employed Insurance Broker</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 595.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 8</p> <p>Transaction ID: 7887-P10487</p> <p>Amount of Each Receipt this Period 85.00</p> <p>Payroll Deduction (\$85.00 Monthly)</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Thomas A. Bryon</p> <p>Mailing Address 10504 Meadow Ln</p> <p>City State Zip Code Leawood KS 66206-2637</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Benefit Designs, Inc. Senior Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 8</p> <p>Transaction ID: 7886-P10316</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
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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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Jennifer Bundy-Cobb
Mailing Address 3000 A St Ste 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 Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10796
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Patrick Charles Burns
Mailing Address 5653 Maxwellton Rd

City Oakland State CA Zip Code 94618-2654

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

Name of Employer Burns Employee Benefits Insurance Ser Occupation Managing Member

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10698
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Michael E. Carmean
Mailing Address 3075 Lee Road 248

City Smiths State AL Zip Code 36877-3125

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

Name of Employer Paragon Marketing Occupation Vice President, Group Sales & Marketi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10899
Amount of Each Receipt this Period 100.00
Payroll Deduction (\$100.00 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Donna Carnall

Mailing Address 413 Interamerica Blvd Ste 1

City Laredo State TX Zip Code 78045-8285

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

Name of Employer Self employed Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7886-P10310

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Lorelei G. Castellani

Mailing Address PO Box 2100

City Branchville State NJ Zip Code 07826-2100

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

Name of Employer Benefit Guidance Systems Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10701

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Russell B. Childers

Mailing Address 402 Rawley Rd

City Americus State GA Zip Code 31719-2150

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

Name of Employer Russ Childers, CLU Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P11025

Amount of Each Receipt this Period 85.00

Payroll 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Jonathan S. Clark

Mailing Address 545 E 4500 S Ste E250

City State Zip Code
Salt Lake City UT 84107-2955

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

Name of Employer Occupation
Western Benefit Planners Agent
Insurance Se

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10436

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
David S. Cluley

Mailing Address 2220 Glen Echo Dr SE

City State Zip Code
Grand Rapids MI 49546-5521

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

Name of Employer Occupation
HealthPlus Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10688

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address 19 Minor Ct

City State Zip Code
San Rafael CA 94903-3716

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

Name of Employer Occupation
Word & Brown Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10451

Amount of Each Receipt this Period
30.00

Payroll 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Martha T. Collins

Mailing Address 1430 Lemonwood Dr W

City Upland State CA Zip Code 91786-2539

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

Name of Employer Martin & Associates Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10571

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
George Scott Condos

Mailing Address 8860 S Tenaya Way

City Las Vegas State NV Zip Code 89113-5502

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

Name of Employer Leavitt Insurance Agency Occupation Charter Senior Financial Plann

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10901

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Troy J. Cook

Mailing Address 6600 Westown Pkwy # 250

City West Des Moines State IA Zip Code 50266-7724

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

Name of Employer Krist Insurance Services Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10723

Amount of Each Receipt this Period 30.00

Payroll 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Carrie Cox

Mailing Address 3621 Eastman Dr

City State Zip Code
Oklahoma City OK 73112-1439

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

Name of Employer Occupation
Oden Roberts Rohrman Insurance Group Benefits Manager

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 8 / 2 0 0 8

Transaction ID: 7888-P11056

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Johnny Lee Dawkins

Mailing Address PO Box 53809

City State Zip Code
Fayetteville NC 28305-3809

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

Name of Employer Occupation
Ebenconcepts President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 8

Transaction ID: 7743

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Johnny Lee Dawkins

Mailing Address PO Box 53809

City State Zip Code
Fayetteville NC 28305-3809

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

Name of Employer Occupation
Ebenconcepts President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7886-P10356

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 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 20 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

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

Mailing Address 5441 Edgerton Dr

City State Zip Code
Norcross GA 30092-2185

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

Name of Employer Occupation
DeBruin Benefit Services Agent

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 8 / 2 0 0 8

Transaction ID: 7887-P10693

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Paul F. Deininger

Mailing Address 123 Windward Way

City State Zip Code
Indian Harbour Be FL 32937-5312

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

Name of Employer Occupation
Deininger Benefits Advisors, Inc. Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 8

Transaction ID: 7739

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
David Deitch

Mailing Address 2785 E Desert Inn Rd Ste 260

City State Zip Code
Las Vegas NV 89121-3693

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

Name of Employer Occupation
KIA Insurance Agent

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 8 / 2 0 0 8

Transaction ID: 7887-P10419

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Stephanie Denz
 Mailing Address 1808 Hickory Trace Dr
 City State Zip Code
 Orange Park FL 32003-8387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Gallagher Benefit Services, Inc. Senior Benefit Consultant
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 8 / 2 0 0 8
Transaction ID: 7887-P10548
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Lisa S. DeRycke
 Mailing Address 4154 E 38th St
 City State Zip Code
 Tulsa OK 74135-2502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Benefit Designs of Oklahoma, Inc. Agent
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 8 / 2 0 0 8
Transaction ID: 7887-P10663
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Rush David Dixon
 Mailing Address 1375 Piccard Dr
 City State Zip Code
 Rockville MD 20850-4311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Early Cassidy and Schilling VP of Employee Benefits
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1260.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 8 / 2 0 0 8
Transaction ID: 7887-P10467
 Amount of Each Receipt this Period
 120.00
 Payroll Deduction
 (\$120.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **180.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Steve H. Dodder
Mailing Address PO Box 2069
City Monument State CO Zip Code 80132-2069
FEC ID number of contributing federal political committee. **C**
Name of Employer Assurant Health Occupation Regional Sales Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10789
Amount of Each Receipt this Period 60.00
Payroll Deduction (\$60.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Claudia S. Dodge
Mailing Address 606 Wexwood Ct
City Richmond State VA Zip Code 23236-4138
FEC ID number of contributing federal political committee. **C**
Name of Employer BB&T Benefit Consultants of Virginia Occupation Sales Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10695
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Cynthia H. Doucet
Mailing Address 206 Bon Mange Cir
City Lafayette State LA Zip Code 70506-3748
FEC ID number of contributing federal political committee. **C**
Name of Employer Global Financial Resources, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10878
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Joseph F. Dowd
Mailing Address 106 S Princeton Ave
City State Zip Code
Wenonah NJ 08090-1937
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Kistler-Tiffany Benefits Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10312
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Betty R. Doyle
Mailing Address 3304 Cedar Valley Rd
City State Zip Code
Moore OK 73170-7929
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Doyle Insurance Source Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11005
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Dana Drake
Mailing Address 706 N 19th St
City State Zip Code
Coeur D Alene ID 83814-5549
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Schedler Mack Insurance, Inc. Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11006
Amount of Each Receipt this Period 30.00
Payroll 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 24 / 117

(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

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)

Tonya D. Draughon

Mailing Address 19252 SW 3rd Ct

City State Zip Code
Pembroke Pines FL 33029-5416

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

Name of Employer Occupation
Renaissance Life & Health Market Development Manager
Ins. Co.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10417

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Keith M. Duhon

Mailing Address 208 Essex St

City State Zip Code
Lafayette LA 70506-6133

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

Name of Employer Occupation
The Family Insurance Cent- Agent
er, Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P11017

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

George S. Dunlap

Mailing Address 2853 104th St

City State Zip Code
Des Moines IA 50322-3814

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

Name of Employer Occupation
Employee Benefit Solutions Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 365.00

Date of Receipt

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

Transaction ID: 7815

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional) ▶

425.00

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 25 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Meredith Beam Dye

Mailing Address 6529 Deane Hill Dr Apt 46

City State Zip Code
Knoxville TN 37919-6011

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

Name of Employer: Abacus Benefits Management, LLC
Occupation: Sales Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10696
 Amount of Each Receipt this Period: 30.00
 Payroll Deduction: (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Bill Eastin

Mailing Address 1504 Hackberry Ave

City State Zip Code
Metairie LA 70001-3318

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

Name of Employer: Powell Financial Inc.
Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 21 / 2008
Transaction ID: 7799
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Eugene Denny Ebersole

Mailing Address 201 Evans Rd Bldg 3 Ste 103A

City State Zip Code
Harahan LA 70123-5230

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

Name of Employer: Ebersole & Associates, Inc.
Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1155.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10401
 Amount of Each Receipt this Period: 170.00
 Payroll Deduction: (\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 26 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Michael A. Embry
Mailing Address 26240 Wacker Dr
City State Zip Code
New Baltimore MI 48051-3306
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Comerica Insurance Services, Inc. VP - Group Benefits Division
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 595.00
Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8
Transaction ID: 7887-P10667
Amount of Each Receipt this Period
85.00
Payroll Deduction
(\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Linda M. Erlenbach
Mailing Address 151 Belcourt Ln
City State Zip Code
Aurora OH 44202-8438
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
L.M. Erlenbach, Inc. Benefits Consultant
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 420.00
Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 1 / 2 0 0 8
Transaction ID: 7807
Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Linda M. Erlenbach
Mailing Address 151 Belcourt Ln
City State Zip Code
Aurora OH 44202-8438
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
L.M. Erlenbach, Inc. Benefits Consultant
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8
Transaction ID: 7888-P11020
Amount of Each Receipt this Period
30.00
Payroll 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 27 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Nicole Fairbairn
Mailing Address 2113 Dakota Dr
City Noblesville State IN Zip Code 46062-9075
FEC ID number of contributing federal political committee. **C**
Name of Employer Creative Insurance Concepts, Inc. Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10697
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jennifer Liane Farrell
Mailing Address 6958 W Juniper Ave
City Peoria State AZ Zip Code 85382-3999
FEC ID number of contributing federal political committee. **C**
Name of Employer Black, Gould & Associates Occupation Sr. Account Executive
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10551
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
David L. Fear
Mailing Address 8340 Conover Dr
City Citrus Heights State CA Zip Code 95610-0812
FEC ID number of contributing federal political committee. **C**
Name of Employer CIMS Strategic Distribution Division Occupation Director of Strategic Distribution
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10883
Amount of Each Receipt this Period 85.00
Payroll 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 28 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Catherine Ficara

