

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Jennifer Murphy

Signature of Treasurer Jennifer Murphy [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="111303.33"/>	<input type="text" value="111303.33"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="138598.38"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="43351.49"/>	<input type="text" value="379376.59"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="181949.87"/>	<input type="text" value="490679.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43239.67"/>	<input type="text" value="351969.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="138710.20"/>	<input type="text" value="138710.20"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28372.93	218349.99
(ii) Unitemized	14976.50	154016.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	43349.43	372365.99
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	43349.43	372365.99
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	7000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.06	10.60
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	43351.49	379376.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	43351.49	379376.59

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	1824.67	19229.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1824.67	19229.72
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38000.00	327750.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	915.00	1490.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	915.00	1490.00
29. Other Disbursements	2500.00	3500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	43239.67	351969.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43239.67	351969.72

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	43349.43	372365.99
34. Total Contribution Refunds (from Line 28(d))	915.00	1490.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42434.43	370875.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1824.67	19229.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1824.67	19229.72

**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 6 OF 164
	<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. Mark Ackerman
Full Name (Last, First, Middle Initial)

Mailing Address 1600 Saint Julian Pl

City Columbia State SC Zip Code 29204-2408

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

Name of Employer Turbeville Insurance Agency, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50681

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

B. Jeff Ahrendsen
Full Name (Last, First, Middle Initial)

Mailing Address 320 S Weber St

City Colorado Springs State CO Zip Code 80903-2153

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

Name of Employer Benefit Resources, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50683

Amount of Each Receipt this Period **100.00**

Payroll Deduction (\$100.00 Monthly)

C. Lori J. Alala
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2424

City Hickory State NC Zip Code 28603-2424

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

Name of Employer Carolina first Assoc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50665

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: (check only one)	PAGE 7 OF 164
	<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)

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

Mailing Address 201W. Fort Street, Mail Code 7969

City Detroit	State MI	Zip Code 48226
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FEC ID number of contributing federal political committee. **C**

Name of Employer Comerica Insurance Services, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50684

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Sheryl Alexander

Mailing Address 1402 N Capitol Ave Ste 400

City Indianapolis	State IN	Zip Code 46202-2375
----------------------	-------------	------------------------

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

Name of Employer Gregory & Appel Insurance	Occupation Sr. vp
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2011

Transaction ID : 11610

Amount of Each Receipt this Period
365.00

Full Name (Last, First, Middle Initial)
C. Terry Allard

Mailing Address 3000 A St Ste 400

City Anchorage	State AK	Zip Code 99503-4040
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FEC ID number of contributing federal political committee. **C**

Name of Employer The Wilson Agency, LLC	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50685

Amount of Each Receipt this Period
50.00

Payroll Deduction
(\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	▶	445.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 164
	<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. Daniel Alm
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3248

City Omaha State NE Zip Code 68180-0001

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

Name of Employer BlueCross BlueShield of Nebraska Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11708-P50155

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

B. Anne Andreasen
Full Name (Last, First, Middle Initial)

Mailing Address 15600 35th Ave N Ste 103

City Minneapolis State MN Zip Code 55447-1396

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

Name of Employer A&A Insurance Services, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt **09 / 27 / 2011**

Transaction ID : 11718

Amount of Each Receipt this Period **365.00**

C. Catherine Antonie
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 510925

City New Berlin State WI Zip Code 53151-0925

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

Name of Employer Planned Futures LLC Occupation Employee Benefit Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50688

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **445.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Elizabeth Ashmore		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50297
Mailing Address 6102 82nd St Ste 6		Amount of Each Receipt this Period 170.00
City Lubbock	State TX	Zip Code 79424-0803
FEC ID number of contributing federal political committee. C	Name of Employer Ashmore & Associates Insurance Agency	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1540.00	
		Payroll Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial) B. Ginger Ashton-Vernon		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50298
Mailing Address 1900 Electric Rd		Amount of Each Receipt this Period 42.00
City Salem	State VA	Zip Code 24153-7474
FEC ID number of contributing federal political committee. C	Name of Employer Lewis-Gale Medical Center	Occupation Director of Provider Relations
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.00	
		Payroll Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial) C. Kimberly Auclair		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50920
Mailing Address 6873 Raccoon Ct		Amount of Each Receipt this Period 30.00
City Viera	State FL	Zip Code 32940-6869
FEC ID number of contributing federal political committee. C	Name of Employer Pineapple Financial Services, LLC	Occupation Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.00	
		Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	242.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 164
	<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. Danine C. Baca
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5353

City Santa Fe State NM Zip Code 87502-5353

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

Name of Employer Financial Concepts Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50921

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Rick Bailey
Full Name (Last, First, Middle Initial)
Mailing Address 4390 Earney Rd Ste 240

City Woodstock State GA Zip Code 30188-5687

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

Name of Employer Rick Bailey & Company, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1390.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50922

Amount of Each Receipt this Period
135.00

Payroll Deduction
(\$135.00 Monthly)

C. Andrea Baldrica
Full Name (Last, First, Middle Initial)
Mailing Address 108 E Saint Vrain St Ste 12

City Colorado Springs State CO Zip Code 80903-1161

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

Name of Employer Baldrica & Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50925

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 207.00

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 11 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Donald Balla
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 Grant St Ste 1320
 City Pittsburgh State PA Zip Code 15219-2233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Simpson & McCrady LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50926
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Mary Lynn Barnette
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 Bull St
 City Columbia State SC Zip Code 29201-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Strategic Employee Benefit Svcs of th Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 09 / 20 / 2011
Transaction ID : 11690
 Amount of Each Receipt this Period 365.00

C. Diane Barton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3401 NW 63rd St
 City Oklahoma City State OK Zip Code 73116-3707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of OK City Dues Occupation Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50229
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

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: (check only one)	PAGE 12 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. David Bauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1027 Tahoe Dr
 City Belmont State CA Zip Code 94002-3010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bauer Financial Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50818
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Kathryn Beals
 Full Name (Last, First, Middle Initial)
 Mailing Address 1277 Deming Way
 City Madison State WI Zip Code 53717-1971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dean Health Plan Occupation Director Group Retention
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1480.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50230
 Amount of Each Receipt this Period 170.00
 Payroll Deduction (\$170.00 Monthly)

C. Darrald Bean
 Full Name (Last, First, Middle Initial)
 Mailing Address 3922 Rampart St
 City Boise State ID Zip Code 83704-4557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bean Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50820
 Amount of Each Receipt this Period 30.00
 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: (check only one)	PAGE 13 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Donald Beard		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50821
Mailing Address 229 Palomar St		Amount of Each Receipt this Period 30.00
City Fayetteville	State NC	Zip Code 28314-1504
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer BMG	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Saundra Beaty		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50231
Mailing Address 2111 W Eldorado Pkwy Ste 100		Amount of Each Receipt this Period 25.00
City McKinney	State TX	Zip Code 75070-7507
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$25.00 Monthly)
Name of Employer Tate Financial Group	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Carolyn Beck		Date of Receipt MM / DD / YYYY 09 / 02 / 2011 Transaction ID : 11604
Mailing Address 7321 Eagle Crest Blvd		Amount of Each Receipt this Period 365.00
City Evansville	State IN	Zip Code 47715-8157
FEC ID number of contributing federal political committee. C		
Name of Employer SIHO Insurance Services	Occupation Director, Evansville Operation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 14 OF 164
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial)
A. Ann Bell

Mailing Address 2171 S Pebblecreek Ln

City State Zip Code
Boise ID 83706-6123

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

Name of Employer Occupation
Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011
Transaction ID : 11708-P50232

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Bruce Benton

Mailing Address 19528 Ventura Blvd # 596

City State Zip Code
Tarzana CA 91356-2917

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

Name of Employer Occupation
Genesis Financial & Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1655.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011
Transaction ID : 11708-P50234

Amount of Each Receipt this Period
170.00

Payroll Deduction
(\$170.00 Monthly)

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

Mailing Address 79 E Daily Dr # 276

City State Zip Code
Camarillo CA 93010-5807

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

Name of Employer Occupation
HLS Insurance Services Large Group Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011
Transaction ID : 11710-P50827

Amount of Each Receipt this Period
30.00

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: (check only one)	PAGE 15 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Lori Bergsma			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50828
Mailing Address 2612 E 4128 N			Amount of Each Receipt this Period 30.00
City Filer	State ID	Zip Code 83328-5167	Payroll Deduction (\$30.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 370.00	
Name of Employer Balanced Rock Insurance Agency, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. David Berman			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50235
Mailing Address 6510 N Shadeland Ave			Amount of Each Receipt this Period 85.00
City Indianapolis	State IN	Zip Code 46220-4369	Payroll Deduction (\$85.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 890.00	
Name of Employer Neace Lukens Holding Company, Inc.	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Thomas Besselman			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50829
Mailing Address 6421 Perkins Rd Bldg A # 2B			Amount of Each Receipt this Period 250.00
City Baton Rouge	State LA	Zip Code 70808-6200	Payroll Deduction (\$250.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00	
Name of Employer Besselman & Little Agency, LLC	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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: (check only one)	PAGE 16 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Robert Bishop		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50702
Mailing Address 2785 E Desert Inn Rd Ste 260		Amount of Each Receipt this Period 100.00
City Las Vegas	State NV	Zip Code 89121-3693
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$100.00 Monthly)
Name of Employer KIA Insurance	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Russ Blakely		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50705
Mailing Address PO Box 11310		Amount of Each Receipt this Period 30.00
City Chattanooga	State TN	Zip Code 37401-2310
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Russ Blakely & Associates	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Chad Blankenburg		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50167
Mailing Address 5950 Fairview Rd Ste 618		Amount of Each Receipt this Period 40.00
City Charlotte	State NC	Zip Code 28210-3113
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40.00 Monthly)
Name of Employer The Cason Group, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. David M. Block
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1809
 City Candler State NC Zip Code 28715-1809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Specialties, Inc. Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **290.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50171
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

B. Laura Blomgren
 Full Name (Last, First, Middle Initial)
 Mailing Address 1515 E Woodfield Rd Ste 625
 City Schaumburg State IL Zip Code 60173-5435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peridot Financial Group, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50707
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

C. Michele Bloom
 Full Name (Last, First, Middle Initial)
 Mailing Address 4507 N Front St
 City Harrisburg State PA Zip Code 17110-1786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Emerson, Reid & Co Occupation manager-broker relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **273.78**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50172
 Amount of Each Receipt this Period **30.42**
 Payroll Deduction (\$30.42 Monthly)

SUBTOTAL of Receipts This Page (optional).....	90.42
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 18 OF 164
(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)

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

Mailing Address 5565 Roberts Dr Ste 100

City Atlanta State GA Zip Code 30338-3350

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

Name of Employer HealthLife Group, LLC Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50708

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 5448 Thornwood Dr Ste 200

City San Jose State CA Zip Code 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 ▼ **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50711

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 602 Main St

City Cedar Falls State IA Zip Code 50613-2949

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

Name of Employer The Accel Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50713

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: (check only one)	PAGE 19 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jim Bowman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2701 W 15th St # 554
 City Plano State TX Zip Code 75075-7523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bowman & Bowman Consultants, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50715
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

B. Jodie Braner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2088 Fairport Way
 City Marietta State GA Zip Code 30062-7738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Sales Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50981
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20.00 Monthly)

C. Eleanor Brockhurst
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 E Osborn Rd Ste 110
 City Phoenix State AZ Zip Code 85014-5533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brockhurst & Associates, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50987
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **80.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 164
	<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. Belinda Brooks
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 117
City Luckey State OH Zip Code 43443-0117
FEC ID number of contributing federal political committee. **C**
Name of Employer Consumer Driven Concepts, L.L.C. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50335
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

B. Jude Broussard
Full Name (Last, First, Middle Initial)
Mailing Address 2020 W Pinhook Rd Ste 301
City Lafayette State LA Zip Code 70508-3212
FEC ID number of contributing federal political committee. **C**
Name of Employer J. Broussard Benefits Group Occupation Managing Member
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50988
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

C. Michael Brown
Full Name (Last, First, Middle Initial)
Mailing Address 620 N Robinson Ave Ste 201
City Oklahoma City State OK Zip Code 73102-6217
FEC ID number of contributing federal political committee. **C**
Name of Employer Mike Brown Associates Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50402
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: (check only one)	PAGE 21 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Stephen Brubaker		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50405
Mailing Address 2700 E Main St Ste 205		Amount of Each Receipt this Period 30.00
City Bexley State OH Zip Code 43209-2536	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)
Name of Employer The Brubaker Insurance Agencies Inc. Occupation AGENT/OWNER	Aggregate Year-to-Date 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Anthony Buechler		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50406
Mailing Address 1203 Colonial Cir		Amount of Each Receipt this Period 30.00
City Papillion State NE Zip Code 68046-6109	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)
Name of Employer Buechler Insurance Services Occupation Broker	Aggregate Year-to-Date 270.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Scott Buie		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50267
Mailing Address 6440 Wasatch Blvd Ste 150		Amount of Each Receipt this Period 50.00
City Salt Lake City State UT Zip Code 84121-3513	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50.00 Monthly)
Name of Employer Buie Insurance Services Occupation Broker	Aggregate Year-to-Date 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 22 OF 164
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Lynn Bull
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3277

City Turlock	State CA	Zip Code 95381-3277
-----------------	-------------	------------------------

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

Name of Employer Winton-Ireland Insurance Agency, Inc.	Occupation Benefits Dept. Manager
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50882

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Barbara Bullion
Full Name (Last, First, Middle Initial)
Mailing Address 1006 Moonlit Way

City Folsom	State CA	Zip Code 95630-7506
----------------	-------------	------------------------

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

Name of Employer Transamerica Worksite Marketing	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50883

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Jennifer Bundy-Cobb
Full Name (Last, First, Middle Initial)
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 Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50268

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: (check only one)	PAGE 23 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Susan Burdette
 Full Name (Last, First, Middle Initial)
 Mailing Address 7500 San Felipe St Ste 600
 City Houston State TX Zip Code 77063-1790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SBH & Associates Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50269
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

B. Charles Bushkill
 Full Name (Last, First, Middle Initial)
 Mailing Address 53800 Generations Dr
 City South Bend State IN Zip Code 46635-1543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Healy Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50887
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

C. Joseph Buyalos
 Full Name (Last, First, Middle Initial)
 Mailing Address 9713 Key West Ave Ste 401
 City Rockville State MD Zip Code 20850-3918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Insurance Exchange, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50890
 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: (check only one)	PAGE 24 OF 164
	<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. Tim Byrne
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8950

City Madison State WI Zip Code 53708-8950

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

Name of Employer M3 Insurance Solutions, Inc. dba M3 Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11708-P50270**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25.00 Monthly)

B. Kareim Cade
Full Name (Last, First, Middle Initial)

Mailing Address 28411 Northwestern Hwy Ste 950

City Southfield State MI Zip Code 48034-5515

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

Name of Employer Great Lakes Benefit Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11708-P50271**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 1500 Liberty Ridge Dr Ste 321

