

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Health Underwriters Political Action Committee

ADDRESS (number and street)

1212 New York Ave

Suite 1100

Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00283135

3. IS THIS
REPORTNEW
(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)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
05 01 2017

through

M M / D D / Y Y Y Y Y Y
05 31 2017

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

Murphy, Jennifer, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Murphy, Jennifer, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
06 08 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
05		01		2017

To:

M M	/	D D	/	Y Y Y Y Y
05		31		2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2017</td></tr></table>	Y	Y	Y	Y	Y	2017						<table><tr><td colspan="5">166294.99</td></tr></table>	166294.99				
Y	Y	Y	Y	Y													
2017																	
166294.99																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">206788.42</td></tr></table>	206788.42															
206788.42																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">42658.00</td></tr></table>	42658.00					<table><tr><td colspan="5">281885.13</td></tr></table>	281885.13									
42658.00																	
281885.13																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">249446.42</td></tr></table>	249446.42					<table><tr><td colspan="5">448180.12</td></tr></table>	448180.12									
249446.42																	
448180.12																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">41271.94</td></tr></table>	41271.94					<table><tr><td colspan="5">240005.64</td></tr></table>	240005.64									
41271.94																	
240005.64																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">208174.48</td></tr></table>	208174.48					<table><tr><td colspan="5">208174.48</td></tr></table>	208174.48									
208174.48																	
208174.48																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	7		

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).....	23861.00	142448.00
(ii) Unitemized	18797.00	139437.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	42658.00	281885.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	42658.00	281885.13
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	42658.00	281885.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42658.00	281885.13

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1311.94	8003.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1311.94	8003.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	39950.00	231950.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	10.00	52.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	10.00	52.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	41271.94	240005.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41271.94	240005.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	42658.00	281885.13
34. Total Contribution Refunds (from Line 28(d))	10.00	52.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42648.00	281833.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1311.94	8003.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1311.94	8003.64

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Southan, Tamela, L., ,

Mailing Address 101 W. Renner Rd., Ste 160

City
Richardson

State
TX

Zip Code
75082-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Benefit Solutions By Design

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 01 / 2017

Transaction ID : 11275531

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kite, William, , ,

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 (for Individual)
D&S Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

MM / DD / YYYY
05 / 01 / 2017

Transaction ID : 11275543

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coppola, Michael, R., ,

Mailing Address 2857 Riviera Drive, Unit 100

City
Fairlawn

State
OH

Zip Code
44333-3469

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brunswick Companies

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 01 / 2017

Transaction ID : 11275554

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

842.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Musser, Ray, M., ,

Mailing Address 404 North Second Avenue, Suite E

City
Upland

State
CA

Zip Code
91786-4793

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ray Musser & Associates Insurance Serv

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : 11275598

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bellman, Mark, , ,

Mailing Address 1250 Capitol of Texas Hwy S
Bldg 1, Suite 400

City

West Lake Hills

State

TX

Zip Code

78746-6428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UnitedHealthcare

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : 11275601

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelly, Bryan, J., ,

Mailing Address 1 Kelly Way

City

Sparks Glencoe

State

MD

Zip Code

21152-9484

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Kelly & Associates Insurance Group, In

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : 11275994

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

635.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Christenson, Shawnee, , ,

Mailing Address PO Box 16394

City
Minneapolis

State
MN

Zip Code
55416-0394

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Crosstown Insurance

Occupation (for Individual)
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : 11275997

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelly, David, , ,

Mailing Address 1 Kelly Way

City
Sparks Glencoe

State
MD

Zip Code
21152-9484

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kelly & Associates Insurance Group, In

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : 11275998

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelly, John, R., ,

Mailing Address 3905 Hudee Dr

City
Bowie

State
MD

Zip Code
20721-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kelly & Associates Insurance Group, In

Occupation (for Individual)
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : 11275999

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1012.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kelly, Francis, X., ,

Mailing Address 1 Kelly Way

City

Sparks Glencoe

State

MD

Zip Code

21152-9484

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Kelly & Associates Insurance Group, In

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2017

Transaction ID : 11276000

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelly, Francis, X., ,

Mailing Address 1 Kelly Way

City

Sparks Glencoe

State

MD

Zip Code

21152-9484

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Kelly & Associates Insurance Group, In

Occupation (for Individual)

Chairman of the Board

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2017

Transaction ID : 11276001

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Frizen, Bruce, , ,

Mailing Address 8058 Corporate Center Dr.
Suite 200

City

Charlotte

State

NC

Zip Code

28226-4359

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L.E. Goodgame & Associates

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

Transaction ID : 11276014

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

1045.00

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

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

FOR LINE NUMBER: PAGE 10 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shores, Thomas, E., ,

Mailing Address 8596 W Bolsa Ct.

City
Boise

State
ID

Zip Code
83709-5196

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
T.A. Shores Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

Transaction ID : 11276016

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schneider, Chad, P., ,

Mailing Address 111 W Illinois St
5th Floor

City
Chicago

State
IL

Zip Code
60654-4505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Code SixFour

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

Transaction ID : 11276017

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Meredith, Griffin, , ,

Mailing Address 550 S 5th St Unit 303

City
Louisville

State
KY

Zip Code
40202-4309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Commonwealth Insurance Partners

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

Transaction ID : 11276019

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 11 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **Warwick, John, L., ,**

Mailing Address 1907 B Mangrove Ave.

City
Chico

State
CA

Zip Code
95926-2381

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
John Warwick Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

Transaction ID : 11276020

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Liechty, Brian, W., ,**

Mailing Address 120 East Washington Street

City
Plymouth

State
IN

Zip Code
46563-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TCU Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2017

Transaction ID : 11276024

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Gwin, David, R., ,**

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

City
Columbia

State
SC

Zip Code
29219-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BlueChoice HealthPlan

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2017

Transaction ID : 11276068

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

212.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lewis, Carolyn, S., ,

Mailing Address 12401 Folsom Blvd, Suite 324

City

Rancho Cordova

State

CA

Zip Code

95742-9419

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lewis Benefits Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 04 / 2017

Transaction ID : 11276072

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Griswold, Nelson, Lee, ,

Mailing Address 115 Penn Warren Drive, #300/304

City

Brentwood

State

TN

Zip Code

37027-5047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bottom Line Solutions, Inc.

Occupation (for Individual)

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 05 / 2017

Transaction ID : 11276085

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harrington, Paula, , ,

Mailing Address 1332 E Beltline Road

City

Richardson

State

TX

Zip Code

75081-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Harrington Insurance Solutions, LLC -

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
05 / 05 / 2017

Transaction ID : 11276087

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

139.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Moore, Robert, L., ,

Mailing Address 1644 Plank Rd

City
Duncansville

State
PA

Zip Code
16635-8376

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L.R. Webber Associates, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2017

Transaction ID : 11276089

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Deru, Scott, E., ,

Mailing Address PO Box 336

City
Layton

State
UT

Zip Code
84041-0336

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Fringe Benefits Analysts

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2017

Transaction ID : 11276094

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rianhard, R. Dane, , ,

Mailing Address 1 E. Pratt St., Unit 902

City
Baltimore

State
MD

Zip Code
21202-1193

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TriBridge Partners, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2017

Transaction ID : 11276095

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

172.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scholz, Paul, Joseph, ,

Mailing Address 17445 Arbor St
Suite 310

City
Omaha

State
NE

Zip Code
68130-4645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OCI Insurance and Financial Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2017

Transaction ID : 11276413

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DeBruin, Teresa, F., ,

Mailing Address 5441 Edgerton Drive

City

Peachtree Corners

State
GA

Zip Code
30092-2185

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DeBruin Benefit Services, Inc./ The La

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2017

Transaction ID : 11276417

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pendorf, Paul, , ,

Mailing Address 31666 W. Nine Dr.

City

Laguna Niguel

State
CA

Zip Code
92677-2955

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Independent Financial Group LLC

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2017

Transaction ID : 11276425

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

220.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Griffin, Mary, , ,

Mailing Address 14 Commerce Road

City
Newtown

State
CT

Zip Code
06470-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

TR Paul, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2017

Transaction ID : 11276427

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bremer, Emily, Black, ,

Mailing Address 8000 Bonhomme Ave., # 213

City

Saint Louis

State

MO

Zip Code

63105-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bremer Conley LLC

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2017

Transaction ID : 11276429

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deagle, Michael, P., ,

Mailing Address 935 National Parkway
Suite 93550

City

Schaumburg

State

IL

Zip Code

60173-5150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BenAxis Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

Transaction ID : 11276437

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

293.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Matsushita, David, , ,

Mailing Address 25B Hanover Road Suite 220

City
Florham Park

State
NJ

Zip Code
07932-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Savoy Associates

Occupation (for Individual)
Senior Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

Transaction ID : 11276441

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Galardini, Richard, F., ,

Mailing Address 7000 Stonewood Dr
Suite 251

City
Wexford

State
PA

Zip Code
15090-7376

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JRG Advisors, LLC

Occupation (for Individual)
Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

Transaction ID : 11276444

Amount of Each Receipt this Period

84.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pendergraft, Ross, W., ,

Mailing Address 21820 Burbank Blvd,
North Building, Suite 300

City
Woodland Hills

State
CA

Zip Code
91367-6476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Leavitt Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

Transaction ID : 11276445

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

219.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sullivan, Ashley, , ,

Mailing Address PO Box 99565

City
Louisville

State
KY

Zip Code
40269-0565

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Van Zandt Emrich and Cary

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

Transaction ID : 11276452

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jennings, Julie, A., ,

Mailing Address 500 Faunce Corner Rd
Bldg 100, Suite 120

City
Dartmouth

State
MA

Zip Code
02747-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sylvia & Co. Ins. Agency, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2017

Transaction ID : 11276454

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eserman, Clifton, W., ,

Mailing Address 2435 N Dixie Hwy

City
Wilton Manors

State
FL

Zip Code
33305-2239

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Incompas Financial, Inc.