Mailing Address 26999 Central Park Blvd

City State Zip Code
Southfield MI 48076-4174

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

Name of Employer Occupation
Austin Financial Group, agent
LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P11060

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
John R. Finch

Mailing Address 201 Price Rd # 227

City State Zip Code
Lexington KY 40511-1995

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

Name of Employer Occupation
Colonial Supplemental Ins- Benefits Representative
urance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10668

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Dennis G. Fletcher

Mailing Address 2510 N Pines Rd Ste 205

City State Zip Code
Spokane WA 99206-7636

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

Name of Employer Occupation
The Fletcher Financial Gr- President
oup

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10490

Amount of Each Receipt this Period
30.00

Payroll 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 29 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)

Lorraine Flint

Mailing Address 12038 Sundial St NE

City State Zip Code
Albuquerque NM 87122-4329

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

Name of Employer Occupation
Flint & Associates, Inc. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10421

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Brenda N. Franklin

Mailing Address 7915 N Hale Ave Ste D

City State Zip Code
Peoria IL 61615-2088

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

Name of Employer Occupation
OSF HealthPlans Group Representative

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 8 / 2 0 0 8

Transaction ID: 7888-P10794

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Robert B. Frazer

Mailing Address 3667 Melrose Cottage Dr

City State Zip Code
Matthews NC 28105-7589

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

Name of Employer Occupation
Rogers Benefit Group Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 8

Transaction ID: 7830

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional) ▶

425.00

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 30 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Robert M Frazer
Mailing Address 1751 Wyngate Cir
City State Zip Code
Mount Pleasant SC 29466-8016
FEC ID number of contributing federal political committee. **C**
Name of Employer SeniorCareUSA,LLC Occupation President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10656
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Linda K. Friedrich
Mailing Address 3011 Crown Pointe Rd
City State Zip Code
Lincoln NE 68506-5168
FEC ID number of contributing federal political committee. **C**
Name of Employer UNICO Financial Services, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11015
Amount of Each Receipt this Period 50.00
Payroll Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Kelly Don Fristoe
Mailing Address 807 8th St Ste 300
City State Zip Code
Wichita Falls TX 76301-3317
FEC ID number of contributing federal political committee. **C**
Name of Employer Financial Partners Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10729
Amount of Each Receipt this Period 30.00
Payroll 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
James S. Garbina
Mailing Address 16510 Summit Dr
City State Zip Code
Omaha NE 68136-4038
FEC ID number of contributing federal political committee. **C**
Name of Employer Harry A. Koch Co. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 680.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11047
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Bruce L. Gardner
Mailing Address 504 Bulian Ln
City State Zip Code
Austin TX 78746-5423
FEC ID number of contributing federal political committee. **C**
Name of Employer Bruce Gardner Insurance & Investments Occupation Registered Representative
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 640.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11048
Amount of Each Receipt this Period 80.00
Payroll Deduction (\$80.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Joy K. Gardner
Mailing Address 10605 Sterling Ridge Way
City State Zip Code
Reno NV 89521-5199
FEC ID number of contributing federal political committee. **C**
Name of Employer Comstock Insurance Agencies, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11049
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 195.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Donald W. Garlitz

Mailing Address 1082 S Slate Canyon Dr

City Provo State UT Zip Code 84606-6455

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

Name of Employer FirstWest Benefit Solutions Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10885

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
G. Russell Garner

Mailing Address 1308 Murraywood Dr

City Columbia State SC Zip Code 29212-1159

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

Name of Employer Self Employed Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10552

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Charles T. Gartlan

Mailing Address 19 Tarworth Ter

City Manchester State NJ Zip Code 08759-6671

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

Name of Employer BenefitPort Mid-Atlantic, LLC Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt 08 / 22 / 2008

Transaction ID: 7825

Amount of Each Receipt this Period 50.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Charles T. Gartlan
Mailing Address 19 Tarworth Ter
City Manchester State NJ Zip Code 08759-6671
FEC ID number of contributing federal political committee. **C**
Name of Employer BenefitPort Mid-Atlantic, LLC Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10553
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
John Philip Garven
Mailing Address 11865 Blue Bayou Dr
City Huntley State IL Zip Code 60142-6764
FEC ID number of contributing federal political committee. **C**
Name of Employer Benico, LTD Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10354
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Jeffrey Wm. Gennaro
Mailing Address 523 W Vista Ave
City Phoenix State AZ Zip Code 85021-7257
FEC ID number of contributing federal political committee. **C**
Name of Employer Capitol Insurance Brokers, Inc. Occupation agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 730.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10657
Amount of Each Receipt this Period 85.00
Payroll 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 34 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Charles J. Giardina
Mailing Address 41 Seven Oaks Rd
City Marrero State LA Zip Code 70072-5059
FEC ID number of contributing federal political committee. **C**
Name of Employer MetLife Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11010
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Patrice Goldfarb
Mailing Address 442 Teaneck Rd
City Ridgefield Park State NJ Zip Code 07660-1516
FEC ID number of contributing federal political committee. **C**
Name of Employer The Employee Benefits Advisors Group Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10554
Amount of Each Receipt this Period 60.00
Payroll Deduction (\$60.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Carolyn L. Goodwin
Mailing Address 4959 Mill Run Rd
City Dallas State TX Zip Code 75244-6530
FEC ID number of contributing federal political committee. **C**
Name of Employer Goodwin Benefits Group, LLC Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10324
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 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 35 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 7305 Pioneers Blvd

City Lincoln State NE Zip Code 68506-7519

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

Name of Employer The Harry A. Koch Company Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P11024

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jerri J. Gregory

Mailing Address 925 Euclid Ave

City Des Moines State IA Zip Code 50313-4027

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

Name of Employer AFLAC Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10886

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 56294 Primrose Cir

City Elkhart State IN Zip Code 46516-1509

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

Name of Employer Page 1 Benefits, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7886-P10385

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 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 36 / 117

(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

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Stephen A. Grim

Mailing Address 2720 Mandolin Place

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer Occupation
Mid-Atlantic Agency, Inc. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 615.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7886-P10349

Amount of Each Receipt this Period

95.00

Payroll Deduction

(\$95.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Robert A Grundman

Mailing Address 7412 Karl Dr

City State Zip Code
Lincoln NE 68516-4368

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

Name of Employer Occupation
Senior Benefit Strategies Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10991

Amount of Each Receipt this Period

40.00

Payroll Deduction

(\$40.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Vincent Guerra

Mailing Address 514 Pettigru St

City State Zip Code
Greenville SC 29601-3117

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

Name of Employer Occupation
The Cason Group, Inc. Agent

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 8 / 2 0 0 8

Transaction ID: 7887-P10431

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 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 37 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Cristy Russell Gupton

Mailing Address 2138 Goodman Lake Rd

City State Zip Code
Morganton NC 28655-7075

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

Name of Employer Occupation
Carolina First Assoc. Broker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
08 / 28 / 2008

Transaction ID: 7887-P10673

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Craig Gussin

Mailing Address 843 Summersong Ct

City State Zip Code
Encinitas CA 92024-5447

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

Name of Employer Occupation
Auerbach & Gussin Insurance & Finance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt
08 / 28 / 2008

Transaction ID: 7887-P10488

Amount of Each Receipt this Period
40.00

Payroll Deduction
(\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Antonio Gutierrez

Mailing Address 12833 Riverdance Dr.

City State Zip Code
Raleigh NC 27613

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

Name of Employer Occupation
Integrated Benefit Solutions, Inc. Broker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
08 / 28 / 2008

Transaction ID: 7887-P10674

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 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 38 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 12833 River Dance Drive

City Raleigh State NC Zip Code 27613

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

Name of Employer Integrated Benefit Solutions, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10676

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Alastair T. Haddow

Mailing Address 7454 Cove Ter

City Sarasota State FL Zip Code 34231-5422

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

Name of Employer Florida Insurance Brokers, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10482

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Anthony W. Halby

Mailing Address 202 Providence Mine Rd Ste 107

City Nevada City State CA Zip Code 95959-2945

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

Name of Employer Halby Insurance Agency Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10465

Amount of Each Receipt this Period 30.00

Payroll 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 39 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Walter T. Hale

Mailing Address 211 E Church St

City State Zip Code
Morrliton AR 72110-3419

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

Name of Employer Occupation
Hawkins Insurance Agency Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10498

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Dwight A. 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
Midwest Insurance Markete- Regional Sales Director
rs of America

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2008

Transaction ID: 7812

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Dwight A. 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
Midwest Insurance Markete- Regional Sales Director
rs of America

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7886-P10389

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 210.00

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 40 / 117

(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

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Myrna S. Harris		Date of Receipt MM / DD / YYYY 08 / 21 / 2008		
	Mailing Address 3 Lawson Ln		Transaction ID: 7804		
	City Asheville	State NC	Zip Code 28806-9687	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 865.00		
Name of Employer Crescent Preferred Provider Organizat		Occupation Chief Operating Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Christopher S. Harrison		Date of Receipt MM / DD / YYYY 08 / 28 / 2008		
	Mailing Address 415 Thorncliff Dr		Transaction ID: 7887-P10555		
	City Fayetteville	State NC	Zip Code 28303-5221	Amount of Each Receipt this Period 410.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 3280.00		
Name of Employer Ebenconcepts Company		Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Payroll Deduction (\$410.00 Monthly)					

C.	Full Name (Last, First, Middle Initial) Gerald G Hartman		Date of Receipt MM / DD / YYYY 08 / 28 / 2008		
	Mailing Address 3822 Gemini Cir		Transaction ID: 7887-P10557		
	City Boise	State ID	Zip Code 83709-4834	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00		
Name of Employer Insurance Network America Inc		Occupation Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Payroll Deduction (\$50.00 Monthly)					