City Wayne State PA Zip Code 19087-5574

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

Name of Employer Radnor Benefits Group, Inc. Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50892**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Laurel Call
 Full Name (Last, First, Middle Initial)
 Mailing Address 1823 Solitaire Ln
 City State Zip Code
 Mc Lean VA 22101-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAHU Lawyer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50668
 Amount of Each Receipt this Period
 85.00
 Payroll Deduction
 (\$85.00 Monthly)

B. Louie Cason
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 11229
 City State Zip Code
 Columbia SC 29211-1229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Cason Group, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50811
 Amount of Each Receipt this Period
 85.00
 Payroll Deduction
 (\$85.00 Monthly)

C. Lorelei Castellani
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 905
 City State Zip Code
 Branchville NJ 07826-0905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Benefit Guidance Systems Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50812
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction
 (\$25.00 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 164
(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)

Full Name (Last, First, Middle Initial)
A. Mike Castleberry

Mailing Address 506 Holly St

City Little Rock State AR Zip Code 72205-3932

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

Name of Employer HealthSCOPE Benefits Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50814

Amount of Each Receipt this Period **44.00**

Payroll Deduction
(\$44.00 Monthly)

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

Mailing Address PO Box 1547

City Americus State GA Zip Code 31709-1547

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

Name of Employer Russ Childers, CLU Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **795.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11708-P50228

Amount of Each Receipt this Period **95.00**

Payroll Deduction
(\$95.00 Monthly)

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

Mailing Address 545 E 4500 S Ste E250

City Salt Lake City State UT Zip Code 84107-2955

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

Name of Employer Western Benefit Planners Insurance Se Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50831

Amount of Each Receipt this Period **30.00**

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **169.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 164
	<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. Richard Coburn
Full Name (Last, First, Middle Initial)

Mailing Address 19 Minor Ct

City San Rafael State CA Zip Code 94903-3716

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

Name of Employer The Word and Brown Occupation Regional Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50753

Amount of Each Receipt this Period
30.00

Payroll Deduction
 (\$30.00 Monthly)

B. Dorothy Cociu
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6677

City Fullerton State CA Zip Code 92834-6677

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

Name of Employer Advanced Benefit Consulting & Insuran Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50754

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

c. Maggie Coley
Full Name (Last, First, Middle Initial)

Mailing Address 29 Olde Gate Ct

City Pooler State GA Zip Code 31322-8281

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

Name of Employer Coley Benefit Services, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50194

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: (check only one)	PAGE 28 OF 164
	<input checked="checked" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. George Scott Condos		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50085
Mailing Address 8860 S Tenaya Way		Amount of Each Receipt this Period 270.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) B. Teresa Conto		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50196
Mailing Address 15800 Crabbs Branch Way # 350		Amount of Each Receipt this Period 85.00
City Rockville	State MD	Zip Code 20855-2604
FEC ID number of contributing federal political committee. C	Name of Employer Independent Benefit	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	
		Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) C. Troy Cook		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50197
Mailing Address 12421 Meredith Dr		Amount of Each Receipt this Period 85.00
City Urbandale	State IA	Zip Code 50398-3344
FEC ID number of contributing federal political committee. C	Name of Employer Marsh Global Consumer	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 655.00	
		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: (check only one)	PAGE 29 OF 164
	<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)

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

Mailing Address 39500 High Pointe Blvd Ste 400

City Novi	State MI	Zip Code 48375-5517
--------------	-------------	------------------------

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

Name of Employer Health Care Administrators	Occupation Executive Vice President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
529.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50756

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Mike Coppess

Mailing Address 3526 N. 163 Plaza

City Omaha	State NE	Zip Code 68116
---------------	-------------	-------------------

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

Name of Employer M. Coppess, Inc	Occupation Broker
-------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50757

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address PO Box 955

City Baytown	State TX	Zip Code 77522-0955
-----------------	-------------	------------------------

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

Name of Employer United Major Medical, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50677

Amount of Each Receipt this Period
25.00

Payroll Deduction
(\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	97.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Carrie Cox		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50150
Mailing Address 6701 North Broadway, Suite 310 Pa		Amount of Each Receipt this Period 30.00
City Oklahoma City	State OK	Zip Code 73116
FEC ID number of contributing federal political committee. C	Name of Employer Oden Roberts Rohrman Insurance	Occupation Group Benefits Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) B. John Crable		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50680
Mailing Address 200 E Park Dr Ste 600		Amount of Each Receipt this Period 50.00
City Mount Laurel	State NJ	Zip Code 08054-1297
FEC ID number of contributing federal political committee. C	Name of Employer Corporate Synergies Group, Inc.	Occupation VP & Lead Conosultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	Payroll Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) C. Neil Crosby		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50690
Mailing Address 1561 Berkshire Ct		Amount of Each Receipt this Period 50.00
City San Marcos	State CA	Zip Code 92069-1182
FEC ID number of contributing federal political committee. C	Name of Employer Warner Pacific Insurance Services	Occupation Director of Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	Payroll Deduction (\$50.00 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: (check only one)	PAGE 31 OF 164
	<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. Reed Damron
Full Name (Last, First, Middle Initial)

Mailing Address 5880 Live Oak Pkwy Ste 250

City Norcross State GA Zip Code 30093-1740

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

Name of Employer Occupation
HIRE Benefits, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50693

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 25 Rolling Oaks Dr Ste 110

City Thousand Oaks State CA Zip Code 91361-1003

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

Name of Employer Occupation
Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50695

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

C. Kelly Davis
Full Name (Last, First, Middle Initial)

Mailing Address 26 Lake Wire Dr

City Lakeland State FL Zip Code 33815-1510

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

Name of Employer Occupation
OMS Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50434

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Sandra Davis		Date of Receipt 09 / 23 / 2011 Transaction ID : 11708-P50020
Mailing Address PO Box 148		Amount of Each Receipt this Period 42.00
City Watson	State LA	Zip Code 70786-0148
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Agent	Payroll Deduction (\$42.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	

Full Name (Last, First, Middle Initial) B. Johnny Dawkins		Date of Receipt 09 / 23 / 2011 Transaction ID : 11710-P50435
Mailing Address 921-C S McPherson Church Rd		Amount of Each Receipt this Period 142.00
City Fayetteville	State NC	Zip Code 28303-5368
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ebenconcepts President	Payroll Deduction (\$142.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1035.00	

Full Name (Last, First, Middle Initial) C. Craig Dawson		Date of Receipt 09 / 23 / 2011 Transaction ID : 11710-P50436
Mailing Address 3300 N A St Bldg 1 Ste 246		Amount of Each Receipt this Period 50.00
City Midland	State TX	Zip Code 79705-5421
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Crawford & Dawson Benefits Group Broker	Payroll Deduction (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	234.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 164
	<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. Teresa DeBruin
Full Name (Last, First, Middle Initial)

Mailing Address 5880 Live Oak Pkwy Ste 230

City Norcross State GA Zip Code 30093-1740

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **529.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50437

Amount of Each Receipt this Period **42.00**

Payroll Deduction (\$42.00 Monthly)

B. Nathan Dee
Full Name (Last, First, Middle Initial)

Mailing Address 11468 Parkersburg Ave

City Las Vegas State NV Zip Code 89138-6090

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

Name of Employer Business Benefits, Inc. Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **248.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50643

Amount of Each Receipt this Period **31.00**

Payroll Deduction (\$31.00 Monthly)

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

Mailing Address 2811 Lenoir Dr

City Greensboro State NC Zip Code 27408-5212

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

Name of Employer Community Eye Care Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50439

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Scott Delisi		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50021
Mailing Address 475 Fallbrook Blvd		Amount of Each Receipt this Period 30.00
City Lincoln	State NE	Zip Code 68521-9033
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Ameritas Life Insurance Group	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Marie DeWolf		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50442
Mailing Address 1437 Denver Ave # 296		Amount of Each Receipt this Period 30.00
City Loveland	State CO	Zip Code 80538-5226
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Marie DeWolf Insurance, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Rush Dixon		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50410
Mailing Address 1375 Piccard Dr		Amount of Each Receipt this Period 170.00
City Rockville	State MD	Zip Code 20850-4311
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$170.00 Monthly)
Name of Employer Early Cassidy and Schilling	Occupation VP of Employee Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1655.00	

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Russell Dixon
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 285
 City Geneva State IL Zip Code 60134-0285
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Colonial Life Occupation District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50411
 Amount of Each Receipt this Period 27.00
 Payroll Deduction (\$27.00 Monthly)

B. Steve Dodder
 Full Name (Last, First, Middle Initial)
 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 ▼ 940.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50412
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. Cynthia Doucet
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 91180
 City Lafayette State LA Zip Code 70509-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Global Financial Resources, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50005
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 142.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 164
	<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. Betty Doyle
Full Name (Last, First, Middle Initial)
Mailing Address 108 SE 3rd St Ste A
City Moore State OK Zip Code 73160-5208
FEC ID number of contributing federal political committee. **C**
Name of Employer Doyle Insurance Source Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50008
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

B. Dana Drake
Full Name (Last, First, Middle Initial)
Mailing Address 1401 E Sherman Ave
City Coeur D Alene State ID Zip Code 83814-4043
FEC ID number of contributing federal political committee. **C**
Name of Employer Schedler Mack Insurance, Inc. Occupation Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50009
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

C. Sam Drysdale
Full Name (Last, First, Middle Initial)
Mailing Address 4520 S National
City Springfield State MO Zip Code 65810
FEC ID number of contributing federal political committee. **C**
Name of Employer Mercy Health Plans Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **306.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50415
Amount of Each Receipt this Period **42.00**
Payroll Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 164
	<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. Keith Duhon
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 80158

City Lafayette State LA Zip Code 70598-0158

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

Name of Employer The Family Insurance Center, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50010

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Geoffrey Duke
Full Name (Last, First, Middle Initial)

Mailing Address 9920 Kincey Ave Ste 120

City Huntersville State NC Zip Code 28078-2401

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

Name of Employer MPAY Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50418

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Monthly)

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

Mailing Address PO Box 61157

City Corpus Christi State TX Zip Code 78466-1157

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

Name of Employer Heavin & Associates Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50012

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 114.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Wendy Ebner		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50421
Mailing Address 4 Aaa Dr Ste 205		Amount of Each Receipt this Period 30.00
City Hamilton	State NJ	Zip Code 08691-1813
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Savoy Associates	Occupation Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Linda Erlenbach		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50332
Mailing Address 36550 Chester Rd Apt 2301		Amount of Each Receipt this Period 85.00
City Avon	State OH	Zip Code 44011-4006
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$85.00 Monthly)
Name of Employer	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	

Full Name (Last, First, Middle Initial) C. John Fagen		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50977
Mailing Address PO Box 19		Amount of Each Receipt this Period 85.00
City Demotte	State IN	Zip Code 46310-0019
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$85.00 Monthly)
Name of Employer Financial Arts Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	

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 39 OF 164
(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)

Full Name (Last, First, Middle Initial)
A. Valerie Fagen

Mailing Address PO Box 19

City State Zip Code
 Demotte IN 46310-0019

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

Name of Employer Occupation
 Financial Arts, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 291.69

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50978

Amount of Each Receipt this Period
 41.67

Payroll Deduction
 (\$41.67 Monthly)

Full Name (Last, First, Middle Initial)
B. Nicole Fairbairn

Mailing Address 2113 Dakota Dr

City State Zip Code
 Noblesville IN 46062-9075

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

Name of Employer Occupation
 Creative Insurance Concepts, Inc. President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 445.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50979

Amount of Each Receipt this Period
 30.00

Payroll Deduction
 (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Dominick Fanuele

Mailing Address 214 Little Falls Rd Fl 2

City State Zip Code
 Fairfield NJ 07004-2637

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

Name of Employer Occupation
 Fanuele Financial Group LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50980

Amount of Each Receipt this Period
 30.00

Payroll Deduction
 (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 101.67

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 164
	<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)

Full Name (Last, First, Middle Initial)
A. Cheryl Farmer

Mailing Address 5010 Carriage Dr

City Evansville State IN Zip Code 47715-2570

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

Name of Employer Health Resources Inc. Occupation Regional Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50407

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jennifer Farrell

Mailing Address 3800 N Central Ave Fl 9

City Phoenix State AZ Zip Code 85012-1979

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 ▼ **350.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50408

Amount of Each Receipt this Period **40.00**

Payroll Deduction
(\$40.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Sam Fiorentino

Mailing Address 1521 Georgetown Rd Ste 310

City Hudson State OH Zip Code 44236-4078

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

Name of Employer Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50422

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: (check only one)	PAGE 41 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jeffrey Fishback
 Full Name (Last, First, Middle Initial)
 Mailing Address 736 Johnson Ferry Rd Bldg C Ste 2
 City State Zip Code
 Marietta GA 30068-4379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Purchasing Alliance Solutions, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50423
 Amount of Each Receipt this Period
 85.00
 Payroll Deduction
 (\$85.00 Monthly)

B. Erin Fisher
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Courtland Ave Apt 6
 City State Zip Code
 Stamford CT 06902-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Find Medicare Plans Partner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 581.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50424
 Amount of Each Receipt this Period
 87.00
 Payroll Deduction
 (\$87.00 Monthly)

C. Robert Fitzgerald
 Full Name (Last, First, Middle Initial)
 Mailing Address 2842 Landing Way
 City State Zip Code
 Marietta GA 30066-2362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Robert Fitzgerald Insurance Agency, I Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50425
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 202.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 164
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 2510 N Pines Rd Ste 205

City Spokane State WA Zip Code 99206-7636

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

Name of Employer The Fletcher Financial Group Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50428

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Wesley Foster
Full Name (Last, First, Middle Initial)

Mailing Address 411 Copper Cir

City Argyle State TX Zip Code 76226-7333

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

Name of Employer BenefitMall TX Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50431

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Brenda N. Franklin
Full Name (Last, First, Middle Initial)

Mailing Address 7915 N Hale Ave Ste D

City Peoria State IL Zip Code 61615-2088

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

Name of Employer OSF HealthPlans Occupation Group Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50135

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: (check only one)	PAGE 43 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Robert Frazer		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50495
Mailing Address PO Box 31788		Amount of Each Receipt this Period 30.00
City Charleston	State SC	Zip Code 29417-1788
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)	
Name of Employer The LTCi Advisor Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Patricia Freeman		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50496
Mailing Address 15206 John West Rd		Amount of Each Receipt this Period 30.00
City Gonzales	State LA	Zip Code 70737-7131
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)	
Name of Employer Trish Freeman Insurance Services	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Linda Friedrich		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50040
Mailing Address 4435 O St		Amount of Each Receipt this Period 50.00
City Lincoln	State NE	Zip Code 68510-1842
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50.00 Monthly)	
Name of Employer UNICO Financial Services, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 164
	<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. Kelly Fristoe
Full Name (Last, First, Middle Initial)
Mailing Address 807 8th St Ste 300
City Wichita Falls State TX Zip Code 76301-3317
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Financial Partners Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
995.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11708-P50041
Amount of Each Receipt this Period
30.00
Payroll Deduction
(\$30.00 Monthly)