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2017

Transaction ID : 11276465

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

169.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buffington, Tammy, , ,

Mailing Address 3112 South 13th

City
Lincoln

State
NE

Zip Code
68502-4514

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

A+ Brokerage

Occupation (for Individual)

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2017

Transaction ID : 11276469

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fisher, Erin, B., ,

Mailing Address 131-6 Courtland Avenue

City

Stamford

State

CT

Zip Code

06902-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Find Medicare Plans

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2017

Transaction ID : 11276472

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Connell, Daniel, J., ,

Mailing Address 5080 Spectrum Dr #700E

City

Addison

State

TX

Zip Code

75001-4636

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Next Level Insurance Agency

Occupation (for Individual)

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2017

Transaction ID : 11276490

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

255.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sklar, Erika, , ,

Mailing Address 1415 Walton Blvd

City
Rochester Hills

State
MI

Zip Code
48309-1775

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tim Crawford Insurance Agency, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2017

Transaction ID : 11276492

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stockstill, Julia Beckie, , ,

Mailing Address 125 E. San Augustine

City
Deer Park

State
TX

Zip Code
77536-4160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stockstill & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2017

Transaction ID : 11276499

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sterner, Heidi, J., ,

Mailing Address 7881 W Charleston Blvd Suite 140

City
Las Vegas

State
NV

Zip Code
89117-8326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Leavitt Group Benefits Services

Occupation (for Individual)
Insurance Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

Transaction ID : 11276670

Amount of Each Receipt this Period

30.00

☐ Memo Item

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nigro, Samuel, , ,

Mailing Address PO Box 697

City
Elkhorn

State
NE

Zip Code
68022-0697

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Compass Benefit Advisors

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

Transaction ID : 11276673

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bievenour, Kathleen, , ,

Mailing Address 15660 Dallas Parkway, Suite 500
LB 60

City
Dallas

State
TX

Zip Code
75248-3354

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Insurance Exchange

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

Transaction ID : 11277318

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Girdler, Richard, R., ,

Mailing Address 5110 Maryland Way, Suite 250

City
Brentwood

State
TN

Zip Code
37027-7508

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cowan, a Division of HUB International

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2017

Transaction ID : 11313074

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

688.00

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

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

FOR LINE NUMBER: PAGE 21 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, David, S., ,

Mailing Address 12138 Big Canoe

City
Big Canoe

State
GA

Zip Code
30143-5157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
David S. Johnson Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2017

Transaction ID : 11313081

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Elkins, Tim, , ,

Mailing Address 2192 Valley Vista Dr

City
Davison

State
MI

Zip Code
48423-8317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Elkins Agency, Inc.

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / 12 / 2017

Transaction ID : 11313139

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hain, Erica, R., ,

Mailing Address 1995 Point Township Drive

City
Northumberland

State
PA

Zip Code
17857-8856

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Keystone Insurers Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 13 / 2017

Transaction ID : 11313229

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

565.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Munger, David, , ,

Mailing Address 3312 W. Magistrate Loop

City
Hayden

State
ID

Zip Code
83835-5019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Munger Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2017

Transaction ID : 11313241

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blakely, Russ, , ,

Mailing Address PO Box 11310

City
Chattanooga

State
TN

Zip Code
37401-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Russ Blakely & Associates, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2017

Transaction ID : 11313247

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Daugherty, Cathy, M., ,

Mailing Address 1122 East Lincoln Avenue
Suite 203

City
Orange

State
CA

Zip Code
92865-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bridge Port Benefits

Occupation (for Individual)
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2017

Transaction ID : 11313250

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

270.00

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

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

FOR LINE NUMBER: PAGE 23 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schiebel, Al, C., ,

Mailing Address 200 Sandy Springs Pl., # 300A

City
Atlanta

State
GA

Zip Code
30328-3854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Schiebel & Associates, LLC dba Shopben

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2017

Transaction ID : 11313252

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Grava, A. Andra, , ,

Mailing Address 40 E. McDermott

City
Allen

State
TX

Zip Code
75002-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The DI Center

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2017

Transaction ID : 11313253

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Powers, Jason, A., ,

Mailing Address 8346 Redbird St

City
Shawnee

State
KS

Zip Code
66227-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Legacy Brokers, LLC

Occupation (for Individual)

Employee Benefits Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2017

Transaction ID : 11313271

Amount of Each Receipt this Period

34.00

☐ Memo Item

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

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

249.00

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

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

FOR LINE NUMBER: PAGE 24 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hopwood, Kymberly, J., ,

Mailing Address 530 Water Street, 7th Floor

City
Oakland

State
CA

Zip Code
94607-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dealey, Renton & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2017

Transaction ID : 11313274

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Manning, Richard, K., ,

Mailing Address 10315 Woodley Avenue, #131

City

Granada Hills

State

CA

Zip Code

91344-6953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Accessible Health Insurance Services.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

Transaction ID : 11313276

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gant, Tom, , ,

Mailing Address 100 North Weinbach Avenue

City

Evansville

State

IN

Zip Code

47711-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Schultheis Life & Health Agency

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

Transaction ID : 11313284

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

212.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fisher, Erin, B., ,

Mailing Address 131-6 Courtland Avenue

City
Stamford

State
CT

Zip Code
06902-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Find Medicare Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

Transaction ID : 11314290

Amount of Each Receipt this Period

510.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clarke, Matthew, A., ,

Mailing Address 1819 Fifth Avenue

City
Troy

State
NY

Zip Code
12180-3364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bouche & Clarke Benefits, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2017

Transaction ID : 11318192

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grangard, Kathleen, F., ,

Mailing Address 11505 Fairchild Gardens Ave
Suite 202

City
Palm Beach Gardens

State
FL

Zip Code
33410-2848

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gehring Group

Occupation (for Individual)
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2017

Transaction ID : 11318235

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

1095.00

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zavala, Tony, , ,

Mailing Address 4200 S. Hulen Sreet, # 330

City
Fort Worth

State
TX

Zip Code
76109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Frost Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

05 / 16 / 2017

Transaction ID : 11318246

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garcia, Rudy, Russell, ,

Mailing Address 1010 N Central Ave

City
Glendale

State
CA

Zip Code
91202-2937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Quandun Insurance Agency, Inc

Occupation (for Individual)
Agency Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

05 / 16 / 2017

Transaction ID : 11318248

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Owens, David, Patrick, ,

Mailing Address 101 Eisenhower Parkway
Second Floor

City
Roseland

State
NJ

Zip Code
07068-1032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
E.B. Cohen & Co., Inc.