SUBTOTAL of Receipts This Page (optional)	960.00
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 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Sheila H Hartman
Mailing Address 20315 Howard Ct
City Woodland Hills State CA Zip Code 91364-5668
FEC ID number of contributing federal political committee. **C**
Name of Employer Financial Independence Co-mpany Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10558
Amount of Each Receipt this Period 170.00
Payroll Deduction (\$170.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Lori Headley
Mailing Address PO Box 14725
City Portland State OR Zip Code 97293-0725
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthwise Insurance Plan-ning Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10456
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Timothy Hendricks
Mailing Address 1605 S Eucalyptus Ave
City Broken Arrow State OK Zip Code 74012-5995
FEC ID number of contributing federal political committee. **C**
Name of Employer Business Planning Group Of OK Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10799
Amount of Each Receipt this Period 100.00
Payroll Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 300.00
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 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Joseph E. Henehan
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 Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10440
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jon Hicks
Mailing Address 3620 Mountainside Dr
City Colorado Springs State CO Zip Code 80918-5528
FEC ID number of contributing federal political committee. **C**
Name of Employer Hicks Benefit Group Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10559
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Porter W. Hicks
Mailing Address 352 Ridgetop Rd.
City Fleetwood State NC Zip Code 28626
FEC ID number of contributing federal political committee. **C**
Name of Employer Hicks, Kohler & Associates Occupation Partner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10406
Amount of Each Receipt this Period 30.00
Payroll 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 43 / 117

(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

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Timothy K Hicks

Mailing Address 2314 Garrison Place Rd

City State Zip Code
Midlothian VA 23112-4045

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

Name of Employer Occupation
Brown & Brown Ins. Agency Account Executive
of Virginia

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10560

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Richard L Hill

Mailing Address 4435 O St

City State Zip Code
Lincoln NE 68510-1842

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

Name of Employer Occupation
UNICO Financial Services, Agent
Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10764

Amount of Each Receipt this Period
60.00

Payroll Deduction
(\$60.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Dean M Hoffman

Mailing Address 1155 Greenridge Ter

City State Zip Code
Brookfield WI 53045-4558

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

Name of Employer Occupation
Diversified Insurance Ser- Agent
vices, Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10682

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 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 44 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
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 Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10772
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Gloria D. Hopper
Mailing Address 613 Sunnybrook Dr
City Monroe State NC Zip Code 28110-2770
FEC ID number of contributing federal political committee. **C**
Name of Employer Wachovia Insurance Services, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10994
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Kymberly J. Hopwood
Mailing Address 1955 Las Colinas Dr
City Brentwood State CA Zip Code 94513-6601
FEC ID number of contributing federal political committee. **C**
Name of Employer Dealey, Renton & Associates Occupation Account Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10660
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 100.00
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 45 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Greg Horstman
Mailing Address N7940 County Rd E
City State Zip Code
Watertown WI 53094-9535
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
WisconsinRx Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10322
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Michelle S. Howard
Mailing Address 2850 W Grand Blvd
City State Zip Code
Detroit MI 48202-2643
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Health Alliance Plan Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10395
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
A. Watts Huckabee
Mailing Address 611 Forest Ln
City State Zip Code
Rock Hill SC 29730-3720
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Carolina's Insurance Group AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10561
Amount of Each Receipt this Period 30.00
Payroll 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 46 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Lisa L. Iils
Mailing Address 2401 E Mercer Ln
City Phoenix State AZ Zip Code 85028-2527
FEC ID number of contributing federal political committee. **C**
Name of Employer Glass Financial Group Occupation Employee Benefit Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10489
Amount of Each Receipt this Period 35.00
Payroll Deduction (\$35.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jerry D. Jackson
Mailing Address 1017 N Maplewood Ave
City Peoria State IL Zip Code 61606-1035
FEC ID number of contributing federal political committee. **C**
Name of Employer Jackson Financial Services Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 222.50
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10372
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Robert J Jakowchik
Mailing Address 1515 Westholme Ave
City Los Angeles State CA Zip Code 90024-5815
FEC ID number of contributing federal political committee. **C**
Name of Employer Insurance & Financial Services Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 08 / 07 / 2008
Transaction ID: 7731
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 315.00
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 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Leah Anne Janway
Mailing Address 2225 SW 96th St
City Oklahoma City State OK Zip Code 73159-6861
FEC ID number of contributing federal political committee. **C**
Name of Employer Berryhill Insurance Agency, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P11012
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Julia A. Jennings
Mailing Address 2 Lady Slipper Ln
City Marion State MA Zip Code 02738-1294
FEC ID number of contributing federal political committee. **C**
Name of Employer Sylvia & Co. Ins. Agency, Inc. Occupation Vice President, Employee Benef
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 295.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10572
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
R. Allan Jensen
Mailing Address 6060 S Kenton Way
City Englewood State CO Zip Code 80111-5728
FEC ID number of contributing federal political committee. **C**
Name of Employer Self employed Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10902
Amount of Each Receipt this Period 30.00
Payroll 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 48 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 1482 Baron Ct

City State Zip Code
Stone Mountain GA 30087-3037

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

Name of Employer Occupation
David S. Johnson Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10661

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jonathan R. Johnson

Mailing Address 7624 Lillywood Ave

City State Zip Code
Las Vegas NV 89129-5360

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

Name of Employer Occupation
Distinctive Insurance Broker/consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7886-P10307

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address 2684 Heywood Ln

City State Zip Code
Hayes VA 23072-4428

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

Name of Employer Occupation
Corporate Insurance Concepts, Inc. President

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 8 / 2 0 0 8

Transaction ID: 7887-P10416

Amount of Each Receipt this Period
30.00

Payroll 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 49 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Suzanne K. Johnson

Mailing Address 6235 Morrison Blvd Ste 302

City State Zip Code
Charlotte NC 28211-3508

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

Name of Employer Strategic Employee Benefit Services
Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	8

Transaction ID: 7888-P10797

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Kenneth Jones

Mailing Address 13500 Shaker Blvd Apt 502

City State Zip Code
Cleveland OH 44120-1572

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

Name of Employer GBA Solutions
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
0	8	/	2	8	/	2	0	0	8

Transaction ID: 7887-P10533

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Keith Jordano

Mailing Address 12751 Orange Blvd

City State Zip Code
West Palm Beach FL 33412-1413

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

Name of Employer Jordano Insurance Group, Inc.
Occupation President/CEO

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	8	/	2	0	0	8

Transaction ID: 7887-P10463

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Lawrence Kaczmarek

Mailing Address 6711 Berry Rd

City State Zip Code
Ravenna OH 44266-9161

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

Name of Employer: Kaczmarek Insurance Services, Inc. Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P11008
 Amount of Each Receipt this Period: 100.00
 Payroll Deduction: (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Thelma Darlene Kaczmarek

Mailing Address 6711 Berry Rd

City State Zip Code
Ravenna OH 44266-9161

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

Name of Employer: Kaczmarek Ins. Services Agency, Inc. Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P11009
 Amount of Each Receipt this Period: 100.00
 Payroll Deduction: (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
George R Keeling

Mailing Address 1875 N Highway 385

City State Zip Code
Levelland TX 79336-9493

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

Name of Employer: George R. Keeling Insurance Agency Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P11001
 Amount of Each Receipt this Period: 85.00
 Payroll Deduction: (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 285.00

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 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Joseph A. Kelliher
Mailing Address 24 Sawyer Dr
City Salem State VA Zip Code 24153-6810
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefits Group, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10860
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Tamara P Kennedy
Mailing Address 16321 N 105th Way
City Scottsdale State AZ Zip Code 85255-9009
FEC ID number of contributing federal political committee. **C**
Name of Employer Rogers Benefit Group Inc Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10646
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Carolyn J. King
Mailing Address 6 Country Ln
City Sussex State NJ Zip Code 07461-4630
FEC ID number of contributing federal political committee. **C**
Name of Employer New England Financial Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10655
Amount of Each Receipt this Period 30.00
Payroll 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 52 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Laurie J Kirkland

Mailing Address 6601 Glacier Ct

City State Zip Code
Yakima WA 98908-2382

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

Name of Employer Occupation
Conover Insurance, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10534

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Barbara Jean Knox

Mailing Address 318 Calash Run

City State Zip Code
Fort Wayne IN 46845-2104

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

Name of Employer Occupation
Intrahealthsolutions, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10981

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Kay Knutson

Mailing Address 11005 Spain Rd NE

City State Zip Code
Albuquerque NM 87111-1899

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

Name of Employer Occupation
Presbyterian Health Plan VP Medicare Programs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10443

Amount of Each Receipt this Period 85.00

Payroll 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: PAGE 53 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Ross W. Kraft

Mailing Address 21 Jordan Rd

City State Zip Code
New Hartford NY 13413-2311

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

Name of Employer Meridian Group of New York, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 243.36

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10536
Amount of Each Receipt this Period 30.42
Payroll Deduction (\$30.42 Monthly)

B. Full Name (Last, First, Middle Initial)
Mary B. Kramer

Mailing Address 2120 Nelsons Creek Dr

City State Zip Code
Omaha NE 68116-5135

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

Name of Employer Holmes Murphy and Associates, Inc. Occupation Vice President

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

Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10863
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Julian E. Lago

Mailing Address 8104 Bautista Way

City State Zip Code
Palm Beach Garden FL 33418-8178

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

Name of Employer Plastridge Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10364
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 100.42

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 54 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
James A. Lawless
Mailing Address 435 Kingswood
City Lexington State KY Zip Code 40502-1000
FEC ID number of contributing federal political committee. **C**
Name of Employer Lawless Insurance Agency Occupation Owner/Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10537
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
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 & Financial S Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 930.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10970
Amount of Each Receipt this Period 115.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Karen B. Leonard
Mailing Address 8 Shakespeare Rd
City Hackettstown State NJ Zip Code 07840-4707
FEC ID number of contributing federal political committee. **C**
Name of Employer Leonard Financial Group, LLC Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10706
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 175.00
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 55 / 117