B. Bruce Frizen
Full Name (Last, First, Middle Initial)
Mailing Address 1706 Grayscroft Dr
City Waxhaw State NC Zip Code 28173-6678
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Horizon Benefits Consultants, Inc Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
390.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50497
Amount of Each Receipt this Period
45.00
Payroll Deduction
(\$45.00 Monthly)

C. Michelle Fuller
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1976
City Hattiesburg State MS Zip Code 39403-1976
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Stewart Sneed Hewes/BancorpSouth Insu Vice President
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1045.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50500
Amount of Each Receipt this Period
30.00
Payroll Deduction
(\$30.00 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: (check only one)	PAGE 45 OF 164
	<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. Joan Fusco
Full Name (Last, First, Middle Initial)

Mailing Address 25B Hanover Rd Ste 220

City Florham Park State NJ Zip Code 07932-1443

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

Name of Employer Savoy Associates Occupation Director, Research & Education

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50042

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 905 Prairie St

City Aurora State IL Zip Code 60506-5419

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

Name of Employer GBSA Occupation Owenr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50502

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Joan Galletta
Full Name (Last, First, Middle Initial)

Mailing Address 3342 Kori Rd

City Jacksonville State FL Zip Code 32257-8883

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

Name of Employer JP Perry Insurance, Inc. Occupation Producer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50669

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: (check only one)	PAGE 46 OF 164
	<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. Hollie Gandy
Full Name (Last, First, Middle Initial)

Mailing Address 2920 Duniven Cir Ste 2

City Amarillo State TX Zip Code 79109-1650

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

Name of Employer Senior Solutions Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011

Transaction ID : 11708-P50146

Amount of Each Receipt this Period
 30.00

Payroll Deduction
 (\$30.00 Monthly)

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

Mailing Address 14010 Fnb Pkwy Ste 300

City Omaha State NE Zip Code 68154-5206

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

Name of Employer Harry A. Koch Co. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011

Transaction ID : 11708-P50147

Amount of Each Receipt this Period
 85.00

Payroll Deduction
 (\$85.00 Monthly)

C. Joy Gardner
Full Name (Last, First, Middle Initial)

Mailing Address 9424 Double R Blvd

City Reno State NV Zip Code 89521-5977

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

Name of Employer Comstock Insurance Agencies, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011

Transaction ID : 11708-P50148

Amount of Each Receipt this Period
 40.00

Payroll Deduction
 (\$40.00 Monthly)

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

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

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

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

FOR LINE NUMBER: PAGE 47 OF 164
(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. G. Russell Garner
 Full Name (Last, First, Middle Initial)
 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 Occupation
 Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50673
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

B. Charles Gartlan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1268
 City Toms River State NJ Zip Code 08754-1268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Emerson, Reid & Co. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50675
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction
 (\$100.00 Monthly)

C. David N. Gately
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 8th St Ste 1015
 City Wichita Falls State TX Zip Code 76301-6811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 New York Life Insurance Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2011
Transaction ID : 11646
 Amount of Each Receipt this Period
 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 164
	<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. Charles Giardina
Full Name (Last, First, Middle Initial)

Mailing Address 3838 N Causeway Blvd Ste 3400

City State Zip Code
Metairie LA 70002-8322

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

Name of Employer Occupation
MetLife Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11708-P50164

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address 810 Dutch Square Blvd Ste 115

City State Zip Code
Columbia SC 29210-7337

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

Name of Employer Occupation
Gibson & Associates, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11710-P50698

Amount of Each Receipt this Period
170.00

Payroll Deduction
(\$170.00 Monthly)

C. Michael Gibson
Full Name (Last, First, Middle Initial)

Mailing Address 810 Dutch Square Blvd Ste 115

City State Zip Code
Columbia SC 29210-7337

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

Name of Employer Occupation
Gibson & Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11710-P50697

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: (check only one)	PAGE 49 OF 164
	<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. Richard Girdler
Full Name (Last, First, Middle Initial)

Mailing Address 113 Seaboard Ln Ste C-170

City Franklin State TN Zip Code 37067-8281

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

Name of Employer Cowan Benefit Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **915.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50700

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

B. Patrice Goldfarb
Full Name (Last, First, Middle Initial)

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 Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50716

Amount of Each Receipt this Period **60.00**

Payroll Deduction
(\$60.00 Monthly)

C. Paul Goldman
Full Name (Last, First, Middle Initial)

Mailing Address 26899 Northwestern Hwy Ste 104

City Southfield State MI Zip Code 48033-8419

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

Name of Employer Rogers Benefit Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **248.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50718

Amount of Each Receipt this Period **31.00**

Payroll Deduction
(\$31.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **176.00**

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 50 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Heather Gorman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 Battleground Ave Ste 320
 City Greensboro State NC Zip Code 27410-2491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50721
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Cathy Graham
 Full Name (Last, First, Middle Initial)
 Mailing Address 3020 W Arrowood Rd
 City Charlotte State NC Zip Code 28273-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Employers Association Occupation Director, Benefit Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50722
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Nancy Grasso
 Full Name (Last, First, Middle Initial)
 Mailing Address 3901 Westerre Pkwy Ste 300
 City Richmond State VA Zip Code 23233-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Strategic Employee Benefit Services Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50723
 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: (check only one)	PAGE 51 OF 164
	<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)

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

Mailing Address 233 S 13th St Ste 1650

City Lincoln State NE Zip Code 68508-2036

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

Name of Employer The Harry A. Koch Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **925.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11708-P50180

Amount of Each Receipt this Period **125.00**

Payroll Deduction
(\$125.00 Monthly)

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

Mailing Address 2121 N Webb Rd Ste 309

City Grand Island State NE Zip Code 68803-1751

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

Name of Employer Primark, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50527

Amount of Each Receipt this Period **30.00**

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address 4404 Technology Dr

City South Bend State IN Zip Code 46628-9700

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

Name of Employer Page 1 Benefits, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50530

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 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: (check only one)	PAGE 52 OF 164
	<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. Robert Grundman
Full Name (Last, First, Middle Initial)

Mailing Address 7412 Karl Dr

City Lincoln State NE Zip Code 68516-4368

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

Name of Employer Senior Benefit Strategies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50181

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$50.00 Monthly)

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

Mailing Address 4330 La Jolla Village Dr Ste 330

City San Diego State CA Zip Code 92122-6241

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

Name of Employer Auerbach & Gussin Insurance and Finan Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50726

Amount of Each Receipt this Period 95.00

Payroll Deduction (\$95.00 Monthly)

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

Mailing Address 12833 Riverdance Dr

City Raleigh State NC Zip Code 27613-7093

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

Name of Employer Integrated Benefit Solutions, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50729

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: (check only one)	PAGE 53 OF 164
	<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. Teresa Gutierrez
Full Name (Last, First, Middle Initial)

Mailing Address 12833 Riverdance Dr

City Raleigh State NC Zip Code 27613-7093

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

Name of Employer IBS/White Bear Group Occupation President/Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **545.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50728**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

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 Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50731**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 6107 Hazelwood Ave

City Indianapolis State IN Zip Code 46228-1316

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

Name of Employer D Hall & Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50733**

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: (check only one)	PAGE 54 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Michael Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address I-20 East @ Alphine RD.AX-505
 City Columbia State SC Zip Code 29219-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BlueCross BlueShield of South Carolin Occupation Vice President Major Group Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50737
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

B. Myrna Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Ridgefield Blvd Ste 215
 City Asheville State NC Zip Code 28806-2292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Crescent Preferred Provider Organizat Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50736
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

C. Christopher Harrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 921-C S McPherson Church Rd
 City Fayetteville State NC Zip Code 28303-5368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts Company Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3690.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50740
 Amount of Each Receipt this Period **410.00**
 Payroll Deduction (\$410.00 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 55 OF 164
(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)

Full Name (Last, First, Middle Initial)
A. Larry Harrison

Mailing Address 724 S 9th St

City Las Vegas State NV Zip Code 89101-7015

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

Name of Employer Harrison Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.78**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50739

Amount of Each Receipt this Period
 30.42

Payroll Deduction
 (\$30.42 Monthly)

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

Mailing Address 4200 E Skelly Dr Ste 320

City Tulsa State OK Zip Code 74135-3247

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

Name of Employer Guardian Life Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50741

Amount of Each Receipt this Period
 30.00

Payroll Deduction
 (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Gerald Hartman

Mailing Address PO Box 5716

City Boise State ID Zip Code 83705-0716

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

Name of Employer Insurance Network America Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50742

Amount of Each Receipt this Period
 50.00

Payroll Deduction
 (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► **110.42**

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: (check only one)	PAGE 56 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Matthew Hatfield		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50743
Mailing Address 2207 Springfield Ave		Amount of Each Receipt this Period 40.00
City Fort Wayne	State IN	Zip Code 46805-1541
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Sales Representative	Payroll Deduction (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Lori Headley		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50744
Mailing Address PO Box 14725		Amount of Each Receipt this Period 30.00
City Portland	State OR	Zip Code 97293-0725
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Broker	Payroll Deduction (\$30.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Hedy Hebert		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50745
Mailing Address 4816 Woodberry Ln		Amount of Each Receipt this Period 30.00
City Benton	State LA	Zip Code 71006-9361
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Broker	Payroll Deduction (\$30.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	

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 57 OF 164
	<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. Dan Heffley
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 50031

City Henderson State NV Zip Code 89016-0031

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

Name of Employer Las Vegas Insurance Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50747

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10.00 Monthly)

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

Mailing Address 2500 W Higgins Rd Ste 1135

City Hoffman Estates State IL Zip Code 60169-7239

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

Name of Employer INSource Benefits Consultants Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50750

Amount of Each Receipt this Period 20.00

Payroll Deduction (\$20.00 Monthly)

C. Timothy Hendricks
Full Name (Last, First, Middle Initial)

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 Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50072

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$100.00 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: (check only one)	PAGE 58 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Thomas Henry
 Full Name (Last, First, Middle Initial)
 Mailing Address 19310 Sonoma Hwy Ste A
 City Sonoma State CA Zip Code 95476-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RealCare Insurance Marketing, Inc. Occupation Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50548
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. William Hepscher
 Full Name (Last, First, Middle Initial)
 Mailing Address 38176 Medical Center Ave
 City Zephyrhills State FL Zip Code 33540-1380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Canadian Drugstore Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50549
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. Peter G Herkey
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 4216
 City Sunland State CA Zip Code 91041-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PGH Insurance Marketing Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2011
Transaction ID : 11644
 Amount of Each Receipt this Period 365.00

SUBTOTAL of Receipts This Page (optional).....▶	535.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 164
	<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. Jon Hicks
Full Name (Last, First, Middle Initial)
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 Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50759
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

B. Timothy Hicks
Full Name (Last, First, Middle Initial)
Mailing Address 7305 Hancock Village Dr. #333
City Chesterfield State VA Zip Code 23832
FEC ID number of contributing federal political committee. **C**
Name of Employer Hicks And Associates Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50760
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

C. Joshua Hilgers
Full Name (Last, First, Middle Initial)
Mailing Address 1747 Reese St
City Homewood State AL Zip Code 35209-2517
FEC ID number of contributing federal political committee. **C**
Name of Employer Innovative Benefits Consulting Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50761
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: (check only one)	PAGE 60 OF 164
	<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. John Hinck
Full Name (Last, First, Middle Initial)

Mailing Address 211 McLaws Cir Ste 2

City Williamsburg State VA Zip Code 23185-5649

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

Name of Employer Centaurus Financial, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50763

Amount of Each Receipt this Period
 30.00

Payroll Deduction
 (\$30.00 Monthly)

B. Jimmy Hinson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 28530

City Macon State GA Zip Code 31221-8530

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

Name of Employer BB & T Insurance Services, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50203

Amount of Each Receipt this Period
 10.00

Payroll Deduction
 (\$10.00 Monthly)

C. James H Hissong
Full Name (Last, First, Middle Initial)

Mailing Address 8401 Widmer Rd

City Lenexa State KS Zip Code 66215-5416

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

Name of Employer Jim Hissong Insurance Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50055

Amount of Each Receipt this Period
 30.00

Payroll Deduction
 (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Angela Hogan		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50204
Mailing Address 1233 Lincoln Mall Ste 100		Amount of Each Receipt this Period 30.00
City Lincoln	State NE	Zip Code 68508-2876
FEC ID number of contributing federal political committee. C	Name of Employer BlueCross BlueShield of Nebraska	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) B. Matthew Holcomb		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50767
Mailing Address PO Box 89144		Amount of Each Receipt this Period 30.00
City Atlanta	State GA	Zip Code 30312-0144
FEC ID number of contributing federal political committee. C	Name of Employer Holcomb Insurance Services	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) C. Robert Holland		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50205
Mailing Address PO Box 698		Amount of Each Receipt this Period 30.00
City Centralia	State WA	Zip Code 98531-0698
FEC ID number of contributing federal political committee. C	Name of Employer Centralia General Agencies	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		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: (check only one)	PAGE 62 OF 164
	<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. Al Hombroek
Full Name (Last, First, Middle Initial)

Mailing Address 30 Lumpkin St Ste D

City Lawrenceville State GA Zip Code 30045-8410

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

Name of Employer Multiple Benefits Corporation Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50768**

Amount of Each Receipt this Period **100.00**

Payroll Deduction
(\$100.00 Monthly)

B. Kymberly Hopwood
Full Name (Last, First, Middle Initial)

Mailing Address 530 Water St Fl 7

City Oakland State CA Zip Code 94607-3524

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 ▼ **595.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50769**

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 2850 W Grand Blvd

City Detroit State MI Zip Code 48202-2643

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

Name of Employer Health Alliance Plan Occupation Director of Producer Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **324.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50770**

Amount of Each Receipt this Period **42.00**

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **227.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 164
	<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. Connie Humbert
Full Name (Last, First, Middle Initial)

Mailing Address 100 Professional Center Dr Ste 106

City Rohnert Park State CA Zip Code 94928-2137

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

Name of Employer Connie R. Humbert Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50772

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 1029 Monarch St Ste 130

City Lexington State KY Zip Code 40513-1904

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

Name of Employer Employee Benefit Associates, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50773

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address PO Box 4824

City Jackson State MS Zip Code 39296-4824

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

Name of Employer Hunt Insurance Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50210