Occupation (for Individual)
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

05 / 16 / 2017

Transaction ID : 11318258

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

233.00

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

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

FOR LINE NUMBER: PAGE 27 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bergstrom, Christian, , ,

Mailing Address 300 1st Avenue South,#500

City

Saint Petersburg

State

FL

Zip Code

33701-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wallace Welch & Willingham, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2017

Transaction ID : 11318259

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tompkins, Daniel, R., ,

Mailing Address 1720 Windward Concourse
Suite 290

City

Alpharetta

State

GA

Zip Code

30005-2291

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Admin America, Inc.Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2017

Transaction ID : 11318875

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lujan, Michael, D., ,

Mailing Address 275 Mission St

City

San Francisco

State

CA

Zip Code

94105-1805

FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2017

Transaction ID : 11318877

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

255.00

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Riley, Mark, , ,

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 (for Individual)
American Benefit Services, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 18 / 2017

Transaction ID : 11319779

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fitzgerald, Robert, Mark, ,

Mailing Address 675 N. Highland Ave NE
427

City
Atlanta

State
GA

Zip Code
30306-4685

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Robert Fitzgerald Insurance Agency, In

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 18 / 2017

Transaction ID : 11319780

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Farrell, Jennifer, Liane, ,

Mailing Address 3800 North Central Avenue
9th Floor

City
Phoenix

State
AZ

Zip Code
85012-1979

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Black, Gould & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

487.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 18 / 2017

Transaction ID : 11319791

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

270.00

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

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

FOR LINE NUMBER: PAGE 29 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McMahon, Daniel, W., ,

Mailing Address 501 N. Riverpoint Blvd., Ste 125

City
Spokane

State
WA

Zip Code
99202-1649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PayneWest Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2017

Transaction ID : 11320116

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Meyhoff, Jennifer, , ,

Mailing Address 1031 W 4th Ave., Ste 400

City
Anchorage

State
AK

Zip Code
99501-5905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Marsh & McLennan Agency LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2017

Transaction ID : 11320118

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wolfe, Rosanne, , ,

Mailing Address PO Box 17236

City
Tucson

State
AZ

Zip Code
85731-7236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wolfe Insurance & Consultants, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2017

Transaction ID : 11320122

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

227.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Patton, Lee, R., ,

Mailing Address 1112 Maple Street

City

West Des Moines

State

IA

Zip Code

50265-4420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Associations Marketing Group, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2017

Transaction ID : 11321291

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gadinas, Kathy, M., ,

Mailing Address 16325 Boones Ferry Rd., #204

City

Lake Oswego

State

OR

Zip Code

97035-4297

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Columbia Benefit Solutions, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2017

Transaction ID : 11321295

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mann, William, D., ,

Mailing Address PO Box 691967

City

Houston

State

TX

Zip Code

77269-1967

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Compliance Office

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2017

Transaction ID : 11321297

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

102.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Casinelli, Patrick, , ,

Mailing Address 450 B St # 1800

City
San Diego

State
CA

Zip Code
92101-8005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cavnac & Associates

Occupation (for Individual)
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2017

Transaction ID : 11321318

Amount of Each Receipt this Period

63.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fusco, Joan, A., ,

Mailing Address 25B Hanover Rd., Suite 220

City
Florham Park

State
NJ

Zip Code
07932-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Savoy Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2017

Transaction ID : 11321319

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritter, William, L., ,

Mailing Address 138 W. Main Street, Suite 200

City
Williamston

State
NC

Zip Code
27892-2490

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Triangle Planning Services, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 21 / 2017

Transaction ID : 11321320

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

213.00

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

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

FOR LINE NUMBER: PAGE 32 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stout, Pam, , ,

Mailing Address 3500 N College Ave
Suite 1

City
Fayetteville

State
AR

Zip Code
72703-5107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Redline Health Broker

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2017

Transaction ID : 11321321

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Singleton, Terry, , ,

Mailing Address 1773 Owasco Street

City

Winter Springs

State

FL

Zip Code

32708-5614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sihle Insurance Group

Occupation (for Individual)
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321325

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stevenson, Kenneth, Thomas, ,

Mailing Address 3131 Lonnbladh Road

City

Tallahassee

State

FL

Zip Code

32308-4255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Earl Bacon Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321327

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

255.00

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

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

FOR LINE NUMBER: PAGE 33 OF 103

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cagliola, David, A., ,

Mailing Address 1550 Liberty Ridge Drive
Suite 250

City
Chesterbrook

State
PA

Zip Code
19087-5567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Radnor Benefits Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321334

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henry, Thomas, L., ,

Mailing Address 19310 Sonoma Highway, #A

City

Sonoma

State

CA

Zip Code

95476-5454

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RealCare Insurance Marketing, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321336

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ranf, Jeff, A., ,

Mailing Address 3800 Centerpoint Drive
Suite 540

City

Anchorage

State

AK

Zip Code

99503-5826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USI Insurance Services, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321341

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 34 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wild, Trei, , ,

Mailing Address 3724 Hearst Castle Way

City
Plano

State
TX

Zip Code
75025-3719

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Protect Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321342

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coburn, Richard, P., ,

Mailing Address 19 Minor Court

City

San Rafael

State
CA

Zip Code
94903-3716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Word and Brown

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321352

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Griffey, Don, R., ,

Mailing Address 56294 Prim Rose Circle

City

Elkhart

State
IN

Zip Code
46516-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hailey-Campbell, Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321353

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 35 OF 103

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sale, Raymer, M., ,

Mailing Address 2905 Premiere Parkway
Suite 285

City
Duluth

State
GA

Zip Code
30097-5246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
E2E Benefits Services, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321357

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lindsay, Robert, , ,

Mailing Address 220 Emerson Place

City

Davenport

State

IA

Zip Code

52801-1624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arthur J. Gallagher & Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

Transaction ID : 11321358

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McFarland, Dawn, R., ,

Mailing Address 19509 Haynes St

City

Reseda

State

CA

Zip Code

91335-5729

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
M & M Benefit Solutions Insurance Serv

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321431

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

267.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Thomas, R., ,

Mailing Address 701 Lamar

City
Wichita Falls

State
TX

Zip Code
76301-6824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Boley Featherston Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321432

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Knight, Ronald, David, ,

Mailing Address PO Box 507

City
Carrollton

State
GA

Zip Code
30112-0009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
J. Smith Lanier & Co., Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321433

Amount of Each Receipt this Period

85.00

☐ Memo Item

Monthly Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kohlsdorf, Eric, , ,

Mailing Address 1501 Ingersoll Ave
Suite 200

City
Des Moines

State
IA

Zip Code
50309-3102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Prisma Strategies

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321434

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

255.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Selinsky, Steven, , ,

Mailing Address 28638 Oak Point Drive

City

Farmington Hills

State

MI

Zip Code

48331-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Health Alliance Plan

Occupation (for Individual)

Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321437

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robinson, William, D., ,

Mailing Address 739 East Jackson Street

City

Martinsville

State

IN

Zip Code

46151-2033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NewDay! Marketing

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321439

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McConnaughey, John, R., ,

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 (for Individual)

JRM & Associates Agency, Inc

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321441

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

169.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Jean, M., ,

Mailing Address 208 N Mill

City
Tulsa

State
OK

Zip Code
74361

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brown & Brown Agency of Insurance Prof

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321447

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ackerman, Mark, K., ,

Mailing Address 3700 Forest Drive
Suite 300

City
Columbia

State
SC

Zip Code
29204-4010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insurance Management Group, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321448

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fogle, Albert, , ,

Mailing Address 3111 C St.
Suite 500

City
Anchorage

State
AK

Zip Code
99503-3973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Northrim Benefits Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321458

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

169.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gennaro, Jeffrey, Wm., ,

Mailing Address 3820 W Happy Valley Rd
Ste 141, PMB 606

City
Glendale

State
AZ

Zip Code
85310-3292

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Capitol Insurance Brokers, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321459

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hebert, Hedy, S., ,

Mailing Address 390 Plaza Loop.

City

Bossier City

State

LA

Zip Code

71111-4390

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Benefit Consulting Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321460

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hill, Donna, D., ,

Mailing Address 2905 Premiere Parkway
Suite 285

City

Duluth

State

GA

Zip Code

30097-5246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
E2E Benefits Services Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

382.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321463

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

255.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 103
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LaFay, Stacey, S., ,

Mailing Address 2444 East Hill Rd.

City
Grand Blanc

State
MI

Zip Code
48439-5098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Franklin Benefit Solutions

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

MM / DD / YYYY
 05 / 23 / 2017

Transaction ID : 11321465

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McClaskey, Barbara, A., ,

Mailing Address 1965 Pine Street

City
Redding

State
CA

Zip Code
96001-1921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Barbara McClaskey Insurance Services

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
 05 / 23 / 2017

Transaction ID : 11321466

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rash, Susan, Maley, ,

Mailing Address 2108 West Laburnum Avenue, Suite 3

City
Richmond

State
VA

Zip Code
23227-4300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BB&T Benefit Consultants of Virginia,

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

MM / DD / YYYY
 05 / 23 / 2017

Transaction ID : 11321468

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

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

247.00

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reeves, Valerie, , ,

Mailing Address 3702 Brownsboro Rd

City
Louisville

State
KY

Zip Code
40207-1820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Preferred Benefits, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321469

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rice, Russell, Lee, ,

Mailing Address 8000 IH-10 West, # 715

City
San Antonio

State
TX

Zip Code
78230-3880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVESIS, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321471

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Strong, Cameron, F., ,

Mailing Address 2565 Dexter Ave. N
502

City
Seattle

State
WA

Zip Code
98109-1955

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321475

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

137.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tellesbo-Kembel, Marsha, , ,

Mailing Address 1001 4th Avenue, Suite 3200

City
Seattle

State
WA

Zip Code
98154-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tellesbo & Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.00

Date of Receipt

MM / DD / YYYY
05 / 23 / 2017

Transaction ID : 11321477

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wynkoop Kapostins, Ashley, , ,