(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

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Marilyn Anne Leonard		Date of Receipt MM / DD / YYYY 08 / 28 / 2008		
	Mailing Address 3676 Woodley Dr		Transaction ID: 7886-P10306		
	City San Jose	State CA	Zip Code 95148-2829	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)		
Name of Employer Beacon Ridge Health Insurance Services		Occupation Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

B.	Full Name (Last, First, Middle Initial) Brian W. Liechty		Date of Receipt MM / DD / YYYY 08 / 14 / 2008		
	Mailing Address 120 E Washington St		Transaction ID: 7780		
	City Plymouth	State IN	Zip Code 46563-1744	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)		
Name of Employer KL Benefits		Occupation Benefits Spec			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 720.00			

C.	Full Name (Last, First, Middle Initial) Charles N. Lineberger		Date of Receipt MM / DD / YYYY 08 / 28 / 2008		
	Mailing Address 2927 Berwick Ln		Transaction ID: 7888-P10864		
	City Gastonia	State NC	Zip Code 28054-6055	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)		
Name of Employer Benefit Partners, Inc.		Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

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 56 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Chris Lokken		Date of Receipt
	Mailing Address 2851 W Princeton Ave		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Eau Claire	WI	54703-1343
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Johnson Insurance Services		Occupation Account Executive	Transaction ID: 7887-P10633
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Juan Ramon Lopez		Date of Receipt
	Mailing Address 27 Banstead		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Trabuco Canyon	CA	92679-3740
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Kaiser Permanente		Occupation Manager	Transaction ID: 7886-P10375
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Douglas Lubenow		Date of Receipt
	Mailing Address 3 Fulton Dr		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mount Laurel	NJ	08054-4510
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Lubenow Agency		Occupation Agent	Transaction ID: 7888-P10800
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 57 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Susan Tullis Luvisi
Mailing Address 2185 Avian Pl
City Jacksonville State FL Zip Code 32224-3011
FEC ID number of contributing federal political committee. **C**
Name of Employer James F. Tullis & Associates, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10539
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Maurice Lyons
Mailing Address 301 Madison Ave Fl 4
City New York State NY Zip Code 10017-8103
FEC ID number of contributing federal political committee. **C**
Name of Employer The Medical Link, Inc. Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10481
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Thomas G. Magnus
Mailing Address PO Box 999
City El Granada State CA Zip Code 94018-0999
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross of California Occupation Sales Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10414
Amount of Each Receipt this Period 30.00
Payroll 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 58 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Victoria A. Major-Bell

Mailing Address 3602 Harwich Ct

City State Zip Code
Lake Worth FL 33467-1532

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

Name of Employer Occupation
VMB Solutions Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10976

Amount of Each Receipt this Period
10.00

Payroll Deduction
(\$10.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Dale W. Maloney

Mailing Address 401 Wekiva Cove Rd

City State Zip Code
Longwood FL 32779-5635

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

Name of Employer Occupation
Benefits Division, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2008

Transaction ID: 7787

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dale W. Maloney

Mailing Address 401 Wekiva Cove Rd

City State Zip Code
Longwood FL 32779-5635

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

Name of Employer Occupation
Benefits Division, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10645

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 140.00

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 / 117

(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

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Richard S. Manin

Mailing Address 33 Manchester St

City State Zip Code
Galloway NJ 08205-3678

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

Name of Employer Occupation
Richard S. Manin Insurance Owner

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 8 / 2 0 0 8

Transaction ID: 7887-P10576

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Kimberly C. Martin

Mailing Address 6 Rasada Dr

City State Zip Code
Weaverville NC 28787-9306

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

Name of Employer Occupation
Ebenconcepts Agent

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

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10865

Amount of Each Receipt this Period
40.00

Payroll Deduction
(\$40.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Phyllis Martinsen

Mailing Address 8331 W Cory Ct

City State Zip Code
Boise ID 83704-5725

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

Name of Employer Occupation
Byron Hyatt Erstad & Co Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 605.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10626

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶

100.00

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 60 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Matthew L. Masone	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 367 Sheffield Rd	Transaction ID: 7887-P10631
	City State Zip Code Severna Park MD 21146-1647	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$45.00 Monthly)
	Name of Employer Occupation Lincoln Financial Group Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) Donald L. Mathern	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 7650 Cherrywood Dr	Transaction ID: 7887-P10408
	City State Zip Code Boise ID 83704-3541	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)
	Name of Employer Occupation Insurance Specialists Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Michael E. Matznick	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 3207 Cottingham Ct	Transaction ID: 7887-P10642
	City State Zip Code Greensboro NC 27410-8362	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$85.00 Monthly)
	Name of Employer Occupation EbenConcepts Company Agent 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)	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 61 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Tom W Mayer
Mailing Address 2720 Aldrich Ave S
City Minneapolis State MN Zip Code 55408-1316
FEC ID number of contributing federal political committee. **C**
Name of Employer Direct Benefits, Inc. Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10643
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
John R. McConnaughey
Mailing Address 6312 Anthony Dr
City Liberty Twp State OH Zip Code 45011-1303
FEC ID number of contributing federal political committee. **C**
Name of Employer JRM & Associates Agency, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10654
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
H. Luke McDermott
Mailing Address 1044 Park Palisade Dr
City South Jordan State UT Zip Code 84095-2229
FEC ID number of contributing federal political committee. **C**
Name of Employer McDermott Company & Associates Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10540
Amount of Each Receipt this Period 100.00
Payroll Deduction (\$100.00 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 62 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Leslie E. McGerr

Mailing Address 6125 Havelock Ave

City Lincoln State NE Zip Code 68507-1234

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

Name of Employer Les McGerr & Company Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7886-P10325

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Susan McGinnis

Mailing Address 9905 S Maplewood Ave

City Tulsa State OK Zip Code 74137-5534

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

Name of Employer BenEx Insurance Agency Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 21 / 2008

Transaction ID: 7809

Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Daniel W. McMahon

Mailing Address 123 E 2nd Ave

City Spokane State WA Zip Code 99202-1525

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

Name of Employer Jones & Mitchell Insurance Occupation Benefits Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10413

Amount of Each Receipt this Period 50.00

Payroll 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: (check only one)	PAGE 63 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) David W. Meister	Date of Receipt MM / DD / YYYY 08 / 14 / 2008
	Mailing Address 5203 N. Alhu Ct	Transaction ID: 7782
	City Peoria State IL Zip Code 61615-	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Managed Benefits Agency, Inc. Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00	

B.	Full Name (Last, First, Middle Initial) David W. Meister	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5203 N. Alhu Ct	Transaction ID: 7887-P10666
	City Peoria State IL Zip Code 61615	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer Managed Benefits Agency, Inc. Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00	(\$30.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Monte A. Merken	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 24577 Indian Hill Ln	Transaction ID: 7888-P10867
	City West Hills State CA Zip Code 91307-3829	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer Petersen International Underwriters Occupation Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	(\$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 64 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Travis S. Middleton
 Mailing Address 20610 Castle Bend Dr
 City State Zip Code
 Katy TX 77450-4909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TradeMark Insurance Agency LLC Occupation President
 Receipt For: Primary General Aggregate Year-to-Date ▼
 Other (specify) ▼ 800.00
 Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10637
 Amount of Each Receipt this Period: 100.00
 Payroll Deduction: (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Bradley V. Miles
 Mailing Address 11417 E 44th Ave
 City State Zip Code
 Spokane Valley WA 99206-9403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brad Miles Insurance Occupation Agent
 Receipt For: Primary General Aggregate Year-to-Date ▼
 Other (specify) ▼ 680.00
 Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10638
 Amount of Each Receipt this Period: 30.00
 Payroll Deduction: (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Jeffrey R. Miles
 Mailing Address 736 Amoroso Pl
 City State Zip Code
 Venice CA 90291-3802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Miles Organization, Inc. Occupation Agent
 Receipt For: Primary General Aggregate Year-to-Date ▼
 Other (specify) ▼ 765.00
 Date of Receipt: 08 / 28 / 2008
Transaction ID: 7886-P10368
 Amount of Each Receipt this Period: 170.00
 Payroll Deduction: (\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**
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 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Stephanie Monette
Mailing Address 1510 Meadow Wood Ln
City Reno State NV Zip Code 89502-8503
FEC ID number of contributing federal political committee. **C**
Name of Employer Saint Mary's Health Plans Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10795
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
David R. Moore
Mailing Address 605 Truitt Dr
City Elon State NC Zip Code 27244-9262
FEC ID number of contributing federal political committee. **C**
Name of Employer David R. Moore, CLU & Associates Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 680.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10978
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Wesley P. Moore
Mailing Address PO Box 604
City Darlington State SC Zip Code 29540-0604
FEC ID number of contributing federal political committee. **C**
Name of Employer W P Moore Agency Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 790.00
Date of Receipt 08 / 21 / 2008
Transaction ID: 7806
Amount of Each Receipt this Period 20.00

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 66 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Wesley P. Moore		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address PO Box 604		Transaction ID: 7888-P10792
	City Darlington	State SC	Zip Code 29540-0604
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.00
	Name of Employer W P Moore Agency	Occupation Owner	Payroll Deduction (\$110.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Carolynne E. Muldoon		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5553 Baca Cir		Transaction ID: 7886-P10344
	City Boulder	State CO	Zip Code 80301-3520
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Colorado Employee Benefit Group, LLC	Occupation Owner	Payroll Deduction (\$30.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Ray M. Musser		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 404 N 2nd Ave Ste B		Transaction ID: 7887-P10502
	City Upland	State CA	Zip Code 91786-4701
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
	Name of Employer Ray M. Musser & Associates, Inc.	Occupation Agent	Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	225.00
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 67 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Joshua D. Nace
Mailing Address 936 N 34th St Ste 208
City State Zip Code
Seattle WA 98103-8869
FEC ID number of contributing federal political committee. **C**
Name of Employer: Dental Health Services, Inc. Occupation: Vice President Sales & Service
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10828
Amount of Each Receipt this Period: 30.00
Payroll Deduction: (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Joel Neil Newman
Mailing Address 3305 115th Ave NE Apt 301
City State Zip Code
Bellevue WA 98004-7745
FEC ID number of contributing federal political committee. **C**
Name of Employer: Colonial Supplemental Ins. Occupation: Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10615
Amount of Each Receipt this Period: 30.00
Payroll Deduction: (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Ronnell Nolan
Mailing Address 364 Steele Blvd
City State Zip Code
Baton Rouge LA 70806-5131
FEC ID number of contributing federal political committee. **C**
Name of Employer: The Nolan Group Occupation: President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10986
Amount of Each Receipt this Period: 60.00
Payroll Deduction: (\$30.00 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 68 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Trisha Norket

Mailing Address 1401 Riverside Dr

City State Zip Code
Charlotte NC 28214-9651

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

Name of Employer Occupation
Wachovia Insurance Services Assistant 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
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10499

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B.