Amount of Each Receipt this Period 35.00

Payroll Deduction (\$35.00 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: (check only one)	PAGE 64 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Steven Israel		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50776
Mailing Address 4204 Manor Forest Trl		Amount of Each Receipt this Period 30.00
City Boynton Beach	State FL	Zip Code 33436-8851
FEC ID number of contributing federal political committee.	C	
Name of Employer S. Florida Affiliated Health Insurers	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) B. Leah-Anne Janway		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50088
Mailing Address PO Box 20626		Amount of Each Receipt this Period 30.00
City Oklahoma City	State OK	Zip Code 73156-0626
FEC ID number of contributing federal political committee.	C	
Name of Employer Bigbie, Hensley & Janway Insurance Ag	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) C. Deborah Jeffs		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50579
Mailing Address 3419 Via Lido # 306		Amount of Each Receipt this Period 30.00
City Newport Beach	State CA	Zip Code 92663-3908
FEC ID number of contributing federal political committee.	C	
Name of Employer Progressive Benefit Managers	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		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: (check only one)	PAGE 65 OF 164
	<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. Julie Jennings
Full Name (Last, First, Middle Initial)

Mailing Address 500 Faunce Corner Rd Bldg 100, Su

City Dartmouth State MA Zip Code 02747

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

Name of Employer Sylvia & Co. Ins. Agency, Inc. Occupation Vice President, Employee Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **890.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50580**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 1482 Baron Ct

City Stone Mountain State GA Zip Code 30087-3037

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

Name of Employer David S. Johnson Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1670.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50777**

Amount of Each Receipt this Period **200.00**

Payroll Deduction (\$200.00 Monthly)

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

Mailing Address 12500 Network Blvd Ste 403

City San Antonio State TX Zip Code 78249-3310

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50778**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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: (check only one)	PAGE 66 OF 164
	<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. Suzanne Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 6235 Morrison Blvd Ste 302

City Charlotte	State NC	Zip Code 28211-3508
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FEC ID number of contributing federal political committee. **C**

Name of Employer Strategic Employee Benefit Services	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50214

Amount of Each Receipt this Period
40.00

Payroll Deduction
(\$40.00 Monthly)

B. Cynthia Jones
Full Name (Last, First, Middle Initial)
Mailing Address 32110 Agoura Rd

City Westlake Village	State CA	Zip Code 91361-4026
--------------------------	-------------	------------------------

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

Name of Employer Warner Pacific Insurance Services	Occupation Vice President of Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50782

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Charles Jurkus
Full Name (Last, First, Middle Initial)
Mailing Address 823 Commerce Dr Ste 350

City Oak Brook	State IL	Zip Code 60523-8855
-------------------	-------------	------------------------

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

Name of Employer Employee Benefit Risk Mgmt. Services	Occupation Sales Executive
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50784

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 67 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Lawrence Kaczmarek
 Full Name (Last, First, Middle Initial)
 Mailing Address 2633 State Route 59 Ste B
 City State Zip Code
 Ravenna OH 44266-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kaczmarek Ins. Services Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 279.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50219
 Amount of Each Receipt this Period
 31.00
 Payroll Deduction
 (\$31.00 Monthly)

B. T. Darlene Kaczmarek
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 345
 City State Zip Code
 Ravenna OH 44266-0345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kaczmarek Ins. Services Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 279.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50220
 Amount of Each Receipt this Period
 31.00
 Payroll Deduction
 (\$31.00 Monthly)

C. Jonathan Katz
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 Northpoint Glen Ct
 City State Zip Code
 Herndon VA 20170-2707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Virginia Medical Plans Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50787
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	92.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. George Keeling
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Drawer K-1630 507 Avenue G
 City Levelland State TX Zip Code 79336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer George R. Keeling Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50221
 Amount of Each Receipt this Period **85.00**
 Payroll Deduction
 (\$85.00 Monthly)

B. Dianne Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address 7320 N La Cholla Blvd Ste 154-219
 City Tucson State AZ Zip Code 85741-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sandbrook Benefits Group, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **410.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50222
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction
 (\$50.00 Monthly)

C. Tamara Kennedy
 Full Name (Last, First, Middle Initial)
 Mailing Address 7740 N 16th St Ste 375
 City Phoenix State AZ Zip Code 85020-4481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rogers Benefit Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1685.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50792
 Amount of Each Receipt this Period **200.00**
 Payroll Deduction
 (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Dierdre Kennedy-Simington
 Full Name (Last, First, Middle Initial)
 Mailing Address 3452 E Foothill Blvd Ste 514
 City Pasadena State CA Zip Code 91107-3163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Polenzani Benefits & Insurance Servic Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50793
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. John Kiebler
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 W Vine St Ste 1600
 City Lexington State KY Zip Code 40507-1814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Humana Occupation CHC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50795
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. William S. Killgore
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 Main St Ste 2
 City Grand Junction State CO Zip Code 81501-2465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Valley Financial Services, Inc. Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50796
 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: (check only one)	PAGE 70 OF 164
	<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. Carolyn King
Full Name (Last, First, Middle Initial)

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 Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50797

Amount of Each Receipt this Period **30.00**

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address PO Box 10088

City Yakima State WA Zip Code 98909-1088

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

Name of Employer Conover Insurance, Inc. Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50581

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address PO Box 629

City Roanoke State VA Zip Code 24004-0629

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

Name of Employer D & S Life Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt **09 / 06 / 2011**

Transaction ID : 11626

Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **1115.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Randy Klein
 Full Name (Last, First, Middle Initial)
 Mailing Address 3555 Reserve Commons Dr
 City Medina State OH Zip Code 44256-5900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dorman Farrell, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50582
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Lonnie Klene
 Full Name (Last, First, Middle Initial)
 Mailing Address 14339 Torrey Chase Blvd Ste F
 City Houston State TX Zip Code 77014-1631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Core Benefits Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50583
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. T. Brian Knauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 S Hoover Blvd Ste 208
 City Tampa State FL Zip Code 33609-3533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Florida Insurance Brokers, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50584
 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: (check only one)	PAGE 72 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Linda Koehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 Shelley St
 City Livermore State CA Zip Code 94550-2368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Herzog Insurance Agency Occupation Health Insurance Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11708-P50090
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Eric Kohlsdorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 Ingersoll Ave Ste 200
 City Des Moines State IA Zip Code 50309-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prisma Strategies Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 09 / 13 / 2011
Transaction ID : 11648
 Amount of Each Receipt this Period 250.00

C. Eric Kohlsdorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 Ingersoll Ave Ste 200
 City Des Moines State IA Zip Code 50309-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prisma Strategies Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 09 / 20 / 2011
Transaction ID : 11692
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶	385.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Eric Kohlsdorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 Ingersoll Ave Ste 200
 City Des Moines State IA Zip Code 50309-3102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prisma Strategies Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50223
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

B. Mark Kolterman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 426
 City Seward State NE Zip Code 68434-0426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kolterman Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50799
 Amount of Each Receipt this Period 35.00
 Payroll Deduction (\$35.00 Monthly)

C. Suzanne Kolterman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 426
 City Seward State NE Zip Code 68434-0426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kolterman Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50224
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Ross Kraft		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50801
Mailing Address PO Box 231		Amount of Each Receipt this Period 30.42
City Rome	State NY	Zip Code 13442-0231
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.42 Monthly)	
Name of Employer Brown & Brown Insurance	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.78	

Full Name (Last, First, Middle Initial) B. Mary Kramer		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50225
Mailing Address 2637 S 158th Plz Ste 200		Amount of Each Receipt this Period 42.00
City Omaha	State NE	Zip Code 68130-1769
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$42.00 Monthly)	
Name of Employer Holmes Murphy and Associates, Inc.	Occupation Senior Acct Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 364.00	

Full Name (Last, First, Middle Initial) C. Linda Krueger		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50226
Mailing Address PO Box 9528		Amount of Each Receipt this Period 30.00
City Pueblo	State CO	Zip Code 81008-9400
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30.00 Monthly)	
Name of Employer Beta Health Association, Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....▶	102.42
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: (check only one)	PAGE 75 OF 164
	<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. Daniel LaBroad
Full Name (Last, First, Middle Initial)

Mailing Address 6315 Crested Butte Dr

City Dallas State TX Zip Code 75252-5764

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

Name of Employer Ovation Health & Life Services, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50804

Amount of Each Receipt this Period **85.00**

Payroll Deduction **(\$85.00 Monthly)**

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

Mailing Address 1275 Boardman Poland Rd

City Poland State OH Zip Code 44514-3911

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

Name of Employer First Place Insurance Agency Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50805

Amount of Each Receipt this Period **30.00**

Payroll Deduction **(\$30.00 Monthly)**

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

Mailing Address 10337 N Military Trl

City Palm Beach Gardens State FL Zip Code 33410-4623

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

Name of Employer Plastridge Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50807

Amount of Each Receipt this Period **170.00**

Payroll Deduction **(\$170.00 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: (check only one)	PAGE 76 OF 164
	<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. Mary Landen
Full Name (Last, First, Middle Initial)

Mailing Address 569 Clyde Ave Ste 540 # 540

City Mountain View State CA Zip Code 94043-2257

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

Name of Employer Fallick Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50237

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Andrew LaRocco
Full Name (Last, First, Middle Initial)

Mailing Address 5880 Live Oak Pkwy Ste 230

City Norcross State GA Zip Code 30093-1740

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

Name of Employer The LaRocco Companies Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50835

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40.00 Monthly)

C. Ruthann Laswick
Full Name (Last, First, Middle Initial)

Mailing Address 3800 N Central Ave Fl 9

City Phoenix State AZ Zip Code 85012-1979

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

Name of Employer Black Gould & Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50837

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jim Lawless
 Full Name (Last, First, Middle Initial)
 Mailing Address 989 Governors Ln Ste 350
 City Lexington State KY Zip Code 40513-1173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Advisors dba Lawless Insuranc
 Occupation Owner/Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50839
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

B. Amy L. Layman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2232 Page Rd
 City Durham State NC Zip Code 27703-8921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fort Dearborn Life
 Occupation Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50133
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Scott Leavitt
 Full Name (Last, First, Middle Initial)
 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 Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50840
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Emma S Leigh
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Townpark Ln NW Ste LL1000
 City Kennesaw State GA Zip Code 30144-3729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alliant Health Plans, Inc. Occupation Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50843
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

B. Karen Leonard
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 50
 City Hackettstown State NJ Zip Code 07840-0050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Leonard Financial Group, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50845
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. Robert Lindsay
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Emerson Pl
 City Davenport State IA Zip Code 52801-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Trissel Graham & Toodle Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50591
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	220.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Larry Link
 Full Name (Last, First, Middle Initial)
 Mailing Address 7100 N High St Ste 201
 City State Zip Code
 Worthington OH 43085-2340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 InsuranceLink Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50592
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

B. Scott Lopez
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Oil Center Dr Ste 250
 City State Zip Code
 Lafayette LA 70503-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Insurance Resource Group Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 324.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50847
 Amount of Each Receipt this Period
 42.00
 Payroll Deduction
 (\$42.00 Monthly)

C. Sallie Loughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 E Main St
 City State Zip Code
 Salisbury MD 21801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Avery Hall Benefit Solutions, Inc. Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50136
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Douglas Lubenow
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 W Main St Ste 203
 City Moorestown State NJ Zip Code 08057-2345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lubenow Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50240
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Kate Ludwigson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4257 Southtown Dr
 City Eau Claire State WI Zip Code 54701-2643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Spectrum Insurance Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50851
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10.00 Monthly)

C. Joseph Lunenschloss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1976 Willeo Creek Pt
 City Marietta State GA Zip Code 30068-1554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Digital Insurance, Inc. Occupation Dir. Strategic Partnerships & Acquisi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50852
 Amount of Each Receipt this Period 25.00
 Payroll Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 65.00
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 81 OF 164
(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. Maurice Lyons
 Full Name (Last, First, Middle Initial)
 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 ▼ 2375.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50853
 Amount of Each Receipt this Period 250.00
 Payroll Deduction (\$250.00 Monthly)

B. Jim Malone
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 616
 City Fayetteville State TN Zip Code 37334-0616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Malone Company Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50855
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Deborah Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 1828 E Southeast Loop 323 Ste 200
 City Tyler State TX Zip Code 75701-8340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Feliciano Financial Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50857
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kimberly Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 Black Mountain Ave
 City Black Mountain State NC Zip Code 28711-3402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **360.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50247
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction (\$40.00 Monthly)

B. Phyllis Martinsen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 W Boise Ave Ste 100
 City Boise State ID Zip Code 83706-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Byron Hyatt Erstad & Co Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50858
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

C. Matthew Masone
 Full Name (Last, First, Middle Initial)
 Mailing Address 6731 Columbia Gateway Dr Ste 210
 City Columbia State MD Zip Code 21046-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lincoln Financial Group Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **405.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50860
 Amount of Each Receipt this Period **45.00**
 Payroll Deduction (\$45.00 Monthly)

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 83 OF 164
(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)

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

Mailing Address 7650 Cherrywood Dr

City State Zip Code
Boise ID 83704-3541

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

Name of Employer Occupation
Insurance Specialists Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50861

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Carol Matznick

Mailing Address PO Box 38905

City State Zip Code
Greensboro NC 27438-8905

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

Name of Employer Occupation
North Carolina AHU Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50250

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Michael Matznick

Mailing Address 3300 Battleground Ave Ste 320

City State Zip Code
Greensboro NC 27410-2491

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

Name of Employer Occupation
EbenConcepts Company Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50862

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 172.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 164
	<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. Rebecca McCabe
 Full Name (Last, First, Middle Initial)
 Mailing Address UnitedHealthcare 1001 Winstead Dr
 City Cary State NC Zip Code 27513
 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 ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50595
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Barbara McClaskey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1965 Pine St
 City Redding State CA Zip Code 96001-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Barbara A. McClaskey Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50597
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. John McConnaughey
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 805
 City West Chester State OH Zip Code 45071-0805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JRM & Associates Agency, Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50598
 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: (check only one)	PAGE 85 OF 164
	<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. H. McDermott
Full Name (Last, First, Middle Initial)
Mailing Address 883 Baxter Dr
City South Jordan State UT Zip Code 84095-8506
FEC ID number of contributing federal political committee. **C**
Name of Employer McDermott Company & Associates Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50600
Amount of Each Receipt this Period 50.00
Payroll Deduction (\$50.00 Monthly)

B. Leslie McGerr
Full Name (Last, First, Middle Initial)
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 Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50865
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

C. Susan McGinnis
Full Name (Last, First, Middle Initial)
Mailing Address 8516 E 101st St Ste H
City Tulsa State OK Zip Code 74133-7035
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 ▼ 1450.00

Date of Receipt 09 / 02 / 2011
Transaction ID : 11613
Amount of Each Receipt this Period 30.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 164
	<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. Susan McGinnis
Full Name (Last, First, Middle Initial)

Mailing Address 8516 E 101st St Ste H

City Tulsa State OK Zip Code 74133-7035

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 ▼ 1480.00

Date of Receipt 09 / 21 / 2011
Transaction ID : 11696

Amount of Each Receipt this Period 30.00

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

Mailing Address 8516 E 101st St Ste H

City Tulsa State OK Zip Code 74133-7035

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 ▼ 1510.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50251

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Ward McKalson
Full Name (Last, First, Middle Initial)

Mailing Address 532 Pajaro St

City Salinas State CA Zip Code 93901-3346

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

Name of Employer Leavitt Central Coast Insurance Servi Occupation Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50866