Mailing Address 255 Primera Blvd, Suite 264

City
Lake Mary

State
FL

Zip Code
32746-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CIGNA

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 23 / 2017

Transaction ID : 11321482

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thal, Harry, P., ,

Mailing Address 11006 Kernville Rd. #1

City
Kernville

State
CA

Zip Code
93238-9765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Harry P. Thal Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
05 / 23 / 2017

Transaction ID : 11321485

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

297.00

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

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

FOR LINE NUMBER: PAGE 43 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bartlein, Randall, J., ,

Mailing Address 22465 Panther Loop

City
Bradenton

State
FL

Zip Code
34202-6320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Suncoast Benefits & Analytics

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321488

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Copeland, Bob, , ,

Mailing Address 700 Larkspur Landing Circle, Suite

City
Larkspur

State
CA

Zip Code
94939-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321496

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Griffey, Patricia, A., ,

Mailing Address 17535 Generations Dr

City
South Bend

State
IN

Zip Code
46635-1589

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Healy Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321501

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

197.00

TOTAL This Period (last page this line 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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Howard, Michelle, S., ,

Mailing Address 2850 West Grand Boulevard

City
Detroit

State
MI

Zip Code
48202-2643

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Alliance Plan

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321503

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Embry, Michael, A., ,

Mailing Address 26555 Evergreen Road
Suite 535

City
Southfield

State
MI

Zip Code
48076-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Comprehensive Benefits

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2075.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321506

Amount of Each Receipt this Period

415.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thrash, Rachel, B., ,

Mailing Address 214 Milam Street

City
Shreveport

State
LA

Zip Code
71101-3226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Querbes & Nelson A Partnership

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321509

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

530.00

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

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

FOR LINE NUMBER: PAGE 45 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rock, Deidre, Dover, ,

Mailing Address P.O. Box 151

City
Camilla

State
GA

Zip Code
31730-0151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dover Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321513

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stock, Tiffany, , ,

Mailing Address 3111 C St.
Suite 500

City
Anchorage

State
AK

Zip Code
99503-3973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northrim Benefits Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : 11321525

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Passe, Emma, M., ,

Mailing Address 6984 SE Langwood St

City
Hillsboro

State
OR

Zip Code
97123-6023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LaPorte Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2017

Transaction ID : 11322184

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 46 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barrera, Rolando, G., ,

Mailing Address 2621 Camargo

City
Corpus Christi

State
TX

Zip Code
78415-5678

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Roland Barrera Insurance

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2017

Transaction ID : 11322187

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buffum, Ronald, S., ,

Mailing Address 106 South Harris Street
237

City
Round Rock

State
TX

Zip Code
78664-6081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Buffum Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2017

Transaction ID : 11322189

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bear, Dale, F., ,

Mailing Address 2550 NE Douglas St

City
Lees Summit

State
MO

Zip Code
64064-2224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Expat Solutions International dba ESI

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2017

Transaction ID : 11322201

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

184.00

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 47 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Carey, H., ,

Mailing Address Six Concourse Parkway
Suite 2750

City
Atlanta

State
GA

Zip Code
30328-6243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Benefit Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2017

Transaction ID : 11322212

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sokol, David, , ,

Mailing Address 901 Wilshire Drive
Suite 300

City
Troy

State
MI

Zip Code
48084-5611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wilshire Benefits Group Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 25 / 2017

Transaction ID : 11322296

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Feldman, Jeremy, , ,

Mailing Address 1803 Research Blvd
Suite 400

City
Rockville

State
MD

Zip Code
20850-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Aflac

Occupation (for Individual)
Broker Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 25 / 2017

Transaction ID : 11322297

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

262.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reents, Joni, Robin, ,

Mailing Address 5760 W. 120th Avenue
Suite 260

City
Broomfield

State
CO

Zip Code
80020-6939

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reents Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 25 / 2017

Transaction ID : 11322298

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bogott, Christine, M., ,

Mailing Address 125 Grand Avenue, Unit B

City

Grand Junction

State
CO

Zip Code
81501-2251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MHIB Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 25 / 2017

Transaction ID : 11322301

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drysdale, Sam, , ,

Mailing Address P.O. Box 8222

City

Springfield

State
MO

Zip Code
65801-8222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mercy Health Plans

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322932

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

157.00

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

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

FOR LINE NUMBER: PAGE 49 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrison, James, M., ,

Mailing Address 6096 Innovation Way

City
Carlsbad

State
CA

Zip Code
92009-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Morrison Insurance Services, Inc

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322933

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dinkel, Matthew, Kim, ,

Mailing Address 13700 Six Mile Cypress

City

Fort Myers

State

FL

Zip Code

33912-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Alan Williams & Associates Insurance A

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322938

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Steven, L., ,

Mailing Address 1151 Red Mile Road

City

Lexington

State

KY

Zip Code

40504-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Benefit Insurance Marketing

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322944

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

255.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Suzanne, K., ,

Mailing Address 5955 Carnegie Blvd Suite 150

City
Charlotte

State
NC

Zip Code
28209-4664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Employee Benefit Advisors of the Carol

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322946

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kahan, Stacy, , ,

Mailing Address 8707 Skokie Blvd., Ste 206

City
Skokie

State
IL

Zip Code
60077-2272

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lang Financial Group

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322950

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ambro, Heather, , ,

Mailing Address 2157 Welsch Industrial Ct.

City
Saint Louis

State
MO

Zip Code
63146-4220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The ECCHIC Group

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2017

Transaction ID : 11322955

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

220.00

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

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

FOR LINE NUMBER: PAGE 51 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cartier, Fred, , ,

Mailing Address 11555 Sorrento Valley Road
Suite 203

City
San Diego

State
CA

Zip Code
92121-1331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Rogers Benefit Group, Inc.

Occupation (for Individual)
Employee Benefits Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2017

Transaction ID : 11323187

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Underhill, Elizabeth, J., ,

Mailing Address 5951 Canoga Avenue

City

Woodland Hills

State

CA

Zip Code

91367-5010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Underhill Insurance Agency, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2017

Transaction ID : 11323190

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reddy, Michael, S., ,

Mailing Address 13800 Jackson Road

City

Mishawaka

State

IN

Zip Code

46544-9195

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Keystone Insurers Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2017

Transaction ID : 11323194

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

157.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nevins, Erin, , ,

Mailing Address 1207 Troy Schenectady Rd
Suite 201

City
Latham

State
NY

Zip Code
12110-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EP Nevins Insurance Agency Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2017

Transaction ID : 11323195

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bechtold, Annette, , ,

Mailing Address 200 Galleria Pkwy SE
Ste 1950

City
Atlanta

State
GA

Zip Code
30339-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OneDigital

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2017

Transaction ID : 11323196

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mordo, David, , ,

Mailing Address 15 Main St

City
Holmdel

State
NJ

Zip Code
07733-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SlatteryGA, A division of Arthur J. Ga

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2017

Transaction ID : 11323199

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

169.00

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

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

FOR LINE NUMBER: PAGE 53 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gussin, Craig, , ,

Mailing Address 701 Palomar Airport Road #260

City
Carlsbad

State
CA

Zip Code
92011-1047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Auerbach & Gussin Insurance and Financ

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

MM / DD / YYYY
05 / 27 / 2017

Transaction ID : 11323206

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kirkpatrick, Karen, L., ,

Mailing Address 263 N Matteson Lake Road

City

Bronson

State

MI

Zip Code

49028-9313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

On Your Mark Consulting

Occupation (for Individual)

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 27 / 2017

Transaction ID : 11323207

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jackson, Jerry, D., ,

Mailing Address 5113 N. Executive Drive
Suite 102

City

Peoria

State

IL

Zip Code

61614-4893

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Jackson Financial Services

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 27 / 2017

Transaction ID : 11323210

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

254.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hazelbaker, Jay, , ,

Mailing Address 5007 Pine Creek Drive

City
Westerville

State
OH

Zip Code
43081-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tabit, Arganbright & Hazelbaker, Inc.

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323218

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reinstadler, Ruppert, , ,

Mailing Address 6443 SW Beaverton-Hillsdale Hwy
Suite 200

City
Portland

State
OR

Zip Code
97221-4230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Coordinated Resources Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323220

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brody, Andrea, , ,

Mailing Address 6018 E Lowden Rd.

City
Cave Creek

State
AZ

Zip Code
85331-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RXBenefits

Occupation (for Individual)
Vice President of Business Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323221

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

96.00

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 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stedt, Margaret, Evelyn, ,

Mailing Address P. O. Box 74325

City

San Clemente

State

CA

Zip Code

92673-0145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Stedt Insurance Services

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323222

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mannor, Kevin, C., ,

Mailing Address 2205 Trautner Drive

City

Saginaw

State

MI

Zip Code

48604-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mannor Financial Group, Inc.

Occupation (for Individual)

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323223

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lawson, Tonda, , ,

Mailing Address 6611 Orion Drive
Suite 201

City

Fort Myers

State

FL

Zip Code

33912-4329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brown & Brown, Inc.