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

Mailing Address PO Box 2052

City State Zip Code
Franklin NC 28744-2052

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

Name of Employer Occupation
Wayah Insurance Agency Account Executive

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 8 / 2 0 0 8

Transaction ID: 7888-P10873

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Frank R. Novy

Mailing Address 21238 Woodview Cir

City State Zip Code
Strongsville OH 44149-9261

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

Name of Employer Occupation
Qualified Administrative Services, In Agent

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 8 / 2 0 0 8

Transaction ID: 7887-P10546

Amount of Each Receipt this Period
30.00

Payroll 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 69 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Tiffany Otis-Albert

Mailing Address 18920 Stonewater Blvd

City State Zip Code
Northville MI 48168-8560

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

Name of Employer Occupation
PPOM Vice President Corporate Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10515

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B.

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

Mailing Address 47 Laurel Hill Dr

City State Zip Code
Niantic CT 06357-1536

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

Name of Employer Occupation
Parker Agency Principal

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10959

Amount of Each Receipt this Period
90.00

Payroll Deduction
(\$90.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Jesse A. Patton

Mailing Address 701 Grand Ave

City State Zip Code
West Des Moines IA 50265-3625

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

Name of Employer Occupation
Associations Marketing Group, Inc. CEO/President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10516

Amount of Each Receipt this Period
350.00

Payroll Deduction
(\$350.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶

470.00

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 70 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Lee Patton

Mailing Address 3105 True Pkwy, Apt 608

City State Zip Code
West Des Moines IA 50265

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

Name of Employer Associations Marketing Group, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10846
Amount of Each Receipt this Period: 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Alyce Pendell

Mailing Address 3030 SE 12th St Unit 1077

City State Zip Code
Renton WA 98058-3887

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

Name of Employer Sprague Israel Giles, Inc. Occupation Employee Benefits

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7886-P10388
Amount of Each Receipt this Period: 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Ross W. Pendergraft

Mailing Address 16622 Calahan St

City State Zip Code
North Hills CA 91343-3602

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

Name of Employer Arroyo Insurance Services, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10617
Amount of Each Receipt this Period: 30.00
Payroll 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 71 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Kenneth G. Penn
Mailing Address 218 North St
City Portsmouth State VA Zip Code 23704-2602
FEC ID number of contributing federal political committee. **C**
Name of Employer ChamberSolutions Occupation Executive Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10517
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
William Herb Pennington
Mailing Address 4640 Woodbridge Dr
City Kernersville State NC Zip Code 27284-8850
FEC ID number of contributing federal political committee. **C**
Name of Employer Pennington Associates Inc. Occupation Principal
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10494
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Clifford E. Perras
Mailing Address 1621 Cedar St
City South Bend State IN Zip Code 46617-2533
FEC ID number of contributing federal political committee. **C**
Name of Employer Perras & Associates Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10761
Amount of Each Receipt this Period 30.00
Payroll 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 72 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 2003 Charvais Dr

City State Zip Code
Lake Charles LA 70601-5605

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

Name of Employer Occupation
The Perry Agency, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10960

Amount of Each Receipt this Period
60.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jackie Audrey Peterson

Mailing Address 816 Calle Myriam

City State Zip Code
Sparks NV 89436-0663

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

Name of Employer Occupation
Self Employed Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10972

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Joe Phiifer

Mailing Address 2323 N. Houston St.

City State Zip Code
Dallas TX 75219

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

Name of Employer Occupation
SafeGuard Dental & Vision Sr. Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10848

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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 73 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) Joseph E. Pittman</p> <p>Mailing Address 7430 Vinton St</p> <p>City State Zip Code Omaha NE 68124-3452</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Creative Association Management</p> <p>Occupation Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>	<p>Date of Receipt 08 / 28 / 2008</p> <p>Transaction ID: 7886-P10358</p> <p>Amount of Each Receipt this Period 35.00</p> <p>Payroll Deduction (\$35.00 Monthly)</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Susan R. Pittman</p> <p>Mailing Address 32418 51st Ave SW</p> <p>City State Zip Code Federal Way WA 98023-1936</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Insure NW Inc.</p> <p>Occupation Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt 08 / 28 / 2008</p> <p>Transaction ID: 7888-P10782</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Payroll Deduction (\$50.00 Monthly)</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Angela Potts Bopp</p> <p>Mailing Address 1205 Highway 2 Ste 202</p> <p>City State Zip Code Sandpoint ID 83864-2716</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Harris/Dean Insurance</p> <p>Occupation Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt 08 / 28 / 2008</p> <p>Transaction ID: 7888-P10819</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
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SUBTOTAL of Receipts This Page (optional)	115.00
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 74 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Terri B. Pritchard

Mailing Address 1399 Ashleybrook Ln Ste 110

City State Zip Code
Winston Salem NC 27103-2961

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

Name of Employer Third Party Marketers Of America, Inc. 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
0	8	/	2	8	/	2	0	0	8

Transaction ID: 7887-P10420

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
John G. Prue

Mailing Address 12713 S Edinburg St

City State Zip Code
Olathe KS 66062-1300

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

Name of Employer Humana, Inc. Occupation Agent

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	8	/	2	0	0	8

Transaction ID: 7888-P10850

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Colleen Mary Pruitt

Mailing Address 5805 75th St

City State Zip Code
Lubbock TX 79424-1727

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

Name of Employer TACT Insurance Agency Occupation Agency Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	8

Transaction ID: 7888-P10851

Amount of Each Receipt this Period 115.00

Payroll 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 75 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Connie Puett
Mailing Address 5160 N Eyrie Way
City State Zip Code
Boise ID 83703-4287
FEC ID number of contributing federal political committee. **C**
Name of Employer Primary Health Occupation Marketing & Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 248.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10343
Amount of Each Receipt this Period 31.00
Payroll Deduction (\$31.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Rebecca L. Purdy
Mailing Address 8121 Desert Jewel Cir
City State Zip Code
Las Vegas NV 89128-7741
FEC ID number of contributing federal political committee. **C**
Name of Employer The Onyx Group Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10852
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Jeffrey A. Ranf
Mailing Address 2600 Denali St Ste 102
City State Zip Code
Anchorage AK 99503-2746
FEC ID number of contributing federal political committee. **C**
Name of Employer Wallace Group Services Occupation Partner
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10493
Amount of Each Receipt this Period 35.00
Payroll Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 96.00
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 76 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 2519 Kettlewell Ct

City Midlothian State VA Zip Code 23113-6726

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

Name of Employer BB&T Benefit Consultants of Virginia. Occupation Vice President

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10520
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jon C Rauser

Mailing Address 949 Lamplighter Ln

City Grafton State WI Zip Code 53024-9314

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

Name of Employer The Rauser Agency, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10521
Amount of Each Receipt this Period 170.00
Payroll Deduction (\$170.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Kenneth L. Ray

Mailing Address 110 Beaver Bnd

City Canton State MS Zip Code 39046-9296

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

Name of Employer Stewart Sneed Hewes/Banco-rpSouth Insu Occupation Director of Marketing - Life/H

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10522
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 295.00

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 77 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Dennis J. Recker

Mailing Address 971 N Perry St

City State Zip Code
Ottawa OH 45875-1218

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

Name of Employer Fawcett, Lammon, Recker & Associates Occupation Registered Representative

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt / /
Transaction ID: 7888-P10780
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Eric Redman

Mailing Address PO Box 930

City State Zip Code
Rathdrum ID 83858-0930

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

Name of Employer Redman & Company Insurance Inc Occupation President

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt / /
Transaction ID: 7886-P10383
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Jordan R Redman