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 87 OF 164
(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. Keith H. McNeil
 Full Name (Last, First, Middle Initial)
 Mailing Address 7200 Redwood Blvd Ste 400
 City State Zip Code
 Novato CA 94945-3249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Elite Brokerage Services, Inc. Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50637
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction
 (\$100.00 Monthly)

B. Eloise Meardith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2347 Sumac Dr
 City State Zip Code
 Augusta GA 30906-5503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Health Insurance Services (H.I.S.) by Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50868
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

C. Mary Mengason
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 E. Main Street
 City State Zip Code
 Salisbury MD 21802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Avery Hall Benefit Solutions, Inc. Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50870
 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 88 OF 164
(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. Griffin L. Meredith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2518 Wendell Ave
 City Louisville State KY Zip Code 40205-3012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FSAB Benefits Occupation Insurance Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50522
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Brad Merker
 Full Name (Last, First, Middle Initial)
 Mailing Address 2720 Acorn Rd
 City Chaska State MN Zip Code 55318-1142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mayo Clinic Health Solutions Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50871
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Norman Michaels
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Business Park Dr Ste 306
 City Armonk State NY Zip Code 10504-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michaels & Associates Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50872
 Amount of Each Receipt this Period 250.00
 Payroll Deduction (\$250.00 Monthly)

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: (check only one)	PAGE 89 OF 164
	<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)

Full Name (Last, First, Middle Initial)
A. Glendae Mitchell

Mailing Address 736 Old Greenville Rd

City Fayetteville State GA Zip Code 30215-5935

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

Name of Employer Benevestco, Inc. Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11708-P50260

Amount of Each Receipt this Period
25.00

Payroll Deduction
 (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Dennis Mobley

Mailing Address 5454 I 55 N # B

City Jackson State MS Zip Code 39211-4027

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

Name of Employer Mobley Insurance Agency, LLC Occupation Office Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11708-P50262

Amount of Each Receipt this Period
50.00

Payroll Deduction
 (\$50.00 Monthly)

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

Mailing Address 137 Executive Dr Ste D

City Madison State MS Zip Code 39110-8456

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

Name of Employer Mobley Insurance Agency LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11708-P50261

Amount of Each Receipt this Period
50.00

Payroll Deduction
 (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. David Moore		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50093
Mailing Address PO Box 1006		Amount of Each Receipt this Period 85.00
City Burlington	State NC	Zip Code 27216-1006
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$85.00 Monthly)
Name of Employer David R. Moore, CLU & Associates	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	

Full Name (Last, First, Middle Initial) B. Wesley Moore		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50094
Mailing Address PO Box 604		Amount of Each Receipt this Period 30.00
City Darlington	State SC	Zip Code 29540-0604
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Moore Insurance Agency, LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Andrew Morf		Date of Receipt MM / DD / YYYY 09 / 02 / 2011 Transaction ID : 11621
Mailing Address 425 2nd St SE Ste 1150		Amount of Each Receipt this Period 365.00
City Cedar Rapids	State IA	Zip Code 52401-1818
FEC ID number of contributing federal political committee. C		
Name of Employer Benefit Solutions, Inc.	Occupation broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

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 91 OF 164
<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. Todd Morrow
Full Name (Last, First, Middle Initial)
Mailing Address 1173 Brittmoore Rd
City Houston State TX Zip Code 77043-5003
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Concepts Occupation General Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **306.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50875
Amount of Each Receipt this Period **42.00**
Payroll Deduction (\$42.00 Monthly)

B. Joseph C. Moss
Full Name (Last, First, Middle Initial)
Mailing Address 8002 Discovery Dr Rm 200
City Richmond State VA Zip Code 23229-8601
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Concepts Occupation HSA Sales Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50263
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$10.00 Monthly)

C. Glen Mulready
Full Name (Last, First, Middle Initial)
Mailing Address 5314 S Yale Ave Ste 601
City Tulsa State OK Zip Code 74135-6273
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Plan Strategies Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50877
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **92.00**
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 92 OF 164
	<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. Ray Musser
Full Name (Last, First, Middle Initial)
Mailing Address 404 N 2nd Ave Ste B
City Upland State CA Zip Code 91786-4793
FEC ID number of contributing federal political committee. **C**
Name of Employer Ray Musser & Associates Insurance Ser Occupation Broker
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50880
Amount of Each Receipt this Period **85.00**
Payroll Deduction **(\$85.00 Monthly)**

B. Joshua Nace
Full Name (Last, First, Middle Initial)
Mailing Address 936 N 34th St Ste 208
City Seattle State WA Zip Code 98103-8869
FEC ID number of contributing federal political committee. **C**
Name of Employer Dental Health Services Occupation Vice President Sales & Service
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50266
Amount of Each Receipt this Period **30.00**
Payroll Deduction **(\$30.00 Monthly)**

C. Katrina Nash
Full Name (Last, First, Middle Initial)
Mailing Address 6812 Rivergate Ln
City Oklahoma City State OK Zip Code 73132-3905
FEC ID number of contributing federal political committee. **C**
Name of Employer Gallagher Benefit Services, Inc Occupation Account Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50276
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: (check only one)	PAGE 93 OF 164
	<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. Penny Nikel
Full Name (Last, First, Middle Initial)

Mailing Address 917 S Main St Ste 200

City Longmont State CO Zip Code 80501-6400

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

Name of Employer: Nikel Insurance Associates LLC
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11710-P50898

Amount of Each Receipt this Period
20.00

Payroll Deduction
(\$20.00 Monthly)

B. B. Ronnell Nolan
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 65128

City Baton Rouge State LA Zip Code 70896-5128

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 ▼
294.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11708-P50281

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

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

Mailing Address PO Box 999

City Franklin State NC Zip Code 28744-0999

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

Name of Employer: The Wayah Agency, Inc.
Occupation: Agent / Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 23 / 2011
Transaction ID : 11708-P50282

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 92.00

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 94 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Pamela Nygaard		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50054
Mailing Address 1014 4th St W		Amount of Each Receipt this Period 30.00
City Kirkland	State WA	Zip Code 98033-5337
FEC ID number of contributing federal political committee. C	Name of Employer Spectera	Occupation Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
		Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) B. Terri Olson		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50096
Mailing Address PO Box 21479		Amount of Each Receipt this Period 50.00
City Keizer	State OR	Zip Code 97307-1479
FEC ID number of contributing federal political committee. C	Name of Employer Olson Insurance	Occupation Independent Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
		Payroll Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) C. Mike Osborne		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50607
Mailing Address 1308 Woodmanor Dr		Amount of Each Receipt this Period 25.00
City Raleigh	State NC	Zip Code 27614-9055
FEC ID number of contributing federal political committee. C	Name of Employer Osborne Insurance Services, Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
		Payroll Deduction (\$25.00 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: (check only one)	PAGE 95 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Tiffany Otis-Albert
 Full Name (Last, First, Middle Initial)
 Mailing Address 27000 W. 11 Mile Road Mail Code B
 City Southfield State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation Director, External Sales Distribution
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50608
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

B. John Parker
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 Laurel Hill Dr
 City Niantic State CT Zip Code 06357-1536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Parker Agency Occupation Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50287
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

C. Jesse Patton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1112 Maple St
 City West Des Moines State IA Zip Code 50265-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Associations Marketing Group, Inc. Occupation CEO/President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50904
 Amount of Each Receipt this Period 350.00
 Payroll Deduction (\$350.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	492.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Lee Patton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1112 Maple St
 City West Des Moines State IA Zip Code 50265-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Associations Marketing Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50289
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Jennifer Pender
 Full Name (Last, First, Middle Initial)
 Mailing Address 1635 Mount McKinley Dr
 City Grayson State GA Zip Code 30017-2980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pender & Associates Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50290
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Ross Pendergraft
 Full Name (Last, First, Middle Initial)
 Mailing Address 21600 Oxnard St Fl 8
 City Woodland Hills State CA Zip Code 91367-4904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USI Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50906
 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: (check only one)	PAGE 97 OF 164
	<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. Kenneth G. Penn
 Full Name (Last, First, Middle Initial)
 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 ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50519
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Carol Pennington
 Full Name (Last, First, Middle Initial)
 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 Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50911
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. William Pennington
 Full Name (Last, First, Middle Initial)
 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 Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50910
 Amount of Each Receipt this Period 40.00
 Payroll Deduction (\$40.00 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 98 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kishan C. Perera
 Full Name (Last, First, Middle Initial)
 Mailing Address 5015 Campuswood Dr Ste 204E
 City East Syracuse State NY Zip Code 13057-4204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Design Services Corp. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2011
Transaction ID : 11671
 Amount of Each Receipt this Period
 365.00

B. David Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address 4660 Lake St
 City Lake Charles State LA Zip Code 70605-5416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BancorpSouth Insurance Services, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50291
 Amount of Each Receipt this Period
 60.00
 Payroll Deduction
 (\$30.00 Monthly)

C. Robert Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address 782 Pioneer Rd
 City Draper State UT Zip Code 84020-9300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Perry Financial Group, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50912
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	455.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Paige Phillips			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50294
Mailing Address PO Box 84			Amount of Each Receipt this Period 42.00
City Calera	State AL	Zip Code 35040-0084	Payroll Deduction (\$42.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 294.00	
Name of Employer Benefit Partners, LLC	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Susan Pittman			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50295
Mailing Address 32418 51st Ave SW			Amount of Each Receipt this Period 50.00
City Federal Way	State WA	Zip Code 98023-1936	Payroll Deduction (\$50.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 450.00	
Name of Employer Insure NW Inc.	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Tom Polenzani			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50609
Mailing Address 3452 E Foothill Blvd Ste 514			Amount of Each Receipt this Period 170.00
City Pasadena	State CA	Zip Code 91107-3163	Payroll Deduction (\$170.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1655.00	
Name of Employer Polenzani Benefits & Ins. Svcs., Inc.	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	262.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 164
	<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. Angela Potts-Bopp
Full Name (Last, First, Middle Initial)
Mailing Address 1323 Highway 2 Ste 300

City Sandpoint	State ID	Zip Code 83864-2700
-------------------	-------------	------------------------

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

Name of Employer Summit Insurance Resource Group	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50099

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. D. Michael Pressley
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 139

City Nashville	State TN	Zip Code 37202-0139
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FEC ID number of contributing federal political committee. **C**

Name of Employer BB&T Insurance Services, Inc.	Occupation EB Officer II
---	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50102

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

C. Terri Pritchard
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 24337

City Winston Salem	State NC	Zip Code 27114-4337
-----------------------	-------------	------------------------

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

Name of Employer IBSI Holdings, Inc.	Occupation CEO
---	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50614

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: (check only one)	PAGE 101 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. John G. Prue		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50052
Mailing Address 12713 S Edinburgh St		Amount of Each Receipt this Period 85.00
City Olathe	State KS	Zip Code 66062-1300
FEC ID number of contributing federal political committee. C	Name of Employer Humana, Inc.	Occupation Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) B. Kathy Rainwater		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50301
Mailing Address 515 W Southwest Loop 323		Amount of Each Receipt this Period 85.00
City Tyler	State TX	Zip Code 75701-9455
FEC ID number of contributing federal political committee. C	Name of Employer Threlkeld & Company Insurance	Occupation Executive Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) C. Susan Rash		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50934
Mailing Address 2108 W Laburnum Ave Ste 310		Amount of Each Receipt this Period 170.00
City Richmond	State VA	Zip Code 23227-4300
FEC ID number of contributing federal political committee. C	Name of Employer BB&T Benefit Consultants of Virginia,	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1145.00	Payroll Deduction (\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	340.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 164
	<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. Jon Rauser
Full Name (Last, First, Middle Initial)

Mailing Address 400 E Wisconsin Ave Ste 200

City Milwaukee	State WI	Zip Code 53202-4499
-------------------	-------------	------------------------

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

Name of Employer The Rauser Agency, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50935

Amount of Each Receipt this Period
250.00

Payroll Deduction
(\$250.00 Monthly)

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

Mailing Address PO Box 14207

City Jackson	State MS	Zip Code 39236-4207
-----------------	-------------	------------------------

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

Name of Employer Stewart Sneed Hewes/BancorpSouth Insu	Occupation Director of Marketing - Life/Health
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50936

Amount of Each Receipt this Period
40.00

Payroll Deduction
(\$40.00 Monthly)

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

Mailing Address 971 N Perry St

City Ottawa	State OH	Zip Code 45875-1218
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50306

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Michael Reddy			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50937
Mailing Address 13800 Jackson Rd			Amount of Each Receipt this Period 85.00
City Mishawaka	State IN	Zip Code 46544-9195	Payroll Deduction (\$85.00 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Keystone Insurers Group	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00		

Full Name (Last, First, Middle Initial) B. Ruppert Reinstadler			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50942
Mailing Address 6443 SW Beaverton Hillsdale Hwy S			Amount of Each Receipt this Period 25.00
City Portland	State OR	Zip Code 97221-4230	Payroll Deduction (\$25.00 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Coordinated Resources Group	Occupation Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Patrick Reuszer			Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50660
Mailing Address 312 Elm Sreet			Amount of Each Receipt this Period 50.00
City Cincinnati	State OH	Zip Code 45202	Payroll Deduction (\$50.00 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Assurant Employee Benfits	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

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 104 OF 164
	<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. Emily Rhoades
Full Name (Last, First, Middle Initial)

Mailing Address 108 E Street Vrain, Ate 12

City Colorado Springs State CO Zip Code 80903

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

Name of Employer Baldrica & Company Occupation Individual Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50946**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

B. R Dane Rianhard
Full Name (Last, First, Middle Initial)

Mailing Address 1 E Pratt St Unit 902

City Baltimore State MD Zip Code 21202-1128

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

Name of Employer FranklinMorris Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50947**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

C. Lori Rice
Full Name (Last, First, Middle Initial)

Mailing Address 1221 S Main St Ste 208

City Boerne State TX Zip Code 78006-2836

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

Name of Employer Wells Fargo Insurance Services USA, I Occupation Sales Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50948**

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: (check only one)	PAGE 105 OF 164
	<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. Russell L Rice
Full Name (Last, First, Middle Initial)
Mailing Address 8000 W Interstate 10 # 715

City San Antonio	State TX	Zip Code 78230-3802
---------------------	-------------	------------------------

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

Name of Employer AVESIS, Inc.	Occupation Regional Vice President of Sales
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50949

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

B. Shan Ricketts
Full Name (Last, First, Middle Initial)
Mailing Address 736 Johnson Ferry Rd Bldg C Ste 2

City Marietta	State GA	Zip Code 30068-4379
------------------	-------------	------------------------

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

Name of Employer Purchasing Alliance Solutions, Inc.	Occupation Executive Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
890.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50951

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

C. Gabriel Ricks
Full Name (Last, First, Middle Initial)
Mailing Address 1612 Marion St Ste 2

City Columbia	State SC	Zip Code 29201-2939
------------------	-------------	------------------------