Occupation (for Individual)

VP Employee Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323224

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

157.00

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 56 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Underhill, Charles, E., ,

Mailing Address PO Box 626

City
Woodland Hills

State
CA

Zip Code
91365-0626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Underhill Insurance Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323226

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Allard, Terry, , ,

Mailing Address 3000 A Street, Suite 400

City
Anchorage

State
AK

Zip Code
99503-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Wilson Agency, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323227

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Childers, Russell, B., ,

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 (for Individual)
Russ Childers, CLU

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323230

Amount of Each Receipt this Period

90.00

☐ Memo Item

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

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

345.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hoffman, Crystal, , ,

Mailing Address P.O. Box 709

City
Sugar Land

State
TX

Zip Code
77487-0709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Benefit Concepts, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323231

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stearns, Candius, Michelle, ,

Mailing Address 3290 W Big Beaver Rd
Ste 503

City
Troy

State
MI

Zip Code
48084-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mason-McBride/DFB

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323236

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Currier, Craig, Thomas, ,

Mailing Address 11213 Davenport St.
Ste. 201

City
Omaha

State
NE

Zip Code
68154-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Aon Risk Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

553.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323250

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

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

255.00

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

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

FOR LINE NUMBER: PAGE 58 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hombroek, Al, , ,

Mailing Address 30 Lumpkin St, Suite D

City
Lawrenceville

State
GA

Zip Code
30046-8410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Multiple Benefits Corporation

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323252

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Paul, E., ,

Mailing Address 100 Queen Street

City
Southington

State
CT

Zip Code
06489-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Paul E Smith Insurance, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323257

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lubenow, Douglas, , ,

Mailing Address 214 West Main Street
Suite 203

City
Moorestown

State
NJ

Zip Code
08057-2345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lubenow Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323258

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

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

302.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ragusa, Ruth, Ferry, ,

Mailing Address 308 Lassalle Drive

City
River Ridge

State
LA

Zip Code
70123-3648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allied Benefits Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2017

Transaction ID : 11323261

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garcia, Ruben, , ,

Mailing Address 329 Park Meadow Way

City
Coppell

State
TX

Zip Code
75019-3343

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G & A Partners

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2017

Transaction ID : 11324886

Amount of Each Receipt this Period

0.00

☒ Memo Item

Refund(s) on Schedule B Totalling \$10.00 This changes
the YTD Total to \$40.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schreder, Lynn, M., ,

Mailing Address 130 North 25th Street

City
Fort Dodge

State
IA

Zip Code
50501-4338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KHI Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433076116297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

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

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

112.00

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

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

FOR LINE NUMBER: PAGE 60 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Madeleine, , ,

Mailing Address P.O. Box 1490,

City
Jackson

State
MS

Zip Code
39215-1490

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Fisher Brown Bottrell Insurance, Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433118916297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McFerrin, Dwane, C., ,

Mailing Address 8420 West Dodge Road
Suite 510

City
Omaha

State
NE

Zip Code
68114-3432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Senior Market Sales, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433168116297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rifkin, Robert, L., ,

Mailing Address 7 Stonewall Lane

City
Mamaroneck

State
NY

Zip Code
10543-1025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insurance & Financial Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433196816297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 61 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brittain, Jennifer, , ,

Mailing Address 208 N. Mill

City
Pryor

State
OK

Zip Code
74361-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brown & Brown, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433214316297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thams, Todd, , ,

Mailing Address 1209 Broadway

City
Denison

State
IA

Zip Code
51442-2632

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Thams Agency

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433308316297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Spleet, Michael, , ,

Mailing Address 2444 East Hill Rd.

City
Grand Blanc

State
MI

Zip Code
48439-5098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Franklin Benefit Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR433316616297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

212.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roney, Robert, L., ,

Mailing Address 600 E Lafayette Blvd.

City
Detroit

State
MI

Zip Code
48226-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
Agent Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR433674116297

Amount of Each Receipt this Period

12.00

☐ Memo Item

P/R Deduction (\$12.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Levit, Donald, , ,

Mailing Address 5120 Woodway Dr Suite 10023

City
Houston

State
TX

Zip Code
77056-1725

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National Prosperity Life and Health In

Occupation (for Individual)
Co-founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR433679116297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schneider, JoEllen, , ,

Mailing Address 1818 W State St

City
Boise

State
ID

Zip Code
83702-3955

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insurance Professionals, Inc.

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

262.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR433791816297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

154.00

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

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

FOR LINE NUMBER: PAGE 63 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garven, John, P., ,

Mailing Address P. O. Box 8

11715 East Main Street -

City

Huntley

State

IL

Zip Code

60142-0008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Benico, LTD

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR43679116297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hartman, Gerald, G., ,

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 (for Individual)

Insurance Network America Inc

Occupation (for Individual)

Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436808016297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Trautwein, Janet, , ,

Mailing Address 1212 New York Ave. NW, Ste 1100

City

Washington

State

DC

Zip Code

20005-3987

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NAHU

Occupation (for Individual)

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436821416297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

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

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

262.00

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

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

FOR LINE NUMBER: PAGE 64 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rios-Carl, Elizabeth, E., ,

Mailing Address 210 North Campbell

City
El Paso

State
TX

Zip Code
79901-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Houghton Financial Partners LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436824516297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Besselman, Thomas, , ,

Mailing Address 6421 Perkins Rd., # 2B, Bldg A

City
Baton Rouge

State
LA

Zip Code
70808-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gallagher Benefit Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436824616297

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Patton, Jesse, A., ,

Mailing Address 1112 Maple Street

City
West Des Moines

State
IA

Zip Code
50265-4420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Associations Marketing Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436829516297

Amount of Each Receipt this Period

350.00

☐ Memo Item

P/R Deduction (\$350.00 Monthly)

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 65 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Berman, David, A, ,

Mailing Address 6510 N. Shadeland Avenue

City
Indianapolis

State
IN

Zip Code
46220-4369

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Neace Lukens Holding Company, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436829716297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ashmore, Elizabeth, , ,

Mailing Address 6102 82nd St, Bldg #6

City
Lubbock

State
TX

Zip Code
79424-0803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ashmore & Associates Insurance Agency,

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436830316297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kramer, Mary, B., ,

Mailing Address 13810 National Bank Parkway, Suite

City
Omaha

State
NE

Zip Code
68154

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Holmes Murphy & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436836216297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 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 66 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Grundman, Robert, A., ,

Mailing Address 7412 Karl Drive

City
Lincoln

State
NE

Zip Code
68516-4368

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Senior Benefit Strategies

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436838916297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Matznick, Michael, E., ,

Mailing Address 3150 N. Elm Street
Suite 201

City
Greensboro

State
NC

Zip Code
27408-3840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EbenConcepts Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436839816297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cociu, Dorothy, M., ,

Mailing Address P.O. Box 6677

City
Fullerton

State
CA

Zip Code
92834-6677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Advanced Benefit Consulting & Insuranc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436844616297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

235.00

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

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

FOR LINE NUMBER: PAGE 67 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wright, Keith, L., ,

Mailing Address 401 W Front St
Ste 4

City
Traverse City

State
MI

Zip Code
49684-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wright Insurance Group

Occupation (for Individual)
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
05 / 31 / 2017

Transaction ID : PR436848516297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fortenberry, H. Larry, , ,

Mailing Address PO Box 16566

City
Jackson

State
MS

Zip Code
39236-6566

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Executive Planning Group, P.A.

Occupation (for Individual)
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
05 / 31 / 2017

Transaction ID : PR436852616297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swayne, Tom, , ,

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 (for Individual)
David M. Gilston Insurance Agency, Inc

Occupation (for Individual)
Broker

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
05 / 31 / 2017

Transaction ID : PR436853716297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

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

184.00

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

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

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

FOR LINE NUMBER: PAGE 68 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **KEELING, George, R., ,**

Mailing Address P.O. Drawer K-1630
 507 Avenue G

City
 Levelland

State
 TX

Zip Code
 79336-3720

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

George R. Keeling Insurance Agency

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2017

Transaction ID : PR436865516297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Mobley, Sandra, V., ,**

Mailing Address 137 Executive Dr. Suite D

City

Madison

State

MS

Zip Code

39110-8456

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Mobley Insurance Agency LLC

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2017

Transaction ID : PR436869316297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Wilson, Paula, L., ,**

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 (for Individual)

Paula Wilson, Inc.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2017

Transaction ID : PR436873516297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R 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: PAGE 69 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAINWATER, Kathy, M., ,

Mailing Address 515 West Southwest Loop 323

City
Tyler

State
TX

Zip Code
75701-9455

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Threlkeld & Company Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436873716297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stuart, Rodney, , ,

Mailing Address 484 E Carmel Dr
Suite 358

City
Carmel

State
IN

Zip Code
46032-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Strategic Insurance Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436883316297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Spragins, Jackie, L., ,

Mailing Address P O Box 2073

City
Wichita Falls

State
TX

Zip Code
76307-2073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allred-Thompson-Mason-Daugherty Insura