Mailing Address 7775 N Joanna Dr

City State Zip Code
Coeur D Alene ID 83815-9851

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

Name of Employer Redman Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt / /
Transaction ID: 7887-P10411
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 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: (check only one)	PAGE 78 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Susan Redman		Date of Receipt
	Mailing Address PO Box 930		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Rathdrum	ID	83858-0930
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Redman & Company Insurance, Inc.		Occupation inside sales	Transaction ID: 7886-P10360
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 225.00	Amount of Each Receipt this Period <input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Joni Robin Reents		Date of Receipt
	Mailing Address 12433 Bellaire Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Thornton	CO	80241-2925
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Romer, Reents & Associates, Inc.		Occupation Producer	Transaction ID: 7887-P10620
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	Amount of Each Receipt this Period <input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Louis P. Reginelli		Date of Receipt
	Mailing Address 27 Newgate Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Naperville	IL	60565-3039
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer L.P.R. Insurance Agency		Occupation Agent	Transaction ID: 7836
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 365.00	Amount of Each Receipt this Period <input type="text"/> 365.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 425.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) Lois Kohler Rhoades</p> <p>Mailing Address 352 Ridgetop Rd</p> <p>City State Zip Code Fleetwood NC 28626</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hicks, Kohler & Associates Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt 08 / 28 / 2008</p> <p>Transaction ID: 7888-P10730</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
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<p>B. Full Name (Last, First, Middle Initial) Russell Lee Rice</p> <p>Mailing Address 8830 Buckskin Dr</p> <p>City State Zip Code Boerne TX 78006-5554</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AVESIS, Inc. Regional VP of Sales</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>	<p>Date of Receipt 08 / 28 / 2008</p> <p>Transaction ID: 7887-P10622</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Shan Ricketts</p> <p>Mailing Address 3900 Halisport Dr NW</p> <p>City State Zip Code Kennesaw GA 30152-4077</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Purchasing Alliance Solutions, Inc. Executive Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 935.00</p>	<p>Date of Receipt 08 / 28 / 2008</p> <p>Transaction ID: 7887-P10587</p> <p>Amount of Each Receipt this Period 85.00</p> <p>Payroll Deduction (\$85.00 Monthly)</p>
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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 80 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Glen E Riensche		Date of Receipt
	Mailing Address 4316 S 48th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Lincoln	NE	68516-1287
	FEC ID number of contributing federal political committee. C		Transaction ID: 7888-P10775
Name of Employer Advanced Insurance Services		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Mark Riley		Date of Receipt
	Mailing Address PO Box 1635		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Irmo	SC	29063-1635
	FEC ID number of contributing federal political committee. C		Transaction ID: 7887-P10390
Name of Employer American Benefit Services, LLC		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00
			Payroll Deduction (\$50.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Elizabeth E Rios-Carl		Date of Receipt
	Mailing Address 6841 Pino Real Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	El Paso	TX	79912-2803
	FEC ID number of contributing federal political committee. C		Transaction ID: 7888-P10853
Name of Employer Goodman Financial Group		Occupation VP - Employee Benefits	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 50.00
			Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 130.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Michael A. Rivera		Date of Receipt
	Mailing Address 12200 Northwest Fwy Ste 662		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Houston	TX	77092-4927
	FEC ID number of contributing federal political committee. C		Transaction ID: 7887-P10397
Name of Employer Northwest General Insurance		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="680.00"/>	<input type="text" value="85.00"/>
			Payroll Deduction (\$85.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Joseph K. Roberts		Date of Receipt
	Mailing Address 4000 S 36th St		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Lincoln	NE	68506-4809
	FEC ID number of contributing federal political committee. C		Transaction ID: 7888-P10951
Name of Employer Midlands Financial Benefits		Occupation Registered Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="960.00"/>	<input type="text" value="120.00"/>
			Payroll Deduction (\$120.00 Monthly)

C.	Full Name (Last, First, Middle Initial) William D. Robinson		Date of Receipt
	Mailing Address 739 E Jackson St		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Martinsville	IN	46151-2033
	FEC ID number of contributing federal political committee. C		Transaction ID: 7887-P10495
Name of Employer American Community Mutual Insurance		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	<input type="text" value="30.00"/>
			Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="235.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
William T. Robinson

Mailing Address 401 S El Cielo Rd Apt 66

City State Zip Code
Palm Springs CA 92262-7922

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

Name of Employer: Palm Canyon Insurance Agency
Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10968
 Amount of Each Receipt this Period: 85.00
 Payroll Deduction: (\$85.00 Monthly)

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

Mailing Address 2762 Continental Dr Ste 207

City State Zip Code
Baton Rouge LA 70808-3240

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

Name of Employer: The Spectrum Agency
Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 08 / 22 / 2008
Transaction ID: 7833
 Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Clayton W Rooy

Mailing Address 7914 Kenton Ave

City State Zip Code
Parma OH 44129-4320

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

Name of Employer: Insurance Strategy, Inc.
Occupation: Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7886-P10329
 Amount of Each Receipt this Period: 30.00
 Payroll Deduction: (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **480.00**

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 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Charles P. Rosen		Date of Receipt
	Mailing Address 849 Somera Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Simi Valley	CA	93065-5546
	FEC ID number of contributing federal political committee. C		Transaction ID: 7887-P10624
Name of Employer Acme Insurance & Financial Services.		Occupation President & CFO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	<input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Eugene L. Rowe		Date of Receipt
	Mailing Address 10430 Wilshire Blvd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Los Angeles	CA	90024-4651
	FEC ID number of contributing federal political committee. C		Transaction ID: 7888-P10963
Name of Employer R & R Insurance and Retirement Service		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	<input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Francis A. Ruggiero		Date of Receipt
	Mailing Address 15 Kennedy Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Budd Lake	NJ	07828-1438
	FEC ID number of contributing federal political committee. C		Transaction ID: 7887-P10524
Name of Employer John J. Slattery Associates		Occupation Director of Broker Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 680.00	<input type="text"/> 85.00
			Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 145.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 84 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Stephen J. Salamon
Mailing Address PO Box 4252
City Timonium State MD Zip Code 21094-4252
FEC ID number of contributing federal political committee. **C**
Name of Employer Heritage Financial Consultants, LLC Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10458
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Alfonso C. Schiebel
Mailing Address 561 Ripplewater Dr SW
City Marietta State GA Zip Code 30064-2474
FEC ID number of contributing federal political committee. **C**
Name of Employer Schiebel & Associates, LLC dba Shopbe Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10531
Amount of Each Receipt this Period 35.00
Payroll Deduction (\$35.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Mark A. Schlange
Mailing Address 2604 Blackhawk Dr
City Bellevue State NE Zip Code 68123-3704
FEC ID number of contributing federal political committee. **C**
Name of Employer NP Dodge Insurance Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10924
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 150.00
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 85 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Mel A. Schlesinger

Mailing Address 380 Luzelle Dr

City State Zip Code
Winston Salem NC 27103-6470

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

Name of Employer Occupation
The Rainmakers Group, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10592

Amount of Each Receipt this Period
110.00

Payroll Deduction
(\$110.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Kenneth L. Schmidt

Mailing Address 1332 Hunters Hollow Ct

City State Zip Code
Eureka MO 63025-1051

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

Name of Employer Occupation
Mengel, Surdyke, Murphy and Finke Benefits Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2008

Transaction ID: 7803

Amount of Each Receipt this Period
100.00

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

Mailing Address 210 Carden Ave

City State Zip Code
Nashville TN 37205-2422

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

Name of Employer Occupation
Colonial Supplemental Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10738

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

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 86 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
James J. Scholl
Mailing Address 8669 Ainsdale Ct
City Lone Tree State CO Zip Code 80124-3113
FEC ID number of contributing federal political committee. **C**
Name of Employer Scholl & Associates Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10491
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
James D. Schulz
Mailing Address 7101 S 82nd St
City Lincoln State NE Zip Code 68516-6584
FEC ID number of contributing federal political committee. **C**
Name of Employer Midlands Financial Benefits Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10469
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Dan Schwartzer
Mailing Address 4600 American Pkwy Ste 208
City Madison State WI Zip Code 53718-8334
FEC ID number of contributing federal political committee. **C**
Name of Employer WAHU Occupation Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10472
Amount of Each Receipt this Period 30.00
Payroll 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 87 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Gregory J. Seifert

Mailing Address 3311 NE 115th St

City State Zip Code
Vancouver WA 98686-3945

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

Name of Employer Occupation
Biggs Insurance Services Agent

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 8 / 2 0 0 8

Transaction ID: 7887-P10593

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Bruce J. Setlik

Mailing Address 17808 Harney St

City State Zip Code
Omaha NE 68118-3500

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

Name of Employer Occupation
American Community Mutual, Inc. Agent

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 8 / 2 0 0 8

Transaction ID: 7888-P10935

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Douglas W Sheffer

Mailing Address 110 International Way

City State Zip Code
Springfield OR 97477-1034

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

Name of Employer Occupation
PacificSource Health Plans Agent

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 8 / 2 0 0 8

Transaction ID: 7887-P10405

Amount of Each Receipt this Period

30.00

Payroll 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 88 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Kenneth A. Sherlin
Mailing Address 8 1st St
City Asheville State NC Zip Code 28803-1414
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Design Group Occupation Marketing Partner
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10954
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
David M. Sherrill
Mailing Address 2844 Regal Ln
City Oviedo State FL Zip Code 32765-7573
FEC ID number of contributing federal political committee. **C**
Name of Employer Sherrill Insurance Brokerage, Inc. Occupation Vice President/Life & LTC Mana
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10625
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Jeffrey Sherrod
Mailing Address 3810 Holly Ridge Dr
City Longview State TX Zip Code 75605-2500
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Life Insurance Co. Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10387
Amount of Each Receipt this Period 30.00
Payroll 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 89 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Thomas E. Shores

Mailing Address 8596 W Bolsa St

City State Zip Code
Boise ID 83709-5196

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

Name of Employer Occupation
T.A. Shores Inc. Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 248.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10526

Amount of Each Receipt this Period

31.00

Payroll Deduction

(\$31.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Eileen M. Shrem

Mailing Address 215 McCabe Ave Apt C1

City State Zip Code
Bradley Beach NJ 07720-1465

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

Name of Employer Occupation
Independent Insurance Planner Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10527