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

Name of Employer The Cason Group, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50952

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: (check only one)	PAGE 106 OF 164
	<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. Susan Rider
Full Name (Last, First, Middle Initial)

Mailing Address 1402 N Capitol Ave Ste 400

City Indianapolis State IN Zip Code 46202-2375

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

Name of Employer Gregory & Appel Insurance Occupation Senior Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **522.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11708-P50312

Amount of Each Receipt this Period **72.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address PO Box 1635

City Irmo State SC Zip Code 29063-1635

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

Name of Employer American Benefit Services, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **785.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50954

Amount of Each Receipt this Period **100.00**

Payroll Deduction (\$100.00 Monthly)

C. Elizabeth Rios-Carl
Full Name (Last, First, Middle Initial)

Mailing Address 414 Executive Blvd #205

City El Paso State TX Zip Code 79902

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

Name of Employer Occupation VP - Employee Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11708-P50313

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	222.00
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 107 OF 164
	<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. John Ripinger
Full Name (Last, First, Middle Initial)

Mailing Address 1501 E Woodfield Rd Ste 110E

City Schaumburg	State IL	Zip Code 60173-4945
--------------------	-------------	------------------------

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

Name of Employer Ripinger Financial Group, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50314

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address 12200 Northwest Fwy Ste 662

City Houston	State TX	Zip Code 77092-4927
-----------------	-------------	------------------------

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

Name of Employer Northwest General Insurance	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
890.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50957

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

C. Sharon Robbins
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 530

City Asheville	State NC	Zip Code 28802-0530
-------------------	-------------	------------------------

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

Name of Employer Insurance Service of Asheville	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50315

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: (check only one)	PAGE 108 OF 164
	<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. Joseph Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 7101 S 82nd St Ste B

City Lincoln State NE Zip Code 68516-6584

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

Name of Employer Midlands Financial Benefits Occupation Registered Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50316

Amount of Each Receipt this Period 170.00

Payroll Deduction (\$170.00 Monthly)

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

Mailing Address 739 E Jackson St

City Martinsville State IN Zip Code 46151-2033

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

Name of Employer NewDay! Marketing Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50958

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 1775 E Palm Canyon Dr Ste 110 # 2

City Palm Springs State CA Zip Code 92264-1623

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

Name of Employer Palm Canyon Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50317

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: (check only one)	PAGE 109 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Kirk Rouse
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 71628
 City Albany State GA Zip Code 31708-1628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Doherty, Duggan & Rouse Insurors, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50960
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

B. Eugene Rowe
 Full Name (Last, First, Middle Initial)
 Mailing Address 16000 Ventura Blvd
 City Encino State CA Zip Code 91436-2744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer R & R Retirement and Insurance Servic Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50320
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

C. Donna Rudner
 Full Name (Last, First, Middle Initial)
 Mailing Address 4665 Ivygate Cir SE
 City Smyrna State GA Zip Code 30080-6632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Employer Relief, Inc. Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50962
 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: (check only one)	PAGE 110 OF 164
	<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)

Full Name (Last, First, Middle Initial)
A. Francis Ruggiero

Mailing Address 15 Kennedy Dr

City Budd Lake State NJ Zip Code 07828-1438

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

Name of Employer Slattery GA a division of Bollinger Occupation Director of Broker Education

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11710-P50964

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

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

Mailing Address 1A Spruce Hill Rd

City Burlington State MA Zip Code 01803-4012

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

Name of Employer BenefitsMart Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11710-P50966

Amount of Each Receipt this Period
30.00

Payroll Deduction
 (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Gregory Sailer

Mailing Address 8623 Eagle Point Blvd

City Lake Elmo State MN Zip Code 55042-8628

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

Name of Employer Sailer Benefit Services, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11710-P50968

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: (check only one)	PAGE 111 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Stephen Salamon
 Full Name (Last, First, Middle Initial)
 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 Landmark Insurance & Financial Group Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **890.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50969
 Amount of Each Receipt this Period **85.00**
 Payroll Deduction
 (\$85.00 Monthly)

B. Raymer Sale
 Full Name (Last, First, Middle Initial)
 Mailing Address 1735 N Brown Rd Ste 175
 City Lawrenceville State GA Zip Code 30043-8153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer E2E Benefits Services, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1475.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50970
 Amount of Each Receipt this Period **150.00**
 Payroll Deduction
 (\$150.00 Monthly)

C. Rose Sandoval
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Main St Ste 340
 City Stoneham State MA Zip Code 02180-3336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Strategy Partners, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **875.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50972
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction
 (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	335.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 164
	<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)

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

Mailing Address 200 Sandy Springs PI NE # 300A

City Atlanta State GA Zip Code 30328-3854

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

Name of Employer Schiebel & Associates, LLC dba Shopbe Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50444

Amount of Each Receipt this Period **45.00**

Payroll Deduction
(\$45.00 Monthly)

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

Mailing Address PO Box 21533

City Winston Salem State NC Zip Code 27120-1533

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

Name of Employer Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **665.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50445

Amount of Each Receipt this Period **170.00**

Payroll Deduction
(\$170.00 Monthly)

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

Mailing Address 4238 N Limberlost PI

City Tucson State AZ Zip Code 85705-1626

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

Name of Employer AFLAC Occupation Broker Development Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50447

Amount of Each Receipt this Period **42.00**

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **257.00**

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 113 OF 164
	<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. John Schneider
Full Name (Last, First, Middle Initial)
Mailing Address 4300 Sidco Dr Ste 200
City Nashville State TN Zip Code 37204-4537
FEC ID number of contributing federal political committee. **C**
Name of Employer Colonial Life Occupation General Agent
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50026
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

B. Patricia Schrade
Full Name (Last, First, Middle Initial)
Mailing Address 8 Granite PI Ste 34
City Gaithersburg State MD Zip Code 20878-6570
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Kamen Benefits, LLC Occupation Broker
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50449
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

C. Denise Schroeder
Full Name (Last, First, Middle Initial)
Mailing Address 474 E Camino Rancho Cielo
City Sahuarita State AZ Zip Code 85629-8962
FEC ID number of contributing federal political committee. **C**
Name of Employer Cigna Occupation Account Executive
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50450
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: (check only one)	PAGE 114 OF 164
	<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. Alan Schulman
Full Name (Last, First, Middle Initial)

Mailing Address 10010 Colesville Rd Ste A

City Silver Spring State MD Zip Code 20901-2348

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

Name of Employer Insurance Benefits & Advisors Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50451

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

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 Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50452

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

c. B. Kay Schweiger
Full Name (Last, First, Middle Initial)

Mailing Address 9401 Indian Creek Pkwy

City Shawnee Mission State KS Zip Code 66210-2007

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

Name of Employer Trustmark Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50657

Amount of Each Receipt this Period **30.00**

Payroll Deduction
(\$30.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 164
	<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)

Full Name (Last, First, Middle Initial)
A. Ron Segal

Mailing Address 23901 Calabasas Rd Ste 1021

City Calabasas	State CA	Zip Code 91302-3390
-------------------	-------------	------------------------

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

Name of Employer Ron Segal Insurance Services, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50616

Amount of Each Receipt this Period
60.00

Payroll Deduction
(\$60.00 Monthly)

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

Mailing Address PO Box 317

City Driftwood	State TX	Zip Code 78619-0317
-------------------	-------------	------------------------

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

Name of Employer Advanced Benefits Solutions	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50617

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

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

Mailing Address PO Box 189

City Vancouver	State WA	Zip Code 98666-0189
-------------------	-------------	------------------------

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

Name of Employer Biggs Insurance Services	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50618

Amount of Each Receipt this Period
170.00

Payroll Deduction
(\$170.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Ralph Seiler
 Full Name (Last, First, Middle Initial)
 Mailing Address 948 Hawthorn Rd
 City Allentown State PA Zip Code 18103-4678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer R. Steve Seiler Insurance, LCC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50619
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Bruce J. Setlik
 Full Name (Last, First, Middle Initial)
 Mailing Address 17808 Harney St
 City Omaha State NE Zip Code 68118-3500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Community Mutual, Inc. Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50087
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Daniel Severo
 Full Name (Last, First, Middle Initial)
 Mailing Address 231 Chestnut St Ste 410
 City Meadville State PA Zip Code 16335-3458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The DJB Group, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50623
 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: (check only one)	PAGE 117 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Scott Shalek
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 67
 City Ringwood State IL Zip Code 60072-0067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shalek Financial Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50624
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Jon Sharp
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1000
 City Voorhees State NJ Zip Code 08043-0900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hardenbergh Insurance Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50625
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Douglas Sheffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 International Way
 City Springfield State OR Zip Code 97477-1034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PacificSource Health Plans Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50626
 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: (check only one)	PAGE 118 OF 164
	<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. Ronald Sheffield
Full Name (Last, First, Middle Initial)
Mailing Address 7134 Market St Ste 10
City State Zip Code
Wilmington NC 28411-9722
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
A-Sheffield Insurance Agency, Inc. Owner
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11710-P50627
Amount of Each Receipt this Period
30.00
Payroll Deduction
(\$30.00 Monthly)

B. Kenneth Sherlin
Full Name (Last, First, Middle Initial)
Mailing Address 800 Fairview Rd Ste 112
City State Zip Code
Asheville NC 28803-1028
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Keystone Financial & Benefit Resources Regional Director
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11708-P50028
Amount of Each Receipt this Period
42.00
Payroll Deduction
(\$42.00 Monthly)

C. David Sherrill
Full Name (Last, First, Middle Initial)
Mailing Address 407 Center Pointe Cir Ste 1637
City State Zip Code
Altamonte Springs FL 32701-3446
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Sherrill Insurance Brokerage, Inc. Vice President/Life & LTC Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
310.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11710-P50458
Amount of Each Receipt this Period
30.00
Payroll Deduction
(\$30.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 164
	<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. Jeffrey Sherrod
 Full Name (Last, First, Middle Initial)
 Mailing Address 5800 Granite Pkwy Ste 700
 City Plano State TX Zip Code 75024-6612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Healthcare Group Occupation Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50459
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Thomas Shores
 Full Name (Last, First, Middle Initial)
 Mailing Address 8596 W Bolsa St
 City Boise State ID Zip Code 83709-5196
 FEC ID number of contributing federal political committee. **C**
 Name of Employer T.A. Shores Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50461
 Amount of Each Receipt this Period 31.00
 Payroll Deduction (\$31.00 Monthly)

C. Eileen Shrem
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 McCabe Ave Apt C1
 City Bradley Beach State NJ Zip Code 07720-1465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Independent Insurance Planner Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50462
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 91.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Michael Simmang
 Full Name (Last, First, Middle Initial)
 Mailing Address 143 E Austin St
 City Giddings State TX Zip Code 78942-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Network of Texas Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50464
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Roger Skinner
 Full Name (Last, First, Middle Initial)
 Mailing Address 6612 E 75th St Ste 100
 City Indianapolis State IN Zip Code 46250-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IHC Health Solutions Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50030
 Amount of Each Receipt this Period 25.00
 Payroll Deduction (\$25.00 Monthly)

C. David Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1012 Alemany Street
 City Morrisville State NC Zip Code 27560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1470.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11709-P50341
 Amount of Each Receipt this Period 250.00
 Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Gregory Smith		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50474
Mailing Address PO Box 370		Amount of Each Receipt this Period 30.00
City Lincoln	State IL	Zip Code 62656-0370
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Group Marketing Services Inc.	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. Kevin Smith		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50475
Mailing Address 800 Old Campus Trl NE		Amount of Each Receipt this Period 30.00
City Atlanta	State GA	Zip Code 30328-1051
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer KSA Insurance Agency	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Paul Smith		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50477
Mailing Address 100 Queen St		Amount of Each Receipt this Period 121.00
City Southington	State CT	Zip Code 06489-2052
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$121.00 Monthly)
Name of Employer AmeriBen Alliance, LLC	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 763.00	

SUBTOTAL of Receipts This Page (optional).....▶	181.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 164
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address PO Box 56149

City Sherman Oaks State CA Zip Code 91413-1149

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

Name of Employer Genesis Financial Insurance Services Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50473**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

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 ▼ **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11708-P50323**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address PO Box 818

City Sanford State NC Zip Code 27331-0818

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

Name of Employer Benefit Services & Design, Inc. Occupation Benefits Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : **11710-P50480**

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: (check only one)	PAGE 123 OF 164
<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. Scott Snowden
Full Name (Last, First, Middle Initial)
Mailing Address 812 Lyndon Ln Ste 101
City Louisville State KY Zip Code 40222-3844
FEC ID number of contributing federal political committee. **C**
Name of Employer Snowden & Associates, Inc. Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50481
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. Sherry Soileau
Full Name (Last, First, Middle Initial)
Mailing Address 6421 Perkins Rd Bldg A # 2B
City Baton Rouge State LA Zip Code 70808-6200
FEC ID number of contributing federal political committee. **C**
Name of Employer Besselman & Little Agency, LLC Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 515.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50034
Amount of Each Receipt this Period 10.00
Payroll Deduction (\$10.00 Monthly)

C. Tamela Southan
Full Name (Last, First, Middle Initial)
Mailing Address 381 Casa Linda Plz Ste 303
City Dallas State TX Zip Code 75218-3423
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Solutions By Design Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50482
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 164
	<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. Sher Sparano
Full Name (Last, First, Middle Initial)
Mailing Address 7020 108th St # 5-0
City Forest Hills State NY Zip Code 11375-4449
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefits Advisory Service Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **625.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50483
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

B. Richard Spell
Full Name (Last, First, Middle Initial)
Mailing Address 3803 N Elm St
City Greensboro State NC Zip Code 27455-2593
FEC ID number of contributing federal political committee. **C**
Name of Employer United Healthcare Occupation Account Executive
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50484
Amount of Each Receipt this Period **20.00**
Payroll Deduction (\$20.00 Monthly)

c. Anne Sperling
Full Name (Last, First, Middle Initial)
Mailing Address 805 Saint Michaels Dr
City Santa Fe State NM Zip Code 87505-7625
FEC ID number of contributing federal political committee. **C**
Name of Employer Daniels Insurance Agency, Inc. Occupation Employee Benefits Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **605.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50485
Amount of Each Receipt this Period **40.00**
Payroll Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **90.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 164
	<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)

Full Name (Last, First, Middle Initial)
A. Jackie Spragins

Mailing Address PO Box 1071

City State Zip Code
Wichita Falls TX 76307-1071

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

Name of Employer Occupation
Higginbotham Ins Agency, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11708-P50037

Amount of Each Receipt this Period
50.00

Payroll Deduction
(\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Zachary Stafford

Mailing Address 6421 Perkins Rd Bldg A # 2B

City State Zip Code
Baton Rouge LA 70808-6200

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

Name of Employer Occupation
Besselman & Little Agency, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11710-P50629

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Delvin 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. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2011
Transaction ID : 11708-P50112