Occupation (for Individual)
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436895316297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

185.00

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

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

FOR LINE NUMBER: PAGE 70 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrow, Todd, , ,

Mailing Address 1173 Brittmore

City
Houston

State
TX

Zip Code
77043-5003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Benefit Concepts, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436903716297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cason, Louie, L., ,

Mailing Address PO Box 11229

City
Columbia

State
SC

Zip Code
29211-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Cason Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436934816297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Whitmire, Jimmie, , ,

Mailing Address 503 Eighth Street

City
Wichita Falls

State
TX

Zip Code
76301-6507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Whitmire & Whitmire, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436939116297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

169.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stenger, James, R., ,

Mailing Address 8926 Crown Colony Boulevard

City

Fort Myers

State

FL

Zip Code

33908-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NAHU

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436939916297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seifert, Greg., , ,

Mailing Address P.O. Box 189
916 Main Street

City

Vancouver

State

WA

Zip Code

98666-0189

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Biggs Insurance Services

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436941616297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Parker, John, C., ,

Mailing Address 38 Hope St
Unit 1312

City

Niantic

State

CT

Zip Code

06357-2454

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Parker Agency

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR436986816297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

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

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

355.00

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

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

FOR LINE NUMBER: PAGE 72 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Splawn, William, Craig, ,

Mailing Address 800 Avenue C

City
Katy

State
TX

Zip Code
77493-2302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Splawn & Associates

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR436992816297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fristoe, Kelly, Don, ,

Mailing Address 807 8th Street, Suite 300

City

Wichita Falls

State

TX

Zip Code

76301-3317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Financial Partners

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437002316297

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buie, Scott, T., ,

Mailing Address 6440 South Wasatch Blvd., #150

City

Salt Lake City

State

UT

Zip Code

84121-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Buie Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437010516297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

130.00

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

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

FOR LINE NUMBER: PAGE 73 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gray, Michael, D., ,

Mailing Address 233 South 13th Street, Suite 1650

City
Lincoln

State
NE

Zip Code
68508-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Harry A. Koch Co

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437016716297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwartz, Matt, B., ,

Mailing Address 2950 Breckenridge Lane, Suite 8

City
Louisville

State
KY

Zip Code
40220-1462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Schwartz Insurance Group

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437037816297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Olson, Terri, M., ,

Mailing Address P. O. Box 21479

City
Keizer

State
OR

Zip Code
97307-1479

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Olson Insurance

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437070216297

Amount of Each Receipt this Period

65.00

☐ Memo Item

P/R Deduction (\$65.00 Monthly)

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 74 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **Alberts, Suzetta, E., ,**

Mailing Address 26555 Evergreen Drive
Ste 535

City
Southfield

State
MI

Zip Code
48076-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Comprehensive Benefits

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437076116297

Amount of Each Receipt this Period

84.00

☐ Memo Item

P/R Deduction (\$84.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Lopez, Juan, R., ,**

Mailing Address 22431 Antonio Pkwy
Suite B160-420

City

Rancho Santa Margarita

State
CA

Zip Code
92688-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437079016297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Chornak, Shelley, A., ,**

Mailing Address 7251 Engle Rd. Suite 103

City

Cleveland

State
OH

Zip Code
44130-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sage Partners, LLC

Occupation (for Individual)
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
05 / 31 / 2017

Transaction ID : PR437080816297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

211.00

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

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

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

FOR LINE NUMBER: PAGE 75 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Koehler, Linda Rose, , ,

Mailing Address 235 Main Street

City
Pleasanton

State
CA

Zip Code
94566-8206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Herzog Insurance Agency, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437090116297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kennedy-Simington, Dierdre, , ,

Mailing Address 17200 Ventura Blvd., Suite 312

City
Encino

State
CA

Zip Code
91316-5018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genesis Financial & Insurance Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437094116297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henehan, Joseph, E., ,

Mailing Address 685 Carnegie Dr., Ste. #205

City
San Bernardino

State
CA

Zip Code
92408-3550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Henehan Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437097916297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 76 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roiz, Mario, , ,

Mailing Address 10446 NW 31st Terrace

City
Doral

State
FL

Zip Code
33172-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HR Benefit Services, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437104916297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Buyalos, Joseph, W., ,

Mailing Address 9713 Key West Ave, Suite 401

City
Rockville

State
MD

Zip Code
20850-4082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Insurance Exchange, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437111616297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCEVILLY, BRIAN, J., ,

Mailing Address 4455 S. Pecos Rd.

City
Las Vegas

State
NV

Zip Code
89121-5029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GLB Insurance Group of Nevada

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437117716297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 77 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, Joseph, K., ,

Mailing Address 1128 Lincoln Mall
Suite 200City
LincolnState
NEZip Code
68508-2878FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNICOOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437118016297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vanderwater Bratteli, Wendy, , ,

Mailing Address 515 West Southwest Loop 323

City
TylerState
TXZip Code
75701-9455FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Threlkeld & Company InsuranceOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437122416297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benton, Bruce, D., ,

Mailing Address 17200 Ventura Blvd
Suite 312City
EncinoState
CAZip Code
91316-5018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genesis Financial & Insurance ServicesOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437123016297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

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

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

382.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Friedrich, Linda, K., ,

Mailing Address 4435 O Street

City
Lincoln

State
NE

Zip Code
68510-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNICO Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437129116297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hebert, Laura, L., ,

Mailing Address 935 Graham Road
PO BOX 18508

City
Corpus Christi

State
TX

Zip Code
78418-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hebert Insurance Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437154816297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Robert, H., ,

Mailing Address 6724 S 29th W Place

City
Tulsa

State
OK

Zip Code
74132-1766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PBA HUB International Mid-America

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437174116297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

134.00

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

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

FOR LINE NUMBER: PAGE 79 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **Ducote, Dale, , ,**

Mailing Address 7922 Summa Avenue, Suite B-1

City
Baton Rouge

State
LA

Zip Code
70809-3475

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plus Consulting Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437184616297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Crable, John, B., ,**

Mailing Address 5000 Dearborn Cir. Ste 100

City
Mount Laurel

State
NJ

Zip Code
08054-4108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Corporate Synergies Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437199716297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Braden, Victoria, J., ,**

Mailing Address 3875 Johns Creek Parkway, Suite C

City
Suwanee

State
GA

Zip Code
30024-1294

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Braden Benefit Strategies, Inc

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437201916297

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

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

342.00

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

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

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

FOR LINE NUMBER: PAGE 80 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilson, Lon, G., ,

Mailing Address 3000 A Street, Suite 400

City
Anchorage

State
AK

Zip Code
99503-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Wilson Agency, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437204316297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stenger, Marilyn, A., ,

Mailing Address 8926 Crown Colony Blvd

City
Fort Myers

State
FL

Zip Code
33908-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MVS Consulting

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437206416297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garbina, James, S., ,

Mailing Address 14010 FNB Pkwy Ste 300

City
Omaha

State
NE

Zip Code
68154-5235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Harry A. Koch Co

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437212216297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

255.00

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 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cooper, Catherine, L., ,

Mailing Address 39500 High Pointe Blvd., Suite 400

City
Novi

State
MI

Zip Code
48375-5517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Alliance Administrators

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437218316297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gardner, Joy, K., ,

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 (for Individual)
Comstock Insurance Agencies, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437231216297

Amount of Each Receipt this Period

47.00

☐ Memo Item

P/R Deduction (\$47.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Powers-Booth, Sandra, Lee, ,

Mailing Address 4817 S. 175th Street

City
Seatac

State
WA

Zip Code
98188-3710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Benefits Northwest

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437264316297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

174.00

TOTAL This Period (last page this line 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 82 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **Toups, Jennifer, L., ,**Mailing Address **#1 Galleria Blvd, Suite 1122**

City
Metairie

State
LA

Zip Code
70001-2092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Humana

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : **PR437270516297**

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Summers, James, F., ,**Mailing Address **8420 West Dodge Road, 5th Floor**

City
Omaha

State
NE

Zip Code
68114-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Senior Market Sales, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : **PR437281016297**

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$125.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **Mihalyi-Stiffler, Patricia, , ,**Mailing Address **155 N. Riverview Drive**

City
Anaheim

State
CA

Zip Code
92808-1225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Options in Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : **PR437326116297**

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

252.00

TOTAL This Period (last page this line 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 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pittman, Susan, R., ,

Mailing Address 1010 South 336th Street
Suite 305

City
Federal Way

State
WA

Zip Code
98003-7355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insure NW Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437343516297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lawless, Jim, , ,

Mailing Address Epic Insurance Solutions, LLC
710 East Main Street

City
Lexington

State
KY

Zip Code
40502-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Epic Insurance Solutions, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437348016297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cramer, Valerie, Lynn, ,

Mailing Address 588 - 3 Mile Road, NW
Suite 101

City
Grand Rapids

State
MI

Zip Code
49544-8221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grotenhuis