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Bob G Shupe

Mailing Address 5904 Hitching Post Ln

City State Zip Code
Nashville TN 37211-6934

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

Name of Employer Occupation
ESP, Inc President, CEO

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10616

Amount of Each Receipt this Period

40.00

Payroll Deduction

(\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

101.00

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 90 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Steven J. Sinkler
Mailing Address 10185 NW 102nd St
City Clive State IA Zip Code 50325-6770
FEC ID number of contributing federal political committee. **C**
Name of Employer Coventry Health Care of Iowa Occupation Director of Individual Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10938
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Desmond X. Slattery
Mailing Address 1800 State Route 34
City Wall State NJ Zip Code 07719-9168
FEC ID number of contributing federal political committee. **C**
Name of Employer John J. Slattery Associates Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7886-P10371
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Deirdre Slattery Fallon
Mailing Address PO Box 256
City Spring Lake State NJ Zip Code 07762-0256
FEC ID number of contributing federal political committee. **C**
Name of Employer John J. Slattery Associates, Inc. Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10422
Amount of Each Receipt this Period 85.00
Payroll 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 91 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) Kevin M. Smith</p> <p>Mailing Address 605 Corporate Dr W</p> <p>City State Zip Code Langhorne PA 19047-8013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFLAC Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 680.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 28 / 2008</p> <p>Transaction ID: 7887-P10412</p> <p>Amount of Each Receipt this Period 85.00</p> <p>Payroll Deduction (\$85.00 Monthly)</p>
<p>B. Full Name (Last, First, Middle Initial) Myron D. Smith</p> <p>Mailing Address 7172 Hawthorn Ave Apt 211</p> <p>City State Zip Code Los Angeles CA 90046-3284</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation GENESIS/Smith-Benton President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1340.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 28 / 2008</p> <p>Transaction ID: 7886-P10320</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
<p>C. Full Name (Last, First, Middle Initial) Paul E. Smith</p> <p>Mailing Address 169 Hawthorne Dr</p> <p>City State Zip Code Kensington CT 06037-4074</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AmeriBen Alliance, LLC Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 790.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 28 / 2008</p> <p>Transaction ID: 7887-P10604</p> <p>Amount of Each Receipt this Period 85.00</p> <p>Payroll Deduction (\$85.00 Monthly)</p>

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 92 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

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

Mailing Address 2828 Lily St

City Anchorage State AK Zip Code 99508-4771

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

Name of Employer Premera BlueCross BlueShield of Alaska Occupation agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10837

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
James Randall Southard

Mailing Address 7848 Nc Highway 68 N

City Stokesdale State NC Zip Code 27357-9326

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

Name of Employer Professional Benefits Associates, LLC Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7886-P10373

Amount of Each Receipt this Period 65.00

Payroll Deduction (\$65.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Richard Blake Spell

Mailing Address 7873 Bufflehead Ct

City Greensboro State NC Zip Code 27455-8376

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

Name of Employer UnitedHealthcare Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 22 / 2008

Transaction ID: 7829

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 595.00

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 / 117
	<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) Richard Blake Spell		Date of Receipt
	Mailing Address 7873 Bufflehead Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Greensboro	NC	27455-8376
	FEC ID number of contributing federal political committee.		Transaction ID: 7887-P10605
Name of Employer UnitedHealthcare		Occupation Account Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 620.00	<input type="text"/> 20.00
			Payroll Deduction (\$20.00 Monthly)

B.	Full Name (Last, First, Middle Initial) Jackie L. Spragins		Date of Receipt
	Mailing Address 2009 Speedway Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Wichita Falls	TX	76301-6067
	FEC ID number of contributing federal political committee.		Transaction ID: 7888-P10940
Name of Employer Allred-Thompson-Mason-Daugherty Insur		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00
			Payroll Deduction (\$30.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Norman D. Springer		Date of Receipt
	Mailing Address 1626 203rd St E		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Westfield	IN	46074-9687
	FEC ID number of contributing federal political committee.		Transaction ID: 7887-P10506
Name of Employer American Community Mutual		Occupation Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00	<input type="text"/> 40.00
			Payroll Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Delvin L. Stahl

Mailing Address PO Box 388

City State Zip Code
Sutton NE 68979-0388

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

Name of Employer Occupation
Insurance Plus, Inc. Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10839

Amount of Each Receipt this Period
40.00

Payroll Deduction
(\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Peter J Stein

Mailing Address 1164 Silver Beech Rd

City State Zip Code
Herndon VA 20170-2328

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

Name of Employer Occupation
NAHU VP Congressional Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7887-P10509

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

C. Full Name (Last, First, Middle Initial)
James R Stenger

Mailing Address 77 Ridgeview Ln

City State Zip Code
Mount Arlington NJ 07856-2321

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

Name of Employer Occupation
NAS Financial Services Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4615.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7889-P11075

Amount of Each Receipt this Period
170.00

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **295.00**

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 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)

Marilyn A. Stenger

Mailing Address 77 Ridgeview Ln

City State Zip Code
Mount Arlington NJ 07856-2321

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

Name of Employer Occupation
Self Employed Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10927

Amount of Each Receipt this Period

85.00

Payroll Deduction

(\$85.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

James R. Stephens

Mailing Address 1607 Lower Union Hill Rd

City State Zip Code
Canton GA 30115-8435

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

Name of Employer Occupation
WellCare Health Plans, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10757

Amount of Each Receipt this Period

30.00

Payroll Deduction

(\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Rodney Stuart

Mailing Address 9755 Randall Dr

City State Zip Code
Indianapolis IN 46280-2944

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

Name of Employer Occupation
Benefit Innovations LLP Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1080.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10917

Amount of Each Receipt this Period

135.00

Payroll 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: PAGE 96 / 117

(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
James L. Sugden

Mailing Address 628 Wild Ridge Cir

City State Zip Code
Lafayette CO 80026-2583

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

Name of Employer Occupation
Employee Benefit Solutions, Inc. Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10929

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
James F. Summers

Mailing Address 15316 Pine St

City State Zip Code
Omaha NE 68144-5117

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

Name of Employer Occupation
Senior Market Sales, Inc. Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 7888-P10930

Amount of Each Receipt this Period
125.00

Payroll Deduction
(\$125.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Laron D Thompson

Mailing Address 2609 NW Cascade St

City State Zip Code
Camas WA 98607-8008

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

Name of Employer Occupation
Biggs Insurance Services Employee Benefits

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2008

Transaction ID: 7779

Amount of Each Receipt this Period
365.00

SUBTOTAL of Receipts This Page (optional) ▶

520.00

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 97 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Ryan P. Thorn

Mailing Address 10342 Springcrest Ln

City State Zip Code
South Jordan UT 84095-4538

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

Name of Employer Ryan P. Thorn Insurance Planning, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10770
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Robert J Tierney

Mailing Address 671 E Riverpark Ln

City State Zip Code
Boise ID 83706-4066

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

Name of Employer Tierney Consulting, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10577
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Helen M. Todd

Mailing Address 54 Belle Meadow Ln

City State Zip Code
Little Rock AR 72210-3714

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

Name of Employer The Todd Agency, Inc. Occupation Chief Financial Officer

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 610.00

Date of Receipt 08 / 21 / 2008
Transaction ID: 7800
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 360.00

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 98 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) Helen M. Todd</p> <p>Mailing Address 54 Belle Meadow Ln</p> <p>City State Zip Code Little Rock AR 72210-3714</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Todd Agency, Inc. Chief Financial Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 640.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 28 / 2008</p> <p>Transaction ID: 7886-P10351</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
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<p>B. Full Name (Last, First, Middle Initial) John David Todd</p> <p>Mailing Address 7011 Lucea Rd</p> <p>City State Zip Code Little Rock AR 72210-4146</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Todd Agency, Inc. Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 28 / 2008</p> <p>Transaction ID: 7886-P10381</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Richard H. Todd</p> <p>Mailing Address 54 Belle Meadow Ln</p> <p>City State Zip Code Little Rock AR 72210-3714</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Todd Agency, Inc. Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 28 / 2008</p> <p>Transaction ID: 7886-P10380</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Payroll Deduction (\$30.00 Monthly)</p>
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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 99 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Dave Toeben

Mailing Address 1625 Division St

City State Zip Code
Waite Park MN 56387-1811

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

Name of Employer Occupation
Insight Insurance Services President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7886-P10342

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address 7555 Brookstead Xing

City State Zip Code
Duluth GA 30097-1953

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

Name of Employer Occupation
Admin America Executive Vice President

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

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10919

Amount of Each Receipt this Period
40.00

Payroll Deduction
(\$40.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Jennifer L. Toups

Mailing Address 4521 Laurel St

City State Zip Code
New Orleans LA 70115-1538

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

Name of Employer Occupation
Business Insurance Group Director of Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7887-P10589

Amount of Each Receipt this Period
35.00

Payroll Deduction
(\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 105.00

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 100 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Janet Trautwein
Mailing Address 7212 Redlac Dr
City Clifton State VA Zip Code 20124-1948
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 ▼ 680.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10931
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
C. Louanne Trebing
Mailing Address 1806 Patton Dr
City Garland State TX Zip Code 75042-8205
FEC ID number of contributing federal political committee. **C**
Name of Employer Trebing Insurance Services Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10933
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Charles Trogon
Mailing Address 2950 E Richmond Ave
City Fresno State CA Zip Code 93720-4977
FEC ID number of contributing federal political committee. **C**
Name of Employer Gallagher Benefit Services Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10614
Amount of Each Receipt this Period 30.00
Payroll 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 101 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Brian Urban

Mailing Address 11329 Kansas Cir

City State Zip Code
Omaha NE 68164-1555

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

Name of Employer Corporate Resource Group, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10579
Amount of Each Receipt this Period: 30.00
Payroll Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Dawn Michelle Urso

Mailing Address 1469 Deborah Dr

City State Zip Code
Spring Hill FL 34609-4604

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

Name of Employer Alltrust Insurance Occupation agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10573
Amount of Each Receipt this Period: 85.00
Payroll Deduction (\$85.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
David R. Van Ahn

Mailing Address 821 17th St

City State Zip Code
West Des Moines IA 50265-3452

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

Name of Employer Van Ahn Insurance Services Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 07 / 2008
Transaction ID: 7740
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **365.00**

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 102 / 117
(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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
Jean Van Der Sommen

Mailing Address 3483 Satellite Blvd

City State Zip Code
Duluth GA 30096-8692

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

Name of Employer: Lloyd Bennett Professional Services G
Occupation: Employee Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7887-P10464

Amount of Each Receipt this Period: 15.00

Payroll Deduction: (\$15.00 Monthly)

B.