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 164
	<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. Eugene Starks
Full Name (Last, First, Middle Initial)
Mailing Address 613 Crescent Cir Ste 201
City Ridgeland State MS Zip Code 39157-8635
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Administration Services, Ltd. Occupation Partner
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **815.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50114
Amount of Each Receipt this Period **105.00**
Payroll Deduction
(\$105.00 Monthly)

B. Peter Stehr
Full Name (Last, First, Middle Initial)
Mailing Address 13636 Seward St
City Omaha State NE Zip Code 68154-3823
FEC ID number of contributing federal political committee. **C**
Name of Employer Peter Stehr Insurance Services, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50115
Amount of Each Receipt this Period **30.00**
Payroll Deduction
(\$30.00 Monthly)

C. James Stenger
Full Name (Last, First, Middle Initial)
Mailing Address 354 Eisenhower Parkway Suite 2850
City Livingston State NJ Zip Code 07039
FEC ID number of contributing federal political committee. **C**
Name of Employer BenefitMall Occupation Director of Business Development
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3055.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50116
Amount of Each Receipt this Period **170.00**
Payroll Deduction
(\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **305.00**
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 127 OF 164
<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)

Full Name (Last, First, Middle Initial)
A. Marilyn Stenger

Mailing Address 381 Victoria Drive

City Bridgewater	State NJ	Zip Code 08807
---------------------	-------------	-------------------

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

Name of Employer MVS Consulting	Occupation Broker
------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50117

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 900 Ashwood Pkwy Ste 500

City Atlanta	State GA	Zip Code 30338-6997
-----------------	-------------	------------------------

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

Name of Employer Humana	Occupation Broker
----------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50038

Amount of Each Receipt this Period
30.00

Payroll Deduction
(\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Ames Stetzler

Mailing Address 12980 Metcalf Ave Ste 500

City Overland Park	State KS	Zip Code 66213-2652
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FEC ID number of contributing federal political committee. **C**

Name of Employer The Resource Group, An HRH Company	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50488

Amount of Each Receipt this Period
25.00

Payroll Deduction
(\$25.00 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: (check only one)	PAGE 128 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Tiffany Stiller		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50490
Mailing Address 6200 Canoga Ave Ste 300		Amount of Each Receipt this Period 25.00
City Woodland Hills	State CA	Zip Code 91367-2450
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$25.00 Monthly)
Name of Employer BenefitMall	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Kirk Stoddard		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50492
Mailing Address 1155 Meridian Ave Ste 121		Amount of Each Receipt this Period 10.00
City San Jose	State CA	Zip Code 95125-4331
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$10.00 Monthly)
Name of Employer Kirk Stoddard & Associates	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 655.00	

Full Name (Last, First, Middle Initial) C. Ulrich Storz		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50493
Mailing Address 987 University Ave Ste 14		Amount of Each Receipt this Period 30.00
City Los Gatos	State CA	Zip Code 95032-7640
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer Storz Insurance Services	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 129 OF 164
(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)

Full Name (Last, First, Middle Initial)
A. Rodney Stuart

Mailing Address 9755 Randall Dr Ste 101

City Indianapolis State IN Zip Code 46280-2952

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

Name of Employer Benefit Innovations, LLP Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11708-P50043

Amount of Each Receipt this Period
50.00

Payroll Deduction
 (\$50.00 Monthly)

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

Mailing Address Kennedy, Michener Benefits, LLC 9

City Denver State CO Zip Code 80246

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

Name of Employer Kennedy Michener Benefits, LLC Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **890.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11708-P50044

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

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

Mailing Address 1630 Riverton Rd

City Cinnaminson State NJ Zip Code 08077-2343

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

Name of Employer Innovative Benefit Planning Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2011

Transaction ID : 11710-P50575

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **220.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 164
	<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. James Summers
Full Name (Last, First, Middle Initial)

Mailing Address 8420 West Dodge Road, 5th Floor

City Omaha	State NE	Zip Code 68114
---------------	-------------	-------------------

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

Name of Employer Senior Market Sales, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Transaction ID : 11708-P50045

Amount of Each Receipt this Period
125.00

Payroll Deduction
(\$125.00 Monthly)

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

Mailing Address 131 Interpark Blvd

City San Antonio	State TX	Zip Code 78216-1841
---------------------	-------------	------------------------

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

Name of Employer Wortham Insurance & Risk Management	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Transaction ID : 11710-P50506

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

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

Mailing Address PO Box 31029

City Charleston	State SC	Zip Code 29417-1029
--------------------	-------------	------------------------

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

Name of Employer David M. Gilston Insurance Agency, In	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Transaction ID : 11710-P50508

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 131 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)

Full Name (Last, First, Middle Initial)
A. Ernie Sweat

Mailing Address 393 W Gordon Ave Ste 1

City Layton State UT Zip Code 84041-2391

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

Name of Employer Fringe Benefit Analysts, Inc. Db a Frin Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **306.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50586

Amount of Each Receipt this Period **42.00**

Payroll Deduction
(\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Ryan Swinton

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 Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50509

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 2924 Emerywood Pkwy Ste 200

City Richmond State VA Zip Code 23294-3746

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

Name of Employer Medical Society of Virginia Insurance Occupation Sales/Service Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50512

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **212.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Michael Telesky
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 N Michigan Ave Fl 9
 City Chicago State IL Zip Code 60601-5524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UnitedHealthcare Specialty Benefits Occupation Regional Sales Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50513
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Marsha Tellesbo
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 4th Ave Ste 3200
 City Seattle State WA Zip Code 98154-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tellesbo & Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 990.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50514
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. David Terpening
 Full Name (Last, First, Middle Initial)
 Mailing Address 22850 Crenshaw Blvd Ste 206
 City Torrance State CA Zip Code 90505-3056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Health Plans Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50515
 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: (check only one)	PAGE 133 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Harry Thal
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2137
 City Kernville State CA Zip Code 93238-2137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harry P. Thal Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **595.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50516
 Amount of Each Receipt this Period **85.00**
 Payroll Deduction (\$85.00 Monthly)

B. Laron Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address 916 Main St
 City Vancouver State WA Zip Code 98660-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Biggs Insurance Services Occupation Employee Benefits
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **365.00**

Date of Receipt **09 / 19 / 2011**
Transaction ID : 11677
 Amount of Each Receipt this Period **365.00**

C. Ryan Thorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 10342 Springcrest Ln
 City South Jordan State UT Zip Code 84095-4538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ryan P. Thorn Insurance Planning, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **360.00**

Date of Receipt **09 / 07 / 2011**
Transaction ID : 11634
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **550.00**
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 134 OF 164
	<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. Ryan Thorn
Full Name (Last, First, Middle Initial)
Mailing Address 10342 Springcrest Ln
City South Jordan State UT Zip Code 84095-4538
FEC ID number of contributing federal political committee. **C**
Name of Employer Ryan P. Thorn Insurance Planning, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50118
Amount of Each Receipt this Period **400.00**
Payroll Deduction (\$40.00 Monthly)

B. Helen Todd
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 56166
City Little Rock State AR Zip Code 72215-6166
FEC ID number of contributing federal political committee. **C**
Name of Employer The Todd Agency, Inc. Occupation Chief Financial Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50634
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

C. Daniel Tompkins
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1209
City Alpharetta State GA Zip Code 30009-1209
FEC ID number of contributing federal political committee. **C**
Name of Employer Admin America Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **306.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50120
Amount of Each Receipt this Period **42.00**
Payroll Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **112.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 164
	<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)

Full Name (Last, First, Middle Initial) A. Janet Trautwein		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50050
Mailing Address 2000 14th St N Ste 450		Amount of Each Receipt this Period 170.00
City Arlington	State VA	Zip Code 22201-2573
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$170.00 Monthly)
Name of Employer NAHU	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1530.00	

Full Name (Last, First, Middle Initial) B. C. Louanne Trebing		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11708-P50051
Mailing Address 1806 Patton Dr		Amount of Each Receipt this Period 50.00
City Garland	State TX	Zip Code 75042-8205
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$50.00 Monthly)
Name of Employer Trebing Insurance Services	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Mark Turley		Date of Receipt MM / DD / YYYY 09 / 23 / 2011 Transaction ID : 11710-P50525
Mailing Address 30 E River Park Pl W Ste 140		Amount of Each Receipt this Period 30.00
City Fresno	State CA	Zip Code 93720-1546
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$30.00 Monthly)
Name of Employer LISI	Occupation Small Group/District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 164
	<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. John Ulness
Full Name (Last, First, Middle Initial)

Mailing Address 214 N Superior St Ste 1

City Appleton State WI Zip Code 54911-4774

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

Name of Employer Ulness Health Insurance and Wellness Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50534

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10.00 Monthly)

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

Mailing Address 10546 Justin Dr

City Urbandale State IA Zip Code 50322-3730

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

Name of Employer Van Ahn Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50535

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

C. Catherine Van Zant
Full Name (Last, First, Middle Initial)

Mailing Address 1855 Shelby Ln

City Fayetteville State AR Zip Code 72704-5265

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

Name of Employer Rogers Benefit Group Occupation Sales Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50063

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Robert Vernon		Date of Receipt
Mailing Address 3702 Alton Rd SW		MM / DD / YYYY 09 / 23 / 2011
City	State	Zip Code
Roanoke	VA	24014-3004
FEC ID number of contributing federal political committee.		Transaction ID : 11708-P50064
C		Amount of Each Receipt this Period
		40.00
Name of Employer		Payroll Deduction
Southwind, A Division of The Advisory	Occupation	
	Senior Director, Clinical Integration	
Receipt For:	Aggregate Year-to-Date ▼	(\$40.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	360.00	

Full Name (Last, First, Middle Initial) B. Janice Walker		Date of Receipt
Mailing Address 3555 Reserve Commons Dr		MM / DD / YYYY 09 / 23 / 2011
City	State	Zip Code
Medina	OH	44256-5900
FEC ID number of contributing federal political committee.		Transaction ID : 11710-P50543
C		Amount of Each Receipt this Period
		30.00
Name of Employer		Payroll Deduction
Benefit Designs, Inc.	Occupation	
	Broker	
Receipt For:	Aggregate Year-to-Date ▼	(\$30.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	210.00	

Full Name (Last, First, Middle Initial) C. Rand Wall		Date of Receipt
Mailing Address 12603 Southwest Fwy Ste 620		MM / DD / YYYY 09 / 23 / 2011
City	State	Zip Code
Stafford	TX	77477-3838
FEC ID number of contributing federal political committee.		Transaction ID : 11708-P50066
C		Amount of Each Receipt this Period
		100.00
Name of Employer		Payroll Deduction
Lone Star Health Plans, Ltd.	Occupation	
	President	
Receipt For:	Aggregate Year-to-Date ▼	(\$100.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	900.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Doris Waller
 Full Name (Last, First, Middle Initial)
 Mailing Address 6411 Highland Crest Ln
 City Sachse State TX Zip Code 75048-5552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan-American Benefits Solutions Occupation Senior Sales Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50067
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

B. Timothy Walsh
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 417
 City Hampstead State NC Zip Code 28443-0417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advanced Insurance Systems Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50068
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Jessica F Waltman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 14th St N Ste 450
 City Arlington State VA Zip Code 22201-2573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAHU Occupation VP, Policy and State Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50139
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. M. Hughes Waren
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7661
 City State Zip Code
 Wilmington NC 28406-7661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ebenconcepts, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 765.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11708-P50121
 Amount of Each Receipt this Period
 85.00
 Payroll Deduction
 (\$85.00 Monthly)

B. Stephen Warner
 Full Name (Last, First, Middle Initial)
 Mailing Address 16180 Highway 7
 City State Zip Code
 Minnetonka MN 55345-3403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Warner & Associates Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50644
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

C. Keyana Warren
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 W Carmel Dr Ste 275
 City State Zip Code
 Carmel IN 46032-2521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BDS Agency Account Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 09 / 23 / 2011
Transaction ID : 11710-P50645
 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: (check only one)	PAGE 140 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. John Warwick
 Full Name (Last, First, Middle Initial)
 Mailing Address 1907 Mangrove Ave Ste B
 City Chico State CA Zip Code 95926-2381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer John Warwick Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50646
 Amount of Each Receipt this Period **85.00**
 Payroll Deduction **(\$85.00 Monthly)**

B. Mark Waugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Arendell St Ste 204
 City Morehead City State NC Zip Code 28557-4240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EbenConcepts Occupation Employee Benefits Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **294.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50125
 Amount of Each Receipt this Period **42.00**
 Payroll Deduction **(\$42.00 Monthly)**

C. Dan Webb
 Full Name (Last, First, Middle Initial)
 Mailing Address 5251 Office Park Dr Ste 350
 City Bakersfield State CA Zip Code 93309-0644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Webb Insurance Group Occupation Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1530.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50126
 Amount of Each Receipt this Period **170.00**
 Payroll Deduction **(\$170.00 Monthly)**

SUBTOTAL of Receipts This Page (optional)..... **297.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 164
	<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. Daryl D. Webster
Full Name (Last, First, Middle Initial)

Mailing Address 355 Addie Way

City Lynchburg State VA Zip Code 24501-7294

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

Name of Employer Premier Access Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50667

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

B. Mitchell West
Full Name (Last, First, Middle Initial)

Mailing Address Health Choice One, Attn: Mitch We

City Greenwood Village State CO Zip Code 80111

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

Name of Employer Health Choice One Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11710-P50544

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 532 Cliffview Dr

City Brandon State MS Zip Code 39047-9183

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

Name of Employer Abacus Benefits Management, LLC Occupation Executive Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **09 / 23 / 2011**

Transaction ID : 11708-P50069

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: (check only one)	PAGE 142 OF 164
	<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. Lisa Wetherton
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 98159

City Atlanta	State GA	Zip Code 30359-1859
-----------------	-------------	------------------------

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

Name of Employer Benefit Design Strategies	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50546

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											20.00

Payroll Deduction
(\$20.00 Monthly)

B. Cynthia Whaley
Full Name (Last, First, Middle Initial)
Mailing Address 408 N Washington St Ste A

City Easton	State MD	Zip Code 21601-3704
----------------	-------------	------------------------

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

Name of Employer Avery Hall Benefit Solutions, Inc.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11710-P50547

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											30.00

Payroll Deduction
(\$30.00 Monthly)

C. Robert White
Full Name (Last, First, Middle Initial)
Mailing Address 218 W 6th St

City Tulsa	State OK	Zip Code 74119-1004
---------------	-------------	------------------------

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

Name of Employer CommunityCare HMO Plans of OK	Occupation Marketing Representative
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 11708-P50074

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											30.00

Payroll Deduction
(\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 164
	<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. Dale Whiteis
Full Name (Last, First, Middle Initial)
Mailing Address 7820 S Granite Ave
City Tulsa State OK Zip Code 74136-8456
FEC ID number of contributing federal political committee. **C**
Name of Employer Whiteis Benefits Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50075
Amount of Each Receipt this Period 30.00
Payroll Deduction (\$30.00 Monthly)