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437416416297

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

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

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

192.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Robert, S., ,

Mailing Address 7548 Preston Road

City
Frisco

State
TX

Zip Code
75034-5683

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Clark Insurance Associates, PLLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437427216297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rosenblum, Joel, , ,

Mailing Address 230 Lipan Way

City
Boulder

State
CO

Zip Code
80303-3635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insurance for Asset Protection

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437427416297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mutter, Amy, D., ,

Mailing Address 2670 Electric Road

City
Roanoke

State
VA

Zip Code
24018-3511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Innovative Insurance Group, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437454916297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

126.00

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

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

FOR LINE NUMBER: PAGE 85 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Damron, Reed, , ,

Mailing Address 5880 Live Oak Parkway, Suite 250

City
Norcross

State
GA

Zip Code
30093-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HIRE Benefits, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437468916297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, David, C., ,

Mailing Address 915 Englewood Avenue

City
Durham

State
NC

Zip Code
27701-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ebenconcepts Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437474516297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDANIEL, Randy, L., ,

Mailing Address 575 Chambers Road

City
McDonough

State
GA

Zip Code
30253-6447

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
McDaniel Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437485716297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

297.00

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

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

FOR LINE NUMBER: PAGE 86 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rider, Susan, M., ,

Mailing Address 1402 N Capital
#400

City
Indianapolis

State
IN

Zip Code
46202-2375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Gregory & Appel Insurance

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437510716297

Amount of Each Receipt this Period

63.00

☐ Memo Item

P/R Deduction (\$63.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coley, Maggie, , ,

Mailing Address 29 Olde Gate Court

City

Pooler

State

GA

Zip Code

31322-8281

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Coley Benefit Services, Inc

Occupation (for Individual)

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
05 / 31 / 2017

Transaction ID : PR437534016297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mobley, Dennis, F., ,

Mailing Address 137 Executive Drive
Suite D

City

Madison

State

MS

Zip Code

39110-8456

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mobley Insurance Agency, LLC, a Divisi

Occupation (for Individual)

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
05 / 31 / 2017

Transaction ID : PR437587516297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

155.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 87 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Waller, Doris, , ,

Mailing Address 1778 N. Plano Rd.
Suite 310

City
Richardson

State
TX

Zip Code
75081-1958

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pan-American Life Insurance Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437591516297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robinson, Judith, L., ,

Mailing Address P O Box 10071

City
Tyler

State
TX

Zip Code
75711-0071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CFG Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437594116297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swinton, Ryan, R., ,

Mailing Address 1128 Lincoln Mall
Suite 200

City
Lincoln

State
NE

Zip Code
68508-2878

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNICO Group, Inc.

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437594916297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burns, Patrick, , ,

Mailing Address 5653 Maxwellton Road

City
Oakland

State
CA

Zip Code
94618-2654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Burns Employee Benefits Insurance Serv

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437600516297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Starks, Eugene, , ,

Mailing Address 613 Crescent Circle
Suite 201

City
Ridgeland

State
MS

Zip Code
39157-8686

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Benefit Administration Services, Ltd.

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437603116297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Israel, Steven, , ,

Mailing Address 4204 Manor Forest Trail

City
Boynton Beach

State
FL

Zip Code
33436-8851

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

S. Florida Affiliated Health Insurers,

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437654416297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 89 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rose, Mark, , ,

Mailing Address 11225 SE 6 Th St
Suite 110

City
Bellevue

State
WA

Zip Code
98004-6478

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Partners Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437657716297

Amount of Each Receipt this Period

170.00

☐ Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Strouse, Marcie, , ,

Mailing Address 5550 Wild Rose Ln
4th Floor

City

West Des Moines

State

IA

Zip Code

50266-5350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KHI Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437683116297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Dianne, M., ,

Mailing Address 7320 N La Cholla Blvd.
Suite 154-219

City

Tucson

State

AZ

Zip Code

85741-2309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sandbrook Benefits Group, LLC

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437684516297

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

262.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Granado, Arthur, , ,

Mailing Address 418 Peoples, # 505

City
Corpus Christi

State
TX

Zip Code
78401-2350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Granado Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437693216297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Webb, Yolanda, Marie, ,

Mailing Address 6117 Clover Ct.

City
Chino

State
CA

Zip Code
91710-5337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Webb Insurance Solutions

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437705616297

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Conto, Teresa, , ,

Mailing Address 15800 Crabbs Branch Way #350

City
Rockville

State
MD

Zip Code
20855-2697

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gallagher Benefit Services

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437740816297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

195.00

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

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

FOR LINE NUMBER: PAGE 91 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cade, Kareim, R., ,

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 (for Individual)
Great Lakes Benefit Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437778616297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schell, Gregory, J., ,

Mailing Address 545 South Third Street
Suite 300

City
Louisville

State
KY

Zip Code
40202-1936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sterling G. Thompson Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR437797616297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Purcilly, Amy, , ,

Mailing Address PO Box 7028

City
Troy

State
MI

Zip Code
48007-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mason-McBride, Inc.

Occupation (for Individual)
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
05 / 31 / 2017

Transaction ID : PR437814916297

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 92 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hediger, Debbie, R., ,

Mailing Address 4907 Boynton Ct

City
Tampa

State
FL

Zip Code
33625-6622

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Engage PEO

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR437852416297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lupcke, Adam, , ,

Mailing Address 600 E Lafayette Blvd.

City
Detroit

State
MI

Zip Code
48226-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)

?Director of Accounting Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR450744816297

Amount of Each Receipt this Period

63.00

☐ Memo Item

P/R Deduction (\$63.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Waltman, Jessica, Fulginiti, ,

Mailing Address 10 Doyle Road

City
Wayne

State
PA

Zip Code
19087-3903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Forward Health Consulting

Occupation (for Individual)

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 31 / 2017

Transaction ID : PR470100116297

Amount of Each Receipt this Period

85.00

☐ Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

190.00

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 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Petersen, Benjamin, Lee, ,

Mailing Address 12113 NW 26th Ave.

City
Vancouver

State
WA

Zip Code
98685-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Nora Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2017

Transaction ID : PR492528816297

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

42.00

23861.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City
PhoenixState
AZZip Code
85072Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11323981

Amount of Each Disbursement this Period

86.83

Credit Card Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Way

City
KnoxvilleState
TNZip Code
37920Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11323982

Amount of Each Disbursement this Period

289.55

Credit Card Fees

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PayPal

Mailing Address 2211 North First Street

City
San JoseState
CAZip Code
95131Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11324021

Amount of Each Disbursement this Period

935.56

Credit Card Fees

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1311.94

1311.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 95 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Burgess For Congress

Mailing Address PO Box 2334

City
DentonState
TXZip Code
76202Purpose of Disbursement
5/1 Lunch

011

Candidate Name

Burgess, Michael, C., Rep., M.D.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 26

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	7		

FEC Identification Number

C C00372532**Transaction ID : 11275552**

Amount of Each Disbursement this Period

1000.00

5/1 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrasso

Mailing Address PO Box 52008

City
CasperState
WYZip Code
82605Purpose of Disbursement
5/1 Dinner

011

Candidate Name

Barrasso, John, A., Sen., MD

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WY District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	1	7		

FEC Identification Number

C C00436386**Transaction ID : 11275553**

Amount of Each Disbursement this Period

1500.00

5/1 Dinner

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Courtney For Congress

Mailing Address PO Box 1372

City
VernonState
CTZip Code
06066Purpose of Disbursement
Co-Host 5/3 Lunch

011

Candidate Name

Courtney, Joseph, D., Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	7		

FEC Identification Number

C C00410233**Transaction ID : 11275992**

Amount of Each Disbursement this Period

2500.00

Co-Host 5/3 Lunch

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Handel for Congress, Inc.