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

Mailing Address 3702 Alton Rd SW

City State Zip Code
Roanoke VA 24014-3004

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

Name of Employer: Southwind Health Partners
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10934

Amount of Each Receipt this Period: 40.00

Payroll Deduction: (\$40.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Charles G. Wagner

Mailing Address PO Box 9

City State Zip Code
Burwell NE 68823-0009

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

Name of Employer: Town and Country Insurance Agency, In
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 7888-P10827

Amount of Each Receipt this Period: 50.00

Payroll Deduction: (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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 103 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Timothy P. Walsh

Mailing Address 701 Oyster Catcher Dr

City State Zip Code
Hampstead NC 28443-8340

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

Name of Employer Occupation
Advanced Insurance Systems Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10942

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Jessica F Waltman

Mailing Address 2000 14th St N Ste 450

City State Zip Code
Arlington VA 22201-2573

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

Name of Employer Occupation
NAHU VP, Policy and State Affairs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 880.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10805

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 1109 Princeton Dr

City State Zip Code
Wilmington NC 28403-2528

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

Name of Employer Occupation
Ebenconcepts, Inc. Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10838

Amount of Each Receipt this Period
85.00

Payroll 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 104 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Carmen Waring

Mailing Address 32 E Levert Dr

City Luling State LA Zip Code 70070-3126

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

Name of Employer BlueCross BlueShield of LA Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10843

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
John L. Warwick

Mailing Address PO Box 272

City Chico State CA Zip Code 95927-0272

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

Name of Employer John Warwick Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10510

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 125 Powell Rd

City Newport State NC Zip Code 28570-3706

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

Name of Employer Ebenconcepts Occupation AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10906

Amount of Each Receipt this Period 30.00

Payroll 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 105 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Cecilia La Verne Webb

Mailing Address 8016 Dumas Dr NE

City Albuquerque State NM Zip Code 87109-5208

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

Name of Employer Lovelace Health Plan Occupation Account Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10907

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 15 S Jefferson St

City Roanoke State VA Zip Code 24011-1303

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

Name of Employer Benefits Group, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7887-P10468

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 2108 24th St Ste 2

City Bakersfield State CA Zip Code 93301-3748

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

Name of Employer The Webb Insurance Group Occupation Marketing Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7886-P10313

Amount of Each Receipt this Period 85.00

Payroll 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 106 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Jason Scott Weilage
Mailing Address 3800 Flowering Grove Ct
City Louisville State KY Zip Code 40241-3044
FEC ID number of contributing federal political committee. **C**
Name of Employer Weilage Benefit Specialists, Inc. Occupation Vice President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10922
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Charles L. Westmoreland
Mailing Address PO Box 925
City Jackson State MS Zip Code 39205-0925
FEC ID number of contributing federal political committee. **C**
Name of Employer American Public Life Insurance Company Occupation Director of Agency Development
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7888-P10717
Amount of Each Receipt this Period 80.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Lisa Wetherton
Mailing Address 376 Overlook Point Drive
City Dahlonega State GA Zip Code 30533
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Design Strategies Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10511
Amount of Each Receipt this Period 20.00
Payroll Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 130.00
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 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Robert H. White

Mailing Address 218 W 6th St

City State Zip Code
Tulsa OK 74119-1004

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

Name of Employer Occupation
CommunityCare HMO Plans Marketing Representative
of OK

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10785

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Dale Whiteis

Mailing Address 7820 S Granite Ave

City State Zip Code
Tulsa OK 74136-8456

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

Name of Employer Occupation
Whiteis Benefits Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10818

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
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 Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: 7888-P10905

Amount of Each Receipt this Period
30.00

Payroll 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 108 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Lon G. Wilson

Mailing Address 4240 Tahoe Dr

City Anchorage State AK Zip Code 99502-1460

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

Name of Employer The Wilson Agency, LLC Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10909

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

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 Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10911

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 5940 Hartson

City Kyle State TX Zip Code 78640-8827

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

Name of Employer Pro Insurance Services Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008

Transaction ID: 7888-P10913

Amount of Each Receipt this Period 30.00

Payroll 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 109 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Shelly K Winson
Mailing Address 2491 W Binner Dr
City Chandler State AZ Zip Code 85224-4112
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Financial Group Occupation Business Development Director,
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10581
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Full Name (Last, First, Middle Initial)
DianaLou Wolff
Mailing Address 106 Main St
City Kingston State NY Zip Code 12401-4410
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Counseling Associates Occupation Group & Health Benefit Special
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10601
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Barbara Kay Wong
Mailing Address 1311 L St
City Anchorage State AK Zip Code 99501-4266
FEC ID number of contributing federal political committee. **C**
Name of Employer Capital Management Benefits Corp. Occupation Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10602
Amount of Each Receipt this Period 50.00
Payroll 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 110 / 117
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
Dennis E. Wright

Mailing Address 318 Calash Run

City Fort Wayne State IN Zip Code 46845-2104

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

Name of Employer IntraHealth Solutions, Inc.
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10513
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Luann S. Yarberry

Mailing Address 4500 Bermuda Ln

City Wichita Falls State TX Zip Code 76308-2443

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

Name of Employer Allred-Thompson-Mason-Daugherty Ins.
Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10582
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Robert A Ziff

Mailing Address 568 Valleyview Rd

City Langhorne State PA Zip Code 19047-2221

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

Name of Employer Avanti Benefits Corp
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 28 / 2008
Transaction ID: 7887-P10496
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 215.00

TOTAL This Period (last page this line number only) ► 20887.18

**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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 7873 Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees	<input type="text" value="205.88"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: 7877 Date of Disbursement
	Mailing Address 7810 Old Branch Avenue	<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Clinton State MD Zip Code 20735	Amount of Each Disbursement this Period
	Purpose of Disbursement acct analysis fee	<input type="text" value="16.46"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Merchant Services	Transaction ID: 7876 Date of Disbursement
	Mailing Address 7300 Chapman Way	<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City Knoxville State TN Zip Code 37920	Amount of Each Disbursement this Period
	Purpose of Disbursement BOA Fees	<input type="text" value="58.10"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="280.44"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 112 / 117

<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)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)

Merchant Services

Mailing Address 7300 Chapman Way

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
CC Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 7872

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

828.32

SUBTOTAL of Disbursements This Page (optional) ▶

828.32

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

1108.76

**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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Full Name (Last, First, Middle Initial)
ELIZABETH DOLE COMMITTEE INC

Mailing Address PO BOX 2918

City RALEIGH State NC Zip Code 27602

Purpose of Disbursement
VOID

011
Category/
Type

Candidate Name
ELIZABETH DOLE

Office Sought: House Senate President
State: NC District: 00
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 7838

Date of Disbursement

08 / 26 / 2008

Amount of Each Disbursement this Period

-2000.00

B. Full Name (Last, First, Middle Initial)
ELIZABETH DOLE COMMITTEE INC

Mailing Address PO BOX 2918

City RALEIGH State NC Zip Code 27602

Purpose of Disbursement
9.5 Event in Charlotte

011
Category/
Type

Candidate Name
ELIZABETH DOLE

Office Sought: House Senate President
State: NC District: 00
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 7839

Date of Disbursement

08 / 26 / 2008

Amount of Each Disbursement this Period

3000.00

C. Full Name (Last, First, Middle Initial)
ELIZABETH DOLE COMMITTEE INC

Mailing Address PO BOX 2918

City RALEIGH State NC Zip Code 27602

Purpose of Disbursement
9.5 Event in Charlotte

011
Category/
Type

Candidate Name
ELIZABETH DOLE

Office Sought: House Senate President
State: NC District: 00
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: 7840

Date of Disbursement

08 / 26 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) HAYES FOR CONGRESS</p> <p>Mailing Address Post Office Box 2000</p> <p>City Concord State NC Zip Code 28026</p> <p>Purpose of Disbursement 8.27 Meeting</p> <p>Candidate Name ROBERT C. (ROBIN) HAYES</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7841 Date of Disbursement 08 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) JIM RISCH FOR U S SENATE COMMITTEE</p> <p>Mailing Address 407 W JEFFERSON STREET</p> <p>City BOISE State ID Zip Code 83702</p> <p>Purpose of Disbursement Dinner 8/20</p> <p>Candidate Name JAMES E RISCH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7797 Date of Disbursement 08 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS</p> <p>Mailing Address P.O. Box 425</p> <p>City Roswell State GA Zip Code 30077</p> <p>Purpose of Disbursement Event 8.5</p> <p>Candidate Name THOMAS EDMUNDS PRICE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7724 Date of Disbursement 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

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<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)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)
WALBERG FOR CONGRESS

Transaction ID: 7846

Date of Disbursement

Mailing Address 6769 Teachout Rd.

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

City Tipton State MI Zip Code 49287

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
In-District Event

011
Category/ Type

Candidate Name
TIMOTHY L. WALBERG

Office Sought: House
 Senate
 President
State: MI District: 07

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

8500.00

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

<p>A. Full Name (Last, First, Middle Initial) American Media Institute</p> <p>Mailing Address 240 South Queen Street</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement Event for GOP Convention</p> <p>Candidate Name American Media Institute</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7793 Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p>007 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Bipartisan Policy Center</p> <p>Mailing Address 1225 Eye Street NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Convention Sponsorship</p> <p>Candidate Name Bipartisan Policy Center</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7771 Date of Disbursement 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Iowans for Kohlsdorf</p> <p>Mailing Address 3703 SW 28th Place</p> <p>City Des Moines State IA Zip Code 50321</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Eric Kohlsdorf</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 7726 Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15500.00

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A.

Full Name (Last, First, Middle Initial)

Rock the Vote

Mailing Address 1505 22nd Street NW

City Washington State DC Zip Code 20037

Purpose of Disbursement
National Convention '08

Candidate Name
Rock the Vote

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 7789

Date of Disbursement

08 / 15 / 2008

Amount of Each Disbursement this Period

10000.00

007
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

25500.00