B. David Wilcox
Full Name (Last, First, Middle Initial)
Mailing Address 166 River Vista Pl
City Twin Falls State ID Zip Code 83301-3056
FEC ID number of contributing federal political committee. **C**
Name of Employer Magic Valley Insurance, Inc. Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 306.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50553
Amount of Each Receipt this Period 42.00
Payroll Deduction (\$42.00 Monthly)

C. Trei Wild
Full Name (Last, First, Middle Initial)
Mailing Address 2745 Dallas Pkwy Ste 500
City Plano State TX Zip Code 75093-8731
FEC ID number of contributing federal political committee. **C**
Name of Employer Assurant Employee Benefits Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 765.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50554
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 164
	<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. Zach Wilding
Full Name (Last, First, Middle Initial)

Mailing Address 712 Kingston Cir

City Brownsburg State IN Zip Code 46112-8337

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

Name of Employer OneAmerica Occupation Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11710-P50555

Amount of Each Receipt this Period 10.00

Payroll Deduction (\$10.00 Monthly)

B. Amber Williams
Full Name (Last, First, Middle Initial)

Mailing Address 15 Gamecock Ave Ste A

City Charleston State SC Zip Code 29407-3381

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

Name of Employer David Gilston Insurance Agency Occupation Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50077

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 4109 Woodway Dr

City Monroe State LA Zip Code 71201-2218

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

Name of Employer Financial Planning Resources Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 11708-P50076

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 164
	<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. Mike Williams
Full Name (Last, First, Middle Initial)

Mailing Address 302 S 36th St Ste 105

City Omaha State NE Zip Code 68131-3845

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

Name of Employer Williams Deras Associates, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50559

Amount of Each Receipt this Period
 85.00

Payroll Deduction
 (\$85.00 Monthly)

B. Brooke Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 2000 14th St N Ste 450

City Arlington State VA Zip Code 22201-2573

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

Name of Employer National Association of Health Underw Occupation NAHU Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2011
Transaction ID : 11688

Amount of Each Receipt this Period
 500.00

C. Paula Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 31930 Daniel Way

City Temecula State CA Zip Code 92591-2129

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

Name of Employer Paula Wilson, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11708-P50079

Amount of Each Receipt this Period
 85.00

Payroll Deduction
 (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 670.00

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 146 OF 164
	<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. Steven Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 1151 Red Mile Rd
City Lexington State KY Zip Code 40504-2649
FEC ID number of contributing federal political committee. **C**
Name of Employer Benefit Insurance Marketing Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **450.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11709-P50351
Amount of Each Receipt this Period **50.00**
Payroll Deduction **(\$85.00 Monthly)**

B. Thomas Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 701 Lamar St
City Wichita Falls State TX Zip Code 76301-6824
FEC ID number of contributing federal political committee. **C**
Name of Employer Boley Featherston Insurance Agency Occupation Benefits Consulstant/Sales
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **246.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50560
Amount of Each Receipt this Period **42.00**
Payroll Deduction **(\$42.00 Monthly)**

C. Tammy Winn
Full Name (Last, First, Middle Initial)
Mailing Address 2110A Boca Raton Dr Ste 103
City Austin State TX Zip Code 78747-1670
FEC ID number of contributing federal political committee. **C**
Name of Employer Pro Insurance Services Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11708-P50081
Amount of Each Receipt this Period **30.00**
Payroll Deduction **(\$30.00 Monthly)**

SUBTOTAL of Receipts This Page (optional)..... **122.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Shelly Winson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1914
 City Chandler State AZ Zip Code 85244-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer True Choice Benefits LLC Occupation Benefit Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50562
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction
 (\$30.00 Monthly)

B. Dennis Woehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Main St
 City Evansville State IN Zip Code 47708-1464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ONB Insurance Group, Inc. Occupation Group Benefits Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **445.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50563
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction
 (\$30.00 Monthly)

C. Rosanne Wolfe
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 E Swans Nest Rd
 City Tucson State AZ Zip Code 85718-6248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wolfe Insurance & Consultants, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **405.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50564
 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: (check only one)	PAGE 148 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DianaLou Wolff
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3625
 City Kingston State NY Zip Code 12402-3625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Counseling Associates Occupation Group & Health Benefit Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50565
 Amount of Each Receipt this Period **30.00**
 Payroll Deduction (\$30.00 Monthly)

B. Barbara Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 E Ludwig Rd Ste 108
 City Fort Wayne State IN Zip Code 46825-4240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Intrahealthsolutions, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **765.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50651
 Amount of Each Receipt this Period **85.00**
 Payroll Deduction (\$85.00 Monthly)

C. Dennis Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 11617 Coldwater Rd Ste 103
 City Fort Wayne State IN Zip Code 46845-1256
 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 **1115.00**

Date of Receipt **09 / 23 / 2011**
Transaction ID : 11710-P50650
 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: (check only one)	PAGE 149 OF 164
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Luann Yarberry
 Full Name (Last, First, Middle Initial)
 Mailing Address 4500 Bermuda Ln
 City State Zip Code
 Wichita Falls TX 76308-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Higginbotham Ins Agency, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50652
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

B. M. Zach Zinser
 Full Name (Last, First, Middle Initial)
 Mailing Address 330 N Evergreen Rd Ste 6
 City State Zip Code
 Louisville KY 40243-1096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Zinser Benefit Service, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2011
Transaction ID : 11710-P50577
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	28372.93

**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)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Processing Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2011

Transaction ID : 11751

Amount of Each Disbursement this Period

366.71

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Processing Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2011

Transaction ID : 11752

Amount of Each Disbursement this Period

4.95

Full Name (Last, First, Middle Initial)

C. Regions Bank

Mailing Address 4701 N Keystone Ave # 100

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement
Banking Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2011

Transaction ID : 11774

Amount of Each Disbursement this Period

352.34

SUBTOTAL of Disbursements This Page (optional)..... ▶

724.00

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 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)

Full Name (Last, First, Middle Initial)

A. Regions Bank

Mailing Address 4701 N Keystone Ave # 100

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement
Merchant Service Fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 11 / 2011

Transaction ID : 11750

Amount of Each Disbursement this Period

1100.67

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

1100.67

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

1824.67

**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)

Full Name (Last, First, Middle Initial)

A. BILL OWENS FOR CONGRESS

Mailing Address PO BOX 1575

City PLATTSBURGH State NY Zip Code 12901

Purpose of Disbursement
Lunch 9.13

011

Category/
Type

Candidate Name

WILLIAM OWENS

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2011

Transaction ID : 11580

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CANTOR FOR CONGRESS

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement
Dinner 9.13

011

Category/
Type

Candidate Name

ERIC CANTOR

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 07

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2011

Transaction ID : 11655

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CHARLIE DENT FOR CONGRESS

Mailing Address PO BOX 442

City ALLENTOWN State PA Zip Code 18105

Purpose of Disbursement
Reception & Dinner 9.24

011

Category/
Type

Candidate Name

CHARLES W REP DENT

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 15

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2011

Transaction ID : 11654

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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)

Full Name (Last, First, Middle Initial)

A. FITZPATRICK FOR CONGRESS

Mailing Address PO BOX 185

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement
Lunch 9.8

011

Category/
Type

Candidate Name

MICHAEL G. FITZPATRICK

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2011

Transaction ID : 11579

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ERIK PAULSEN

Mailing Address P.O. BOX 44369

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement
Breakfast 9.23

011

Category/
Type

Candidate Name

ERIK PAULSEN

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District: 03

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2011

Transaction ID : 11669

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN BARROW

Mailing Address PO BOX 8166

City SAVANNAH State GA Zip Code 31412

Purpose of Disbursement
Georgia Convention

011

Category/
Type

Candidate Name

JOHN J. BARROW

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2011

Transaction ID : 11650

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF NAN HAYWORTH

Mailing Address 51 GLENEIDA AVENUE

City CARMEL State NY Zip Code 10512

Purpose of Disbursement
Breakfast 9.22

011

Candidate Name

NAN HAYWORTH

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 19

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2011

Transaction ID : 11667

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GRAVES FOR CONGRESS

Mailing Address 2345 GRAND, SUITE 2400

City KANSAS CITY State MO Zip Code 64108

Purpose of Disbursement
luncheon 9.9

011

Candidate Name

Office Sought: House
 Senate
 President
State: MO District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2011

Transaction ID : 11642

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HATCH VICTORY COMMITTEE

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Event 9.22

011

Candidate Name

ORRIN G HATCH

Category/
Type

Office Sought: House
 Senate
 President
State: UT District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2011

Transaction ID : 11701

Amount of Each Disbursement this Period

1000.00

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)

Full Name (Last, First, Middle Initial)

A. HATCH VICTORY COMMITTEE

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Event 9.22

011

Category/
Type

Candidate Name

ORRIN G HATCH

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: UT District: 00

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2011

Transaction ID : 11700

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC

Mailing Address P.O. BOX 3799

City VISTA State CA Zip Code 92085

Purpose of Disbursement
Dinner 9.22

011

Category/
Type

Candidate Name

INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2011

Transaction ID : 11699

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement
Indians vs. Tigers 9.6

011

Category/
Type

Candidate Name

JAMES B RENACCI

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 16

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2011

Transaction ID : 11602

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

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)

Full Name (Last, First, Middle Initial)

A. JUDY BIGGERT FOR CONGRESS

Mailing Address P.O. BOX 637

City HINSDALE State IL Zip Code 60522

Purpose of Disbursement
Lunch 9.22

011

Candidate Name

JUDY BIGGERT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	1

Transaction ID : 11697

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. KENNY MARCHANT FOR CONGRESS

Mailing Address PO BOX 110187

City CARROLLTON State TX Zip Code 75011

Purpose of Disbursement
Dinner 9.7

011

Candidate Name

KENNY E MR. MARCHANT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 24

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	1

Transaction ID : 11581

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. KIND FOR CONGRESS COMMITTEE

Mailing Address 205 5TH AVENUE SOUTH

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement
Reception 9.21

011

Candidate Name

RON KIND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	1

Transaction ID : 11656

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	5	0	0	0	0	0	0	0	0
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3	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. LANCE FOR CONGRESS

Mailing Address PO BOX 225

City COLONIA State NJ Zip Code 07067

Purpose of Disbursement
Lunch 9.21

011

Category/
Type

Candidate Name

LEONARD LANCE

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	1

Transaction ID : 11603

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

B. MANCHIN FOR WEST VIRGINIA

Mailing Address PO BOX 5202

City CHARLESTON State WV Zip Code 25361

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

JOE, III MANCHIN

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WV District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	1	1

Transaction ID : 11713

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

C. MARY BONO MACK COMMITTEE

Mailing Address PO BOX 3370

City PALM SPRINGS State CA Zip Code 92263

Purpose of Disbursement
Breakfast 9.22

011

Category/
Type

Candidate Name

MARY BONO MACK

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	1

Transaction ID : 11668

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. MICHAEL BURGESS FOR CONGRESS

Mailing Address PO BOX 2334

City DENTON State TX Zip Code 76202

Purpose of Disbursement
Contribution

011

Candidate Name

MICHAEL C. DR. BURGESS

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 26

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	1		

Transaction ID : 11714

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. MICHAUD FOR CONGRESS

Mailing Address 213 LISBON ST

City LEWISTON State ME Zip Code 04240

Purpose of Disbursement
Lunch 9.20

011

Candidate Name

MICHAEL H. MICHAUD

Category/
Type

Office Sought: House
 Senate
 President
State: ME District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	1	1		

Transaction ID : 11665

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. MONTANANS FOR REHBERG

Mailing Address PO BOX 1597

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Breakfast 9.8

011

Candidate Name

DENNIS R REHBERG

Category/
Type

Office Sought: House
 Senate
 President
State: MT District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	1		

Transaction ID : 11628

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

4	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

4	0	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. PAUL BROUN COMMITTEE

Mailing Address P.O. BOX 6337

City ATHENS State GA Zip Code 30604

Purpose of Disbursement
Georgia Convention

011

Candidate Name

PAUL COLLINS BROUN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 11652

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ROB ANDREWS U.S. HOUSE COMMITTEE

Mailing Address 215 FOURTH AVENUE

City HADDON HEIGHTS State NJ Zip Code 07076

Purpose of Disbursement
Reception 9.21

011

Candidate Name

ROBERT E. MR. ANDREWS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2011

Transaction ID : 11698

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. RODNEY ALEXANDER FOR CONGRESS INC.

Mailing Address 319 NANCY'S ROAD

City QUITMAN State LA Zip Code 71268

Purpose of Disbursement
Luncheon 9.14

011

Candidate Name

RODNEY M. MR. ALEXANDER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	14	/	2011

Transaction ID : 11572

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. SCHWEIKERT FOR CONGRESS

Mailing Address 8776 E SHEA BLVD, SUITE B3A-626

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
Breakfast 9.8

011

Category/
Type

Candidate Name

DAVID SCHWEIKERT

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: AZ District: 05

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2011

Transaction ID : 11582

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SOUTHERLAND FOR CONGRESS

Mailing Address PO BOX 1692

City LYNN HAVEN State FL Zip Code 32444

Purpose of Disbursement
Dinner 9.13

011

Category/
Type

Candidate Name

WILLIAM STEVE II SOUTHERLAND

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2011

Transaction ID : 11574

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SUE MYRICK FOR CONGRESS

Mailing Address P.O. BOX 37091

City CHARLOTTE State NC Zip Code 28237

Purpose of Disbursement
Event 9.19

011

Category/
Type

Candidate Name

SUE MYRICK

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 09

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2011

Transaction ID : 11577

Amount of Each Disbursement this Period

1000.00

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)

Full Name (Last, First, Middle Initial)

A. TOM REED FOR CONGRESS

Mailing Address 99 W 1ST STREET

City CORNING State NY Zip Code 14830

Purpose of Disbursement
Breakfast 9.9

011

Category/
Type

Candidate Name

THOMAS W II REED

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 29

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2011

Transaction ID : 11573

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. YODER FOR CONGRESS

Mailing Address P.O. BOX 26742

City OVERLAND PARK State KS Zip Code 66225

Purpose of Disbursement
Breakfast 9.15

011

Category/
Type

Candidate Name

KEVIN W YODER

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: KS District: 03

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2011

Transaction ID : 11571

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

38000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)

Full Name (Last, First, Middle Initial)

A. John Humkey

Mailing Address 1029 Monarch St Ste 130

City Lexington State KY Zip Code 40513

Purpose of Disbursement
contribution refunded

010

Candidate Name

John Humkey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 11772

Amount of Each Disbursement this Period

915.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

915.00

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

915.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

Full Name (Last, First, Middle Initial)

A. Congressional Award Foundation

Mailing Address P.O. Box 77440

City Washington State DC Zip Code 20013

Purpose of Disbursement
Dinner 9.15

011

Category/
Type

Candidate Name

Congressional Award Foundation

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2011

Transaction ID : 11658

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2500.00

2500.00