Mailing Address 4010 OLD MILTON PKWY

City
ALPHARETTAState
GAZip Code
30005Purpose of Disbursement
May 16 Local Event

011

Category/
Type

Candidate Name

Handel, Karen, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2017

☐

Primary

☒

General

☐

Other (specify) ▼

State: GA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	7		

FEC Identification Number

C

C00633362

Transaction ID : 11276050

Amount of Each Disbursement this Period

2750.00

May 16 Local Event

☐

Memo Item

Full Name (Last, First, Middle Initial)

B. Blue Hen PAC

Mailing Address PO BOX 15293

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
5/10 Lunch

011

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
0	5			0	9			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11276483

Amount of Each Disbursement this Period

1000.00

5/10 Lunch

☐

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 499 S. CAPITOL ST. S.W. #414

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
5/12 Trip

011

Category/
Type

Candidate Name

AMERIPAC: THE FUND FOR A GREATER AMERICA

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
0	5			0	9			2	0	1	7		

FEC Identification Number

C

C00271338

Transaction ID : 11276485

Amount of Each Disbursement this Period

5000.00

5/12 Trip

☐

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

8750.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Courtney For Congress

Mailing Address PO Box 1372

City
VernonState
CTZip Code
06066

Purpose of Disbursement

Co-Host 5/3 Lunch Funds Reported On <Enter Report Name Here>

011

Candidate Name

Courtney, Joseph, D., Rep.,

Office Sought:

☒

House

☐

Senate

☐

President

State: CT

District: 02

Disbursement For: 2018

☒

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	7		

FEC Identification Number

C C00410233

Transaction ID : 11313142

Amount of Each Disbursement this Period

2500.00

☒ Memo Item Co-Host 5/3 Lunch Funds Reported
On <Enter Report Name Here>

Full Name (Last, First, Middle Initial)

B. Courtney For Congress

Mailing Address PO Box 1372

City
VernonState
CTZip Code
06066

Purpose of Disbursement

Co-Host 5/3 Lunch Re-designated funds for trans. dated 5/2/2017

011

Candidate Name

Courtney, Joseph, D., Rep.,

Office Sought:

☒

House

☐

Senate

☐

President

State: CT

District: 02

Disbursement For: 2018

☐

Primary

☐

General

☒

Other (specify)

Convention2018

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	1	7		

FEC Identification Number

C C00410233

Transaction ID : 11313143

Amount of Each Disbursement this Period

2500.00

☒ Memo Item Co-Host 5/3 Lunch Re-designated
funds for trans. dated 5/2/2017

Full Name (Last, First, Middle Initial)

C. Larson For Congress

Mailing Address PO Box 261172

City
HartfordState
CTZip Code
06126

Purpose of Disbursement

5/16 Lunch

011

Candidate Name

Larson, John, B., Rep.,

Office Sought:

☒

House

☐

Senate

☐

President

State: CT

District: 01

Disbursement For: 2018

☐

Primary

☐

General

☒

Other (specify) ▼

Convention2018

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	7		

FEC Identification Number

C C00330142

Transaction ID : 11313819

Amount of Each Disbursement this Period

1500.00

5/16 Lunch

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1	5	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 98 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoosiers For Rokita, Inc.

Mailing Address 5802 Oak Avenue

City
IndianapolisState
INZip Code
46219Purpose of Disbursement
5/16 Dinner

011

Category/
Type

Candidate Name

Rokita, Todd, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	7		

FEC Identification Number

C C00476192

Transaction ID : 11313820

Amount of Each Disbursement this Period

1500.00

5/16 Dinner

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Cheri Bustos

Mailing Address 1050 17th St Nw Ste 590

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
5/17 Dinner

011

Category/
Type

Candidate Name

Bustos, Cheri, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 17

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	7		

FEC Identification Number

C C00498568

Transaction ID : 11313821

Amount of Each Disbursement this Period

1500.00

5/17 Dinner

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Luke Messer For Congress

Mailing Address PO Box 917

City
ShelbyvilleState
INZip Code
46176Purpose of Disbursement
05/18 Dinner

011

Category/
Type

Candidate Name

Messer, Luke, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	7		

FEC Identification Number

C C00460667

Transaction ID : 11313823

Amount of Each Disbursement this Period

1000.00

05/18 Dinner

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan Costello For Congress

Mailing Address PO Box 3154

City
West ChesterState
PAZip Code
19381Purpose of Disbursement
5/18 Dinner

011

Category/
Type

Candidate Name

Costello, Ryan, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	7		

FEC Identification Number

C C00554899**Transaction ID : 11313824**

Amount of Each Disbursement this Period

2000.00

5/18 Dinner

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McKinley For Congress

Mailing Address PO Box 642

City
MorgantownState
WVZip Code
26507Purpose of Disbursement
5/19 Breakfast

011

Category/
Type

Candidate Name

McKinley, David, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WV

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	7		

FEC Identification Number

C C00473132**Transaction ID : 11319526**

Amount of Each Disbursement this Period

1000.00

5/19 Breakfast

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jaime For Congress

Mailing Address PO Box 1614

City
RidgefieldState
WAZip Code
98642Purpose of Disbursement
5/22 Fishing Trip

011

Category/
Type

Candidate Name

Herrera-Beutler, Jaime, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	7		

FEC Identification Number

C C00472704**Transaction ID : 11320123**

Amount of Each Disbursement this Period

1000.00

5/22 Fishing Trip

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Heller For Senate

Mailing Address PO Box 371907

City
Las VegasState
NVZip Code
89137Purpose of Disbursement
5/24 Lunch

011

Category/
Type

Candidate Name

Heller, Dean, , Sen.,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: NV

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

FEC Identification Number

C C00494229

Transaction ID : 11320126

Amount of Each Disbursement this Period

1000.00

5/24 Lunch

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cathy McMorris Rodgers For Congress

Mailing Address Box 137

City
SpokaneState
WAZip Code
99210Purpose of Disbursement
5/24 Baseball Game

011

Category/
Type

Candidate Name

McMorris Rodgers, Cathy, , Rep.,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: WA

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

FEC Identification Number

C C00390476

Transaction ID : 11320127

Amount of Each Disbursement this Period

1000.00

5/24 Baseball Game

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tiberi For CongressMailing Address 2931 E Dublin Granville Road
Suite 190City
ColumbusState
OHZip Code
43231Purpose of Disbursement
6/9 Local Event

011

Category/
Type

Candidate Name

Tiberi, Pat, J., Rep.,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2018

☒ Primary☐ General☐ Other (specify) ▼

State: OH

District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

FEC Identification Number

C C00347492

Transaction ID : 11320128

Amount of Each Disbursement this Period

1200.00

6/9 Local Event

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3200.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Johnson For Congress

Mailing Address PO Box 906

City
MariettaState
OHZip Code
45750Purpose of Disbursement
5/23 Dinner

011

Category/
Type

Candidate Name

Johnson, Bill, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	7		

FEC Identification Number

C C00476820

Transaction ID : 11321406

Amount of Each Disbursement this Period

1000.00

5/23 Dinner

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Guthrie For Congress

Mailing Address PO Box 9639

City
Bowling GreenState
KYZip Code
42102Purpose of Disbursement
4/28 Trip

011

Category/
Type

Candidate Name

Guthrie, Brett, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	7		

FEC Identification Number

C C00445023

Transaction ID : 11321407

Amount of Each Disbursement this Period

2500.00

4/28 Trip

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VINE PACMailing Address 700 13th St NW
Suite 600City
WashingtonState
DCZip Code
20005Purpose of Disbursement
5/26 Trip

011

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
0	5			2	2			2	0	1	7		

FEC Identification Number

C

Transaction ID : 11321419

Amount of Each Disbursement this Period

5000.00

5/26 Trip

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 102 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Dennis Ross

Mailing Address Post Office Box 7310

City
LakelandState
FLZip Code
33807Purpose of Disbursement
5/7 CA Trip

011

Category/
Type

Candidate Name

Ross, Dennis, A., Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	7		

FEC Identification Number

C C00459461

Transaction ID : 11321420

Amount of Each Disbursement this Period

2000.00

5/7 CA Trip

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Walorski For Congress Inc

Mailing Address PO Box 954

City
MishawakaState
INZip Code
46546Purpose of Disbursement
5/7 CA Trip

011

Category/
Type

Candidate Name

Walorski, Jackie, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	7		

FEC Identification Number

C C00468579

Transaction ID : 11321421

Amount of Each Disbursement this Period

1500.00

5/7 CA Trip

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Graves For Congress

Mailing Address PO Box 335

City
CalhounState
GAZip Code
30703Purpose of Disbursement
5/7 CA Trip

011

Category/
Type

Candidate Name

Graves, Tom, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: GA

District: 14

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	7		

FEC Identification Number

C C00462556

Transaction ID : 11321424

Amount of Each Disbursement this Period

1000.00

5/7 CA Trip

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann Wagner For Congress

Mailing Address PO Box 50

City
BallwinState
MOZip Code
63022Purpose of Disbursement
5/7 CA Trip

011

Category/
Type

Candidate Name

Wagner, Ann, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

FEC Identification Number

C C00495846

Transaction ID : 11321425

Amount of Each Disbursement this Period

1000.00

5/7 CA Trip

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Heller For Senate

Mailing Address PO Box 371907

City
Las VegasState
NVZip Code
89137Purpose of Disbursement
Void - Heller For Senate

011

Category/
Type

Candidate Name

Heller, Dean, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NV

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2017

FEC Identification Number

C C00494229

Transaction ID : 11322161

Amount of Each Disbursement this Period

- 1500.00

Void - Heller For Senate

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lance For Congress

Mailing Address PO Box 225

City
ColoniaState
NJZip Code
07067Purpose of Disbursement
5/25 Lunch

011

Category/
Type

Candidate Name

Lance, Leonard, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2017

FEC Identification Number

C C00444224

Transaction ID : 11322163

Amount of Each Disbursement this Period

1000.00

5/25 Lunch

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

39950.00