

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** ▼ C C00283135 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 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 06 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2016

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

Signature of Treasurer Jennifer Murphy [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 13 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Health Underwriters Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value=""/>	<input type="text" value="192613.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="148298.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="54919.67"/>	<input type="text" value="316209.77"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="203218.33"/>	<input type="text" value="508822.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="82738.30"/>	<input type="text" value="388342.93"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="120480.03"/>	<input type="text" value="120480.03"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Health Underwriters Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37399.75	176328.25
(ii) Unitemized	17519.92	139881.52
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	54919.67	316209.77
(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)	54919.67	316209.77
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))..... ▶	54919.67	316209.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	54919.67	316209.77

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1738.30	9282.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1738.30	9282.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	81000.00	378500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	560.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	560.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	82738.30	388342.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	82738.30	388342.93

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	54919.67	316209.77
34. Total Contribution Refunds (from Line 28(d))	0.00	560.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54919.67	315649.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1738.30	9282.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1738.30	9282.93

**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 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Tamela L. Southan
Full Name (Last, First, Middle Initial)

Mailing Address 101 W. Renner Rd., Ste 160

City Richardson State TX Zip Code 75082-2019

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

Name of Employer Benefit Solutions By Design Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 01 / 2016
Transaction ID : 10620254

Amount of Each Receipt this Period 42.00

Memo Item

B. Earl E. Linhart
Full Name (Last, First, Middle Initial)

Mailing Address 515 Executive Campus Drive Suite 140

City Westerville State OH Zip Code 43082-8742

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

Name of Employer Benchmark Insurance Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 01 / 2016
Transaction ID : 10620561

Amount of Each Receipt this Period 1000.00

Memo Item

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

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 Ray Musser & Associates Insurance Serv Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 02 / 2016
Transaction ID : 10620577

Amount of Each Receipt this Period 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1127.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 4775 East 91st St., # 200
Southern Woods Park

City State Zip Code
Tulsa OK 74137-2805

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

Name of Employer Occupation
Plan Benefit Analysts of Tulsa, Inc. Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2016
Transaction ID : 10620609

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address PO Box 188

City State Zip Code
Beaufort NC 28516-0188

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

Name of Employer Occupation
Sea3 Strategy Group Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2016
Transaction ID : 10643615

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Bruce Frizen

Mailing Address 8058 Corporate Center Dr.
Suite 200

City State Zip Code
Charlotte NC 28226-4359

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

Name of Employer Occupation
L.E. Goodgame & Associates Broker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2016
Transaction ID : 10643633

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2045.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Chad P. Schneider
Full Name (Last, First, Middle Initial)

Mailing Address 14430 Benefit St.
Apt 308

City Sherman Oaks State CA Zip Code 91423-4067

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

Name of Employer Occupation
Code SixFour Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2016
Transaction ID : 10643636

Amount of Each Receipt this Period
85.00

Memo Item

B. Griffin Meredith
Full Name (Last, First, Middle Initial)

Mailing Address 550 S 5th St Unit 303

City Louisville State KY Zip Code 40202-4309

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

Name of Employer Occupation
Commonwealth Insurance Partners President

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
06 / 03 / 2016
Transaction ID : 10643638

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address P O Box 6243

City Reading State PA Zip Code 19610-0243

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

Name of Employer Occupation
Power Kunkle Group, Inc. President

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
06 / 03 / 2016
Transaction ID : 10643736

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	670.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Carolyn S. Lewis

Mailing Address 12401 Folsom Blvd, Suite 324

City	State	Zip Code
Rancho Cordova	CA	95742-9419

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

Name of Employer	Occupation
Lewis Benefits Group	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2016
Transaction ID : 10643760

Amount of Each Receipt this Period
 12.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Luis A. Maceira

Mailing Address 4515 S Durango Dr Apt 2028

City	State	Zip Code
Las Vegas	NV	89147-6087

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

Name of Employer	Occupation
Distinctive Insurance	Benefits Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2016
Transaction ID : 10643762

Amount of Each Receipt this Period
 30.00

Memo Item

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

Mailing Address 407 Centerpointe Circle, Suite 163

City	State	Zip Code
Altamonte Springs	FL	32701-3446

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

Name of Employer	Occupation
Sherrill Insurance Brokerage, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2016
Transaction ID : 10643766

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	72.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. R Dane Rianhard
Full Name (Last, First, Middle Initial)

Mailing Address 1 E. Pratt St., Unit 902

City Baltimore State MD Zip Code 21202-1193

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

Name of Employer TriBridge Partners, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt 06 / 05 / 2016
Transaction ID : 10643767

Amount of Each Receipt this Period 30.00

Memo Item

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

Mailing Address 1332 Hunters Hollow Court

City Eureka State MO Zip Code 63025-1051

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

Name of Employer Sonus Benefits by MSMF Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 05 / 2016
Transaction ID : 10643769

Amount of Each Receipt this Period 150.00

Memo Item

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

Mailing Address 17445 Arbor St Suite 310

City Omaha State NE Zip Code 68130-4645

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

Name of Employer OCI Insurance and Financial Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 06 / 06 / 2016
Transaction ID : 10643775

Amount of Each Receipt this Period 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 265.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1201 N Watson Rd., #287

City State Zip Code
Arlington TX 76006-6222

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

Name of Employer Occupation
Vogue Insurance Agency LLC Senior Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2016
Transaction ID : 10643792

Amount of Each Receipt this Period
215.00

Memo Item

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

Mailing Address 5441 Edgerton Drive

City State Zip Code
Peachtree Corners GA 30092-2185

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2016
Transaction ID : 10643927

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address PO Box 99565

City State Zip Code
Louisville KY 40269-0565

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

Name of Employer Occupation
Van Zandt Emrich and Cary Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2016
Transaction ID : 10643930

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	307.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 8000 Bonhomme Ave., # 213

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2016

Transaction ID : 10643936

Amount of Each Receipt this Period
63.00

Memo Item

B. Ross L. Shamburger
Full Name (Last, First, Middle Initial)

Mailing Address 12215 Quaker Ave

City Lubbock	State TX	Zip Code 79424-7560
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2016

Transaction ID : 10643955

Amount of Each Receipt this Period
1000.00

Memo Item

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

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 JRG Advisors, LLC	Occupation Chairman & CEO
---------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
421.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2016

Transaction ID : 10644020

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1147.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Paul Pendorf
Full Name (Last, First, Middle Initial)

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 Independent Financial Group LLC	Occupation Agent
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2016
Transaction ID : 10644100

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 32110 Agoura Road

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

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

Name of Employer Warner Pacific Insurance Services	Occupation Director of Sales
---	---------------------------------

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
 06 / 09 / 2016
Transaction ID : 10644105

Amount of Each Receipt this Period
 85.00

Memo Item

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

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 Tim Crawford Insurance Agency, Inc.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2016
Transaction ID : 10645684

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 120
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jennifer Brittain
Full Name (Last, First, Middle Initial)

Mailing Address 208 N. Mill

City Pryor State OK Zip Code 74361-2422

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

Name of Employer Brown & Brown, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2016
Transaction ID : 10645719

Amount of Each Receipt this Period
 30.00

Memo Item

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

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 Marsh & McLennan Agency LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2016
Transaction ID : 10645722

Amount of Each Receipt this Period
 42.00

Memo Item

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

Mailing Address 3402 Cinnamon Creek Ave

City N Las Vegas State NV Zip Code 89031-3520

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

Name of Employer LGBS Occupation Insurance Consultant

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
 06 / 11 / 2016
Transaction ID : 10645723

Amount of Each Receipt this Period
 30.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 15 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address PO Box 17236

City Tucson State AZ Zip Code 85731-7236

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

Name of Employer Wolfe Insurance & Consultants, LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **06 / 12 / 2016**
Transaction ID : 10645731

Amount of Each Receipt this Period **30.00**

Memo Item

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

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 Schiebel & Associates, LLC dba Shopben Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **06 / 12 / 2016**
Transaction ID : 10645732

Amount of Each Receipt this Period **45.00**

Memo Item

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

Mailing Address PO Box 27

City Wheaton State IL Zip Code 60187-0027

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

Name of Employer Colonial Life Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **343.75**

Date of Receipt **06 / 12 / 2016**
Transaction ID : 10645733

Amount of Each Receipt this Period **68.75**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **143.75**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 506 Holly St

City Little Rock State AR Zip Code 72205-3932

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

Name of Employer HealthSCOPE Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2016
Transaction ID : 10645734

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 12138 Big Canoe

City Big Canoe State GA Zip Code 30143-5157

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

Name of Employer David S. Johnson Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2016
Transaction ID : 10645735

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address PO Box 996

City Killeen State TX Zip Code 76540-0996

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

Name of Employer BKCW Insurance Agency Occupation Employee Benefits Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2016
Transaction ID : 10645741

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 2000 RiverEdge Parkway
Suite 1010

City State Zip Code
Sandy Springs GA 30328-4657

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

Name of Employer Occupation
KSA Insurance Agency, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2016
Transaction ID : 10645746

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Thomas Allen Dorroh

Mailing Address PO Box 996

City State Zip Code
Killeen TX 76540-0996

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

Name of Employer Occupation
BKCW Insurance Agency Employee Benefits Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
610.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2016
Transaction ID : 10687110

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1332 Hunters Hollow Court

City State Zip Code
Eureka MO 63025-1051

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

Name of Employer Occupation
Sonus Benefits by MSMF Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2016
Transaction ID : 10697087

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Henry V. Estep
Full Name (Last, First, Middle Initial)

Mailing Address 3213 Snowberry Court

City State Zip Code
Wilmington NC 28409-6604

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

Name of Employer Occupation
Griffin Estep Benefit Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2016
Transaction ID : 10697098

Amount of Each Receipt this Period
500.00

Memo Item

B. Jim Daubert
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 67220

City State Zip Code
Lincoln NE 68506-7220

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

Name of Employer Occupation
Daubert and Butler Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2016
Transaction ID : 10697099

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 3131 Lonnbladh Road

City State Zip Code
Tallahassee FL 32308-4255

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

Name of Employer Occupation
Earl Bacon Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
363.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2016
Transaction ID : 10719911

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3111 C St.
Suite 500

City Anchorage State AK Zip Code 99503-3973

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

Name of Employer Northrim Benefits Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
06 / 15 / 2016
Transaction ID : 10719913

Amount of Each Receipt this Period
30.00

Memo Item

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

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 Schultheis Life & Health Agency Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.00

Date of Receipt
06 / 15 / 2016
Transaction ID : 10719917

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address P.O. Box 7661

City Wilmington State NC Zip Code 28406-7661

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

Name of Employer Ebenconcepts, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
06 / 16 / 2016
Transaction ID : 10719927

Amount of Each Receipt this Period
30.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Laura Blomgren
 Full Name (Last, First, Middle Initial)
 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 BenAxis Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 06 / 17 / 2016
Transaction ID : 10720342
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Michael D. Lujan
 Full Name (Last, First, Middle Initial)
 Mailing Address 645 Harrison Street #200
 City San Francisco State CA Zip Code 94107-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Limelight Health, Inc. Occupation Technology for Agents
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 17 / 2016
Transaction ID : 10720343
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Catherine Hyland Ziegler
 Full Name (Last, First, Middle Initial)
 Mailing Address 2001 Route 46 , Suite 310
 City Parsippany State NJ Zip Code 07054-1315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Hyland Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 17 / 2016
Transaction ID : 10720347
 Amount of Each Receipt this Period 42.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address P.O. Box 1209

City State Zip Code
Alpharetta GA 30009-1209

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

Name of Employer Occupation
Admin America Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2016
Transaction ID : 10720348

Amount of Each Receipt this Period
85.00

Memo Item

B. Jill L. Pedersen
Full Name (Last, First, Middle Initial)

Mailing Address 16325 Boones Ferry Rd #204

City State Zip Code
Lake Oswego OR 97035-4297

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

Name of Employer Occupation
Columbia Benefit Solutions, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2016
Transaction ID : 10720349

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address PO Box 7028

City State Zip Code
Troy MI 48007-7028

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

Name of Employer Occupation
Mason-McBride, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2016
Transaction ID : 10720352

Amount of Each Receipt this Period
30.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address PO Box 1635

City State Zip Code
Irmo SC 29063-1635

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

Name of Employer Occupation
American Benefit Services, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 18 / 2016
Transaction ID : 10720790

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2842 Landing Way

City State Zip Code
Marietta GA 30066-2362

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

Name of Employer Occupation
Robert Fitzgerald Insurance Agency, In Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt
06 / 18 / 2016
Transaction ID : 10720792

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Terrie L. Trevino

Mailing Address P O Box 7408

City State Zip Code
Boise ID 83707-1408

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

Name of Employer Occupation
Blue Cross of Idaho Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 18 / 2016
Transaction ID : 10720795

Amount of Each Receipt this Period
42.00

Memo Item

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 OF 120 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Dawn Barr		Date of Receipt MM / DD / YYYY 06 / 18 / 2016 Transaction ID : 10720796
Mailing Address 1305 NE 29th St.		Amount of Each Receipt this Period 63.00
City Ankeny State IA Zip Code 50021-6722	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item
Name of Employer Mercer Occupation Broker	Aggregate Year-to-Date 378.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kimberley Molthen		Date of Receipt MM / DD / YYYY 06 / 18 / 2016 Transaction ID : 10720804
Mailing Address 3975 Fair Ridge Drive 110-N		Amount of Each Receipt this Period 85.00
City Fairfax State VA Zip Code 22033-2911	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item
Name of Employer BB&T Occupation Employee Benefits Consultant & Vice Pr	Aggregate Year-to-Date 510.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Christine M. Grooms		Date of Receipt MM / DD / YYYY 06 / 19 / 2016 Transaction ID : 10720808
Mailing Address 160 East Main Street P O Box 638		Amount of Each Receipt this Period 12.00
City Lake Zurich State IL Zip Code 60047-2418	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item
Name of Employer Grooms Insurance Associates Occupation Broker	Aggregate Year-to-Date 297.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address P O Box 24133

City Omaha State NE Zip Code 68124-0133

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

Name of Employer Creative Association Management Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2016
Transaction ID : 10720811

Amount of Each Receipt this Period 35.00

Memo Item

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

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 The Compliance Office Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 20 / 2016
Transaction ID : 10720822

Amount of Each Receipt this Period 42.00

Memo Item

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

Mailing Address 1 Sun Life Executive Park

City Wellesley Hills State MA Zip Code 02481

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

Name of Employer Sun Life Financial Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 20 / 2016
Transaction ID : 10720845

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 577.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Rebecca J. Rogers

Mailing Address 20 Main Street

City State Zip Code
New Hamburg NY 12590-5520

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

Name of Employer Occupation
RJR Benefits, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2016
Transaction ID : 10720858

Amount of Each Receipt this Period
365.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Thomas R. Wilson

Mailing Address 701 Lamar

City State Zip Code
Wichita Falls TX 76301-6824

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

Name of Employer Occupation
Boley Featherston Insurance Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2016
Transaction ID : 10720864

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
c. Michael P. Deagle

Mailing Address 935 National Parkway
Suite 93550

City State Zip Code
Schaumburg IL 60173-5150

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

Name of Employer Occupation
BenAxis Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2016
Transaction ID : 10720870

Amount of Each Receipt this Period
525.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	940.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 4400 Old Canton Road, Suite 240

City Jackson	State MS	Zip Code 39211-5992
-----------------	-------------	------------------------

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

Name of Employer The William Morris Group, P.A.	Occupation Principal
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2016
Transaction ID : 10720874

Amount of Each Receipt this Period
150.00

Memo Item

B. Brad L Christian
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 188

City Clatonia	State NE	Zip Code 68328-0188
------------------	-------------	------------------------

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

Name of Employer Insurance & Investments	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2016
Transaction ID : 10720892

Amount of Each Receipt this Period
315.00

Memo Item

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

Mailing Address 17535 Generations Dr

City South Bend	State IN	Zip Code 46635-1589
--------------------	-------------	------------------------

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

Name of Employer The Healy Group	Occupation Broker
-------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2016
Transaction ID : 10720921

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	515.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Nicholas J. Metcalf
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Andover Park W.
 Suite 150-251
 City Tukwila State WA Zip Code 98188-2826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer OMNI Insurance Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2016
Transaction ID : 10721162
 Amount of Each Receipt this Period
 365.00
 Memo Item

B. William L. Ritter
 Full Name (Last, First, Middle Initial)
 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 Triangle Planning Services, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2016
Transaction ID : 10721388
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Clover Denise Willison
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 Sprowel Creek Rd
 City Garberville State CA Zip Code 95542-3110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Willison Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2016
Transaction ID : 10721390
 Amount of Each Receipt this Period
 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Eileen H. Atwell
Full Name (Last, First, Middle Initial)

Mailing Address 21237 So. LaGrange Road
P O Box 370

City Frankfort State IL Zip Code 60423-1901

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

Name of Employer Shanahan Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 21 / 2016
Transaction ID : 10721398

Amount of Each Receipt this Period
300.00

Memo Item

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

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 Cavnagac & Associates Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt
06 / 21 / 2016
Transaction ID : 10721405

Amount of Each Receipt this Period
63.00

Memo Item

C. Ken Williams
Full Name (Last, First, Middle Initial)

Mailing Address 11335 NE 122nd Way
Ste 105

City Kirkland State WA Zip Code 98034-6933

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

Name of Employer Sun Street Securities Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 21 / 2016
Transaction ID : 10721433

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	563.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 29 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address P O Box 426
 341 North 6th Street

City Seward State NE Zip Code 68434-0426

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

Name of Employer Kolterman Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 22 / 2016
Transaction ID : 10721444

Amount of Each Receipt this Period
 35.00

Memo Item

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

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 Protect Plans Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 560.00

Date of Receipt
 06 / 22 / 2016
Transaction ID : 10721446

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 19 Minor Court

City San Rafael State CA Zip Code 94903-3716

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

Name of Employer The Word and Brown Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 355.00

Date of Receipt
 06 / 22 / 2016
Transaction ID : 10721450

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3800 Centerpoint Drive
Suite 540

City Anchorage State AK Zip Code 99503-5826

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

Name of Employer USI Insurance Services, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 22 / 2016
Transaction ID : 10721452

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address 11213 Davenport St.
Ste. 201

City Omaha State NE Zip Code 68154-2604

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

Name of Employer Aon Risk Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
06 / 22 / 2016
Transaction ID : 10721459

Amount of Each Receipt this Period
50.00

Memo Item

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

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 E2E Benefits Services, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1020.00

Date of Receipt
06 / 22 / 2016
Transaction ID : 10721465

Amount of Each Receipt this Period
170.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	262.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert Lindsay
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Emerson Place
 City Davenport State IA Zip Code 52801-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arthur J. Gallagher & Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 06 / 22 / 2016
Transaction ID : 10721468
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Cerrina Jensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 2520 Venture Oaks Way #240
 City Sacramento State CA Zip Code 95833-4228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CoreMark Insurance Services Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 06 / 22 / 2016
Transaction ID : 10721472
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Terry Singleton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1773 Owasco Street
 City Winter Springs State FL Zip Code 32708-5614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sihle Insurance Group Occupation Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2016
Transaction ID : 10721473
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	169.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2670 Electric Rd

City Roanoke State VA Zip Code 24018-3511

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

Name of Employer Innovative Insurance Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
06 / 22 / 2016
Transaction ID : 10721475

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1550 Liberty Ridge Drive Suite 250

City Chesterbrook State PA Zip Code 19087-5567

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

Name of Employer Radnor Benefits Group, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
06 / 22 / 2016
Transaction ID : 10721486

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address 25B Hanover Rd., Suite 220

City Florham Park State NJ Zip Code 07932-1443

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

Name of Employer Savoy Associates Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 22 / 2016
Transaction ID : 10721488

Amount of Each Receipt this Period
50.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 33 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 19310 Sonoma Highway, #A

City State Zip Code
Sonoma CA 95476-5454

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

Name of Employer Occupation
RealCare Insurance Marketing, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2016
Transaction ID : 10721490

Amount of Each Receipt this Period
85.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Thomas R. Wilson

Mailing Address 701 Lamar

City State Zip Code
Wichita Falls TX 76301-6824

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

Name of Employer Occupation
Boley Featherston Insurance Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721508

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address PO Box 507

City State Zip Code
Carrollton GA 30112-0009

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

Name of Employer Occupation
J. Smith Lanier & Co., Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721509

Amount of Each Receipt this Period
85.00

Memo Item

Monthly Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 1501 Ingersoll Ave
Suite 200

City Des Moines State IA Zip Code 50309-3102

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

Name of Employer Prisma Strategies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
835.00

Date of Receipt
06 / 23 / 2016
Transaction ID : 10721510

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address 28638 Oak Point Drive

City Farmington Hills State MI Zip Code 48331-2706

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

Name of Employer Health Alliance Plan Occupation Director of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.00

Date of Receipt
06 / 23 / 2016
Transaction ID : 10721515

Amount of Each Receipt this Period
63.00

Memo Item

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

Mailing Address Six Concourse Parkway
Suite 2750

City Atlanta State GA Zip Code 30328-6243

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

Name of Employer The Benefit Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 23 / 2016
Transaction ID : 10721516

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 198.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 739 East Jackson Street

City Martinsville State IN Zip Code 46151-2033

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

Name of Employer NewDay! Marketing Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721517

Amount of Each Receipt this Period 42.00

Memo Item

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

Mailing Address PO Box 805

City West Chester State OH Zip Code 45071-0805

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

Name of Employer JRM & Associates Agency, Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721519

Amount of Each Receipt this Period 42.00

Memo Item

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

Mailing Address 22801 Ventura Blvd. Suite 205

City Woodland Hills State CA Zip Code 91364-5834

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

Name of Employer Sheila Hartman Insurance Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 685.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721521

Amount of Each Receipt this Period 85.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mark K. Ackerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 St. Julian Place
 City Columbia State SC Zip Code 29204-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Management Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721530
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Deborah Hebb
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 C Professional Ct
 City Hagerstown State MD Zip Code 21740-5858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Keller Stonebraker Ins Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721532
 Amount of Each Receipt this Period 20.00
 Memo Item

c. Albert Fogle
 Full Name (Last, First, Middle Initial)
 Mailing Address 3111 C St. Suite 500
 City Anchorage State AK Zip Code 99503-3973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northrim Benefits Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721543
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jeffrey Wm. Gennaro
 Full Name (Last, First, Middle Initial)
 Mailing Address 3820 W Happy Valley Rd
 Ste 141, PMB 606
 City Glendale State AZ Zip Code 85310-3292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Capitol Insurance Brokers, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721545
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Hedy S. Hebert
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 Boardwalk Blvd.
 City Bossier City State LA Zip Code 71111-4384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Consulting Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721546
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Donna D. Hill
 Full Name (Last, First, Middle Initial)
 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 E2E Benefit Services Inc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721550
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Crystal Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 709
 City State Zip Code
 Sugar Land TX 77487-0709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Benefit Concepts, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 685.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721551
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. Stacey S. LaFay
 Full Name (Last, First, Middle Initial)
 Mailing Address 2444 East Hill Rd.
 City State Zip Code
 Grand Blanc MI 48439-5098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Franklin Benefit Solutions Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 528.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721554
 Amount of Each Receipt this Period
 63.00
 Memo Item

C. Barbara A. McClaskey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1965 Pine Street
 City State Zip Code
 Redding CA 96001-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Barbara McClaskey Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721557
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2108 West Laburnum Avenue, Suite 3

City	State	Zip Code
Richmond	VA	23227-4300

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **845.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2016

Transaction ID : 10721559

Amount of Each Receipt this Period
120.00

Memo Item

B. Valerie Reeves
Full Name (Last, First, Middle Initial)

Mailing Address 3702 Brownsboro Rd

City	State	Zip Code
Louisville	KY	40207-1820

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

Name of Employer	Occupation
Preferred Benefits, LLC	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2016

Transaction ID : 10721560

Amount of Each Receipt this Period
42.00

Memo Item

C. Russell Lee Rice
Full Name (Last, First, Middle Initial)

Mailing Address 8000 IH-10 West, # 715

City	State	Zip Code
San Antonio	TX	78230-3880

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

Name of Employer	Occupation
AVESIS, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2016

Transaction ID : 10721562

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	247.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 12200 Northwest Frwy, Suite 662

City Houston State TX Zip Code 77092-4927

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

Name of Employer Northwest General Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721564

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 39500 High Pointe Blvd Ste 400

City Novi State MI Zip Code 48375-5517

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

Name of Employer Health Alliance Administrators, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721569

Amount of Each Receipt this Period
 30.00

Memo Item

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

Mailing Address 2565 Dexter Ave. N # 502

City Seattle State WA Zip Code 98109-1955

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

Name of Employer Self Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721571

Amount of Each Receipt this Period
 10.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Marsha Tellesbo-Kembel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 4th Avenue, Suite 3200
 City State Zip Code
 Seattle WA 98154-1003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tellesbo & Company Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 948.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721575
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. Dennis E. Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 Chestnut Hills Pky
 City State Zip Code
 Fort Wayne IN 46814-8934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Employee Plans, LLC Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721579
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Ashley Wynkoop Kapostins
 Full Name (Last, First, Middle Initial)
 Mailing Address 255 Primera Blvd, Suite 264
 City State Zip Code
 Lake Mary FL 32746-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CIGNA Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 352.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721580
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 6107 Hazelwood Ave.

City State Zip Code
Indianapolis IN 46228-1316

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

Name of Employer Occupation
D Hall & Associates Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721581

Amount of Each Receipt this Period
 30.00

Memo Item

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

Mailing Address 11006 Kernville Rd. #1

City State Zip Code
Kernville CA 93238-9765

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

Name of Employer Occupation
Harry P. Thal Insurance Agency Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721582

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address P.O.Box 61157

City State Zip Code
Corpus Christi TX 78466-1157

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

Name of Employer Occupation
Heavin & Associates Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721584

Amount of Each Receipt this Period
 42.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Bob Copeland
Full Name (Last, First, Middle Initial)

Mailing Address 700 Larkspur Landing Circle, Suite

City Larkspur State CA Zip Code 94939-1755

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

Name of Employer Copeland Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721594

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 17535 Generations Dr

City South Bend State IN Zip Code 46635-1589

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

Name of Employer The Healy Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721601

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 2850 West Grand Boulevard

City Detroit State MI Zip Code 48202-2643

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

Name of Employer Health Alliance Plan Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10721604

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Karen K. Irwin
Full Name (Last, First, Middle Initial)

Mailing Address 116 S Main St

City Swanton State OH Zip Code 43558-1345

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

Name of Employer Kim Bradford & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721605

Amount of Each Receipt this Period 42.00

Memo Item

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

Mailing Address 26555 Evergreen Road Suite 535

City Southfield State MI Zip Code 48076-4213

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

Name of Employer Comprehensive Benefits Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2190.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721607

Amount of Each Receipt this Period 415.00

Memo Item

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

Mailing Address 4640 Woodbridge Drive

City Kernersville State NC Zip Code 27284-8850

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

Name of Employer Pennington Associates Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2016
Transaction ID : 10721611

Amount of Each Receipt this Period 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 487.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3219 E. Camelback Road
#569

City Phoenix State AZ Zip Code 85018-2307

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

Name of Employer: Emerging Benefits Consultants, LLC
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 23 / 2016
Transaction ID : 10721624

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address 12022 Forest Moon Dr

City Cypress State TX Zip Code 77433-3834

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

Name of Employer: Humana Market Point
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
06 / 23 / 2016
Transaction ID : 10721626

Amount of Each Receipt this Period
30.00

Memo Item

C. Charles L. Westmoreland
Full Name (Last, First, Middle Initial)

Mailing Address 532 Cloifview Drive

City Brandon State MS Zip Code 39047-9183

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

Name of Employer: Allstate Benefits
Occupation: Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 23 / 2016
Transaction ID : 10721627

Amount of Each Receipt this Period
30.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 46 OF 120
(check only one)

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

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

Mailing Address 2601C Blanding Ave #222

City Alameda	State CA	Zip Code 94501-1507
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1180.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2016
Transaction ID : 10722571

Amount of Each Receipt this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Jay Hazelbaker

Mailing Address 5007 Pine Creek Drive

City Westerville	State OH	Zip Code 43081-4849
---------------------	-------------	------------------------

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

Name of Employer Tabit, Arganbright & Hazelbaker, Inc.	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2016
Transaction ID : 10722609

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Ronald S. Buffum

Mailing Address 106 South Harris Street # 237

City Round Rock	State TX	Zip Code 78664-6081
--------------------	-------------	------------------------

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

Name of Employer The Buffum Group	Occupation Broker
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2016
Transaction ID : 10722615

Amount of Each Receipt this Period
 42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	114.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Christine M. Bogott

Mailing Address 125 Grand Avenue, Unit B

City State Zip Code
Grand Junction CO 81501-2251

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

Name of Employer Occupation
MHIB Group Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
06 / 24 / 2016
Transaction ID : 10722617

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 2550 NE Douglas St

City State Zip Code
Lees Summit MO 64064-2224

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

Name of Employer Occupation
Education Services International Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
06 / 24 / 2016
Transaction ID : 10722623

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Philip W. Lee

Mailing Address 935 Moraga Road Suite 240

City State Zip Code
Lafayette CA 94549-4542

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

Name of Employer Occupation
BLIS Corp. dba Lee Health Insurance Se President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
06 / 25 / 2016
Transaction ID : 10722653

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Edward P. Williams
Full Name (Last, First, Middle Initial)

Mailing Address 191 North Ave

City Mount Clemens State MI Zip Code 48043-9703

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

Name of Employer Action Health Insurance Agency Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : 10722656

Amount of Each Receipt this Period
 42.00

Memo Item

B. Joni Robin Reents
Full Name (Last, First, Middle Initial)

Mailing Address 5760 W. 120th Avenue Suite 260

City Broomfield State CO Zip Code 80020-6939

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

Name of Employer Reents Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : 10722657

Amount of Each Receipt this Period
 42.00

Memo Item

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

Mailing Address 901 Wilshire Drive Suite 300

City Troy State MI Zip Code 48084-5611

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

Name of Employer Wilshire Benefits Group Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2016
Transaction ID : 10722660

Amount of Each Receipt this Period
 85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	169.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. James M. Morrison
Full Name (Last, First, Middle Initial)

Mailing Address 6096 Innovation Way

City Carlsbad	State CA	Zip Code 92009-1741
------------------	-------------	------------------------

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

Name of Employer Morrison Insurance Services, Inc	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2016

Transaction ID : 10722668

Amount of Each Receipt this Period
85.00

Memo Item

B. Sam Drysdale
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 8222

City Springfield	State MO	Zip Code 65801-8222
---------------------	-------------	------------------------

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

Name of Employer Mercy Health Plans	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2016

Transaction ID : 10722670

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address 13720 Six Mile Cypress, Suite B

City Fort Myers	State FL	Zip Code 33912-4324
--------------------	-------------	------------------------

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

Name of Employer Alan Williams & Associates Insurance A	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2016

Transaction ID : 10722680

Amount of Each Receipt this Period
85.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 120
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Consuelo Helbling		Date of Receipt MM / DD / YYYY 06 / 26 / 2016 Transaction ID : 10722685
Mailing Address 4101 N Broadway Ste 100		Amount of Each Receipt this Period 12.00
City Chicago	State IL	Zip Code 60613-2104
FEC ID number of contributing federal political committee. C	Name of Employer LegalShield Business Solutions	Occupation General Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Lori Carter		Date of Receipt MM / DD / YYYY 06 / 26 / 2016 Transaction ID : 10722690
Mailing Address 2316 Atherholt Rd		Amount of Each Receipt this Period 42.00
City Lynchburg	State VA	Zip Code 24501-2100
FEC ID number of contributing federal political committee. C	Name of Employer Piedmont Community Heath Plan, Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Steven L. Wilson		Date of Receipt MM / DD / YYYY 06 / 26 / 2016 Transaction ID : 10722693
Mailing Address 1151 Red Mile Road		Amount of Each Receipt this Period 85.00
City Lexington	State KY	Zip Code 40504-2649
FEC ID number of contributing federal political committee. C	Name of Employer Benefit Insurance Marketing	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	<input type="checkbox"/> 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Matthew F. Hatfield
Full Name (Last, First, Middle Initial)

Mailing Address 2207 Springfield Avenue

City State Zip Code
Fort Wayne IN 46805-1541

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

Name of Employer Occupation
M Hatfield Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 26 / 2016
Transaction ID : 10722694

Amount of Each Receipt this Period
50.00

Memo Item

B. Heather Ambro
Full Name (Last, First, Middle Initial)

Mailing Address 2157 Welsch Industrial Ct.

City State Zip Code
Saint Louis MO 63146-4220

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

Name of Employer Occupation
The ECCHIC Group VP of Administration Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt
06 / 26 / 2016
Transaction ID : 10722696

Amount of Each Receipt this Period
85.00

Memo Item

C. Karen Knippen Loeb
Full Name (Last, First, Middle Initial)

Mailing Address 234 Spring Lake Drive

City State Zip Code
Itasca IL 60143-3202

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

Name of Employer Occupation
Euclid Managers Employee Benefit Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
06 / 26 / 2016
Transaction ID : 10722699

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Erin B. Fisher
Full Name (Last, First, Middle Initial)

Mailing Address 131-6 Courtland Avenue

City State Zip Code
Stamford CT 06902-3443

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

Name of Employer Occupation
Find Medicare Plans Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2016
Transaction ID : 10722701

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3312 W. Magistrate Loop

City State Zip Code
Hayden ID 83835-5019

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

Name of Employer Occupation
Munger Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2016
Transaction ID : 10722702

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1501 Ingersoll Ave
Suite 200

City State Zip Code
Des Moines IA 50309-3102

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

Name of Employer Occupation
Prisma Strategies Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1361.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2016
Transaction ID : 10722703

Amount of Each Receipt this Period
526.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 876.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Victoria A. Major-Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 3602 Harwich Ct
 City Greenacres State FL Zip Code 33467-1532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VMB Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 06 / 26 / 2016
Transaction ID : 10722704
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Sean G. Whaley
 Full Name (Last, First, Middle Initial)
 Mailing Address 11923 Devonshire Rd Sixth Floor
 City Algonquin State IL Zip Code 60102-2512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DialysisPPO Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt
 06 / 26 / 2016
Transaction ID : 10722706
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Suzanne K. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5955 Carnegie Blvd Suite 150
 City Charlotte State NC Zip Code 28209-4664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Employee Benefit Advisors of the Carol Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **717.00**

Date of Receipt
 06 / 26 / 2016
Transaction ID : 10722708
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **267.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 54 OF 120
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

A. Fred Cartier
Full Name (Last, First, Middle Initial)

Mailing Address 11555 Sorrento Valley Road
Suite 203

City San Diego State CA Zip Code 92121-1331

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

Name of Employer Rogers Benefit Group, Inc. Occupation Employee Benefits Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2016
Transaction ID : 10722711

Amount of Each Receipt this Period
42.00

Memo Item

B. Justin Lord
Full Name (Last, First, Middle Initial)

Mailing Address 935 East 36th Place

City Tulsa State OK Zip Code 74105-3001

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

Name of Employer Wilcox & McGrath, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2016
Transaction ID : 10722715

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 13800 Jackson Road

City Mishawaka State IN Zip Code 46544-9195

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

Name of Employer Keystone Insurers Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2016
Transaction ID : 10722717

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	137.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Erin Nevins
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 Central Avenue Suite 202
 City Albany State NY Zip Code 12205-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EP Nevins Insurance Agency Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **365.00**

Date of Receipt **06 / 27 / 2016**
Transaction ID : 10722718
 Amount of Each Receipt this Period **63.00**
 Memo Item

B. Russell B. Childers
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1547
 City Americus State GA Zip Code 31709-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Russ Childers, CLU Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **665.00**

Date of Receipt **06 / 27 / 2016**
Transaction ID : 10722719
 Amount of Each Receipt this Period **90.00**
 Memo Item

C. Roger J. Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 East Main St Suite 110
 City Lexington State KY Zip Code 40502-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Epic Insurance Solutions Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt **06 / 27 / 2016**
Transaction ID : 10722721
 Amount of Each Receipt this Period **42.00**
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 15 Main St

City State Zip Code
Holmdel NJ 07733-2105

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

Name of Employer Occupation
SlatteryGA, A division of Arthur J. Ga Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
427.00

Date of Receipt
06 / 27 / 2016
Transaction ID : 10722723

Amount of Each Receipt this Period
42.00

Memo Item

B. Annette Bechtold
Full Name (Last, First, Middle Initial)

Mailing Address 200 Galleria Pkwy SE Ste 1950

City State Zip Code
Atlanta GA 30339-5946

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

Name of Employer Occupation
Digital Insurance, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
06 / 27 / 2016
Transaction ID : 10722724

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address 7321 Eagle Crest Blvd.

City State Zip Code
Evansville IN 47715-8157

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

Name of Employer Occupation
SIHO Insurance Services Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt
06 / 27 / 2016
Transaction ID : 10722726

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	126.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jerry D. Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5113 N. Executive Drive
 Suite 102
 City Peoria State IL Zip Code 61614-4893
 Name of Employer Jackson Financial Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 27 / 2016
Transaction ID : 10722727
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Peter L. Rowe
 Full Name (Last, First, Middle Initial)
 Mailing Address 3033 N. Central Ave
 Suite 810
 City Phoenix State AZ Zip Code 85012-2804
 Name of Employer Sunwest Benefits Consulting, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 27 / 2016
Transaction ID : 10722733
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Douglas Lubenow
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 West Main Street
 Suite 203
 City Moorestown State NJ Zip Code 08057-2345
 Name of Employer Lubenow Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 27 / 2016
Transaction ID : 10722734
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 184.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Elizabeth J. Underhill
Full Name (Last, First, Middle Initial)

Mailing Address 5951 Canoga Avenue

City	State	Zip Code
Woodland Hills	CA	91367-5010

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

Name of Employer	Occupation
Underhill Insurance Agency, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016
Transaction ID : 10722736

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 38176 Medical Center Avenue

City	State	Zip Code
Zephyrhills	FL	33540-1380

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

Name of Employer	Occupation
The Canadian Drugstore	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016
Transaction ID : 10722738

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address 935 National Parkway
Suite 93550

City	State	Zip Code
Schaumburg	IL	60173-5150

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

Name of Employer	Occupation
BenAxis Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016
Transaction ID : 10722783

Amount of Each Receipt this Period
135.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Joseph K. Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 1128 Lincoln Mall
 Suite 200
 City Lincoln State NE Zip Code 68508-2878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNICO Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 06 / 27 / 2016
Transaction ID : 10722786
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Keith Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 Broadway
 City Bellingham State WA Zip Code 98225-3036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wallace-Rice Benefits, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 06 / 27 / 2016
Transaction ID : 10722787
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Mark Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 Churchill Ct.
 City Fayetteville State GA Zip Code 30214-7801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 27 / 2016
Transaction ID : 10722788
 Amount of Each Receipt this Period 10.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 4330 La Jolla Village Dr.,# 330

City	State	Zip Code
San Diego	CA	92122-6241

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

Name of Employer	Occupation
Auerbach & Gussin Insurance and Financ	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
 06 / 27 / 2016
Transaction ID : 10722795

Amount of Each Receipt this Period
 150.00

Memo Item

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

Mailing Address 39500 High Pointe Blvd., Suite 400

City	State	Zip Code
Novi	MI	48375-5517

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

Name of Employer	Occupation
Health Alliance Administrators	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : 10722798

Amount of Each Receipt this Period
 200.00

Memo Item

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

Mailing Address 1332 Hunters Hollow Court

City	State	Zip Code
Eureka	MO	63025-1051

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

Name of Employer	Occupation
Sonus Benefits by MSMF	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : 10722806

Amount of Each Receipt this Period
 150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Karen L. Kirkpatrick

Mailing Address 263 N Matteson Lake Road

City Bronson State MI Zip Code 49028-9313

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

Name of Employer On Your Mark Consulting Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **217.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : 10722812

Amount of Each Receipt this Period
 42.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ken Doyle

Mailing Address 21700 Oxnard St., Suite 440

City Woodland Hills State CA Zip Code 91367-3689

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

Name of Employer LISI Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : 10722814

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 741 55th St

City Des Moines State IA Zip Code 50312-1826

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

Name of Employer Assist America Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : 10722915

Amount of Each Receipt this Period
 365.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **1407.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Andrea Brody

Mailing Address 6018 E Lowden Rd.

City State Zip Code
Cave Creek AZ 85331-3004

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

Name of Employer Occupation
Bravo Wellness Vice President of Business Developmen

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **297.00**

Date of Receipt
06 / 28 / 2016

Transaction ID : 10722917

Amount of Each Receipt this Period
12.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Ruppert Reinstadler

Mailing Address 6443 SW Beaverton-Hillsdale Hwy Suite 200

City State Zip Code
Portland OR 97221-4230

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

Name of Employer Occupation
Coordinated Resources Group, Inc. Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt
06 / 28 / 2016

Transaction ID : 10722922

Amount of Each Receipt this Period
42.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Shelly K. Winson

Mailing Address PO Box 1914

City State Zip Code
Chandler AZ 85244-1914

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

Name of Employer Occupation
True Choice Benefits LLC Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt
06 / 28 / 2016

Transaction ID : 10722924

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **84.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Charles E. Underhill
Full Name (Last, First, Middle Initial)

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 Underhill Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : 10722927

Amount of Each Receipt this Period
 85.00

Memo Item

B. Margaret Evelyn Stedt
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 74325

City San Clemente State CA Zip Code 92673-0145

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

Name of Employer Stedt Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : 10722929

Amount of Each Receipt this Period
 85.00

Memo Item

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

Mailing Address 3000 A Street, Suite 400

City Anchorage State AK Zip Code 99503-4040

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

Name of Employer The Wilson Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : 10722932

Amount of Each Receipt this Period
 170.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	340.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Audra I. Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 1201 N Watson Rd
Ste 287

City Arlington State TX Zip Code 76006-6222

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

Name of Employer Vogue Insurance Agency, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10722935

Amount of Each Receipt this Period
30.00

Memo Item

B. Candius Michelle Stearns
Full Name (Last, First, Middle Initial)

Mailing Address 3290 W Big Beaver Rd
Ste 503

City Troy State MI Zip Code 48084-2917

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

Name of Employer Mason-McBride/DFB Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10722939

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address 100 Queen Street

City Southington State CT Zip Code 06489-2052

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

Name of Employer Paul E Smith Insurance, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10722947

Amount of Each Receipt this Period
175.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Brett Michelle Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 6398
 City Charleston State WV Zip Code 25362-0398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Black Horse Financial Advisors Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 278.00

Date of Receipt 06 / 28 / 2016
Transaction ID : 10722948
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Eva Jean Fomalont
 Full Name (Last, First, Middle Initial)
 Mailing Address 1804 Juan Tabo NE, Ste A
 City Albuquerque State NM Zip Code 87112-3309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Source Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 28 / 2016
Transaction ID : 10722965
 Amount of Each Receipt this Period 500.00
 Memo Item

c. Michael P. Deagle
 Full Name (Last, First, Middle Initial)
 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 BenAxis Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 06 / 28 / 2016
Transaction ID : 10722967
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	780.00
TOTAL This Period (last page this line 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 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kevin Trokey
Full Name (Last, First, Middle Initial)

Mailing Address 215 S. Kirkwood Rd
Ste 210

City Saint Louis State MO Zip Code 63122-4359

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

Name of Employer Q4intelligence Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10722970

Amount of Each Receipt this Period
500.00

Memo Item

B. Naama O. Pozniak
Full Name (Last, First, Middle Initial)

Mailing Address 12500 Riverside Drive, #206

City Valley Village State CA Zip Code 91607-3437

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

Name of Employer A + Insurance Service Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10722972

Amount of Each Receipt this Period
180.00

Memo Item

C. Reid Lenhart
Full Name (Last, First, Middle Initial)

Mailing Address 715 Douglas Ave, Ste 14

City Altamonte Springs State FL Zip Code 32714-2576

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

Name of Employer The Canadian Medstore Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10722973

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	730.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 67 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Ted J. Ruzicka

Mailing Address 11469 Olive Blvd
Suite 213

City State Zip Code
Creve Coeur MO 63141-7108

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

Name of Employer Occupation
Ruzicka Group Services 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
 06 / 28 / 2016
Transaction ID : 10722978

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address DCB Insurance Services
126 Lomita Street

City State Zip Code
El Segundo CA 90245-4113

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

Name of Employer Occupation
DCB Insurance Services Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : 10722987

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1015 North Dixie

City State Zip Code
Odessa TX 79761-2805

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

Name of Employer Occupation
AL J. Avery & Associates, Inc. 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
 06 / 28 / 2016
Transaction ID : 10722988

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Janelle D. Brookhouser
 Full Name (Last, First, Middle Initial)
 Mailing Address 6422 Grayson Hills Dr NE
 City Rio Rancho State NM Zip Code 87144-0827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UnitedHealthcare Occupation 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
 06 / 28 / 2016
Transaction ID : 10722989
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Michael R. Stephens
 Full Name (Last, First, Middle Initial)
 Mailing Address 329 S Elm St Suite 207
 City Jenks State OK Zip Code 74037-3765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tallgrass Benefits Occupation 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
 06 / 28 / 2016
Transaction ID : 10722992
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Rosanne Wolfe
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 17236
 City Tucson State AZ Zip Code 85731-7236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wolfe Insurance & Consultants, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : 10722997
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Steven Selinsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 28638 Oak Point Drive
 City Farmington Hills State MI Zip Code 48331-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Alliance Plan Occupation Director of Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **632.00**

Date of Receipt **06 / 28 / 2016**
Transaction ID : 10722998
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. G. Wayne Pettigrew
 Full Name (Last, First, Middle Initial)
 Mailing Address 3325 French Park Drive, Suite One
 City Edmond State OK Zip Code 73034-7265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vanguard Benefits Group, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1390.00**

Date of Receipt **06 / 28 / 2016**
Transaction ID : 10722999
 Amount of Each Receipt this Period **1000.00**
 Memo Item

C. Candius Michelle Stearns
 Full Name (Last, First, Middle Initial)
 Mailing Address 3290 W Big Beaver Rd Ste 503
 City Troy State MI Zip Code 48084-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mason-McBride/DFB Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **490.00**

Date of Receipt **06 / 28 / 2016**
Transaction ID : 10723001
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 30 Lumpkin St, Suite D

City Lawrenceville State GA Zip Code 30046-8410

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

Name of Employer Multiple Benefits Corporation Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
06 / 29 / 2016
Transaction ID : 10723008

Amount of Each Receipt this Period
85.00

Memo Item

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

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 Benefit Concepts, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
735.00

Date of Receipt
06 / 28 / 2016
Transaction ID : 10723481

Amount of Each Receipt this Period
50.00

Memo Item

C. Brian Muhich
Full Name (Last, First, Middle Initial)

Mailing Address 699 Littleton Trail

City Elgin State IL Zip Code 60120-7002

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

Name of Employer Be Well Consulting Corp. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
06 / 30 / 2016
Transaction ID : 4331524

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1135.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Lynn M. Schreder
Full Name (Last, First, Middle Initial)

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 KHI Solutions Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433076113606

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Tiffany Stock
Full Name (Last, First, Middle Initial)

Mailing Address 3111 C St. Suite 500

City Anchorage State AK Zip Code 99503-3973

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

Name of Employer Northrim Benefits Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433079013606

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

C. Madeleine Brown
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1490,

City Jackson State MS Zip Code 39215-1490

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

Name of Employer Fisher Brown Bottrell Insurance, Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433118913606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 185.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Dwane C. McFerrin
 Full Name (Last, First, Middle Initial)
 Mailing Address 8420 West Dodge Road
 Suite 510
 City Omaha State NE Zip Code 68114-3432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Market Sales, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433168113606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. H Elizabeth Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3013 Sonora Canyon Rd
 City Weatherford State TX Zip Code 76087-8215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Senior Services of Texas Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433187713606
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Robert L. Rifkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Stonewall Lane
 City Mamaroneck State NY Zip Code 10543-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance & Financial Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433196813606
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2444 East Hill Rd.

City Grand Blanc State MI Zip Code 48439-5098

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

Name of Employer Franklin Benefit Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 426.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR433316613606

Amount of Each Receipt this Period 75.00

Memo Item

P/R Deduction (\$75.00 Monthly)

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

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 Benico, LTD Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436791113606

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

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

Mailing Address PO Box 5716

City Boise State ID Zip Code 83705-0716

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

Name of Employer Insurance Network America Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436808013606

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	167.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Brad L Christian
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 188
 City Clatonia State NE Zip Code 68328-0188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance & Investments Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436821013606
 Amount of Each Receipt this Period **10.00**
 Memo Item
 P/R Deduction (\$10.00 Monthly)

B. Janet Trautwein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 New York Ave. NW, Ste 1100
 City Washington State DC Zip Code 20005-3987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAHU Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1020.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436821413606
 Amount of Each Receipt this Period **170.00**
 Memo Item
 P/R Deduction (\$170.00 Monthly)

C. William L. Sutherland
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O Box 795008
 131 Interpark Blvd.
 City San Antonio State TX Zip Code 78279-5008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wortham Insurance & Risk Management Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436823413606
 Amount of Each Receipt this Period **100.00**
 Memo Item
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Elizabeth E. Rios-Carl
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 North Campbell
 City El Paso State TX Zip Code 79901-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Houghton Financial Partners LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436824513606
 Amount of Each Receipt this Period **50.00**
 Memo Item
 P/R Deduction (\$50.00 Monthly)

B. Thomas Besselman
 Full Name (Last, First, Middle Initial)
 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 Gallagher Benefit Services Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436824613606
 Amount of Each Receipt this Period **250.00**
 Memo Item
 P/R Deduction (\$250.00 Monthly)

C. Jesse A. Patton
 Full Name (Last, First, Middle Initial)
 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 Associations Marketing Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2100.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436829513606
 Amount of Each Receipt this Period **350.00**
 Memo Item
 P/R Deduction (\$350.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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 Neace Lukens Holding Company, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436829713606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

B. Elizabeth Ashmore
Full Name (Last, First, Middle Initial)

Mailing Address 6102 82nd St, Bldg #6

City Lubbock State TX Zip Code 79424-0803

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

Name of Employer Ashmore & Associates Insurance Agency, Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436830313606

Amount of Each Receipt this Period 170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

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

Mailing Address 13810 National Bank Parkway, Suite

City Omaha State NE Zip Code 68154

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

Name of Employer Holmes Murphy & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436836213606

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 77 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert A. Grundman
 Full Name (Last, First, Middle Initial)
 Mailing Address 7412 Karl Drive
 City Lincoln State NE Zip Code 68516-4368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Benefit Strategies Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436838913606
 Amount of Each Receipt this Period **50.00**
 Memo Item
 P/R Deduction (\$50.00 Monthly)

B. Michael E. Matznick
 Full Name (Last, First, Middle Initial)
 Mailing Address 3150 N. Elm Street Suite 201
 City Greensboro State NC Zip Code 27408-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EbenConcepts Company Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436839813606
 Amount of Each Receipt this Period **100.00**
 Memo Item
 P/R Deduction (\$100.00 Monthly)

C. Dorothy M. Cociu
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 6677
 City Fullerton State CA Zip Code 92834-6677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advanced Benefit Consulting & Insuranc Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **510.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436844613606
 Amount of Each Receipt this Period **85.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. H. Larry Fortenberry
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 16566

City Jackson	State MS	Zip Code 39236-6566
-----------------	-------------	------------------------

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

Name of Employer Executive Planning Group, P.A.	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR436852613606

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Tom Swayne
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 31029

City Charleston	State SC	Zip Code 29417-1029
--------------------	-------------	------------------------

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

Name of Employer David M. Gilston Insurance Agency, Inc	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR436853713606

Amount of Each Receipt this Period
100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. George R. Keeling
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Drawer K-1630
507 Avenue G

City Levelland	State TX	Zip Code 79336-3720
-------------------	-------------	------------------------

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

Name of Employer George R. Keeling Insurance Agency	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR436865513606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	227.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 137 Executive Dr. Suite D

City Madison State MS Zip Code 39110-8456

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

Name of Employer Mobley Insurance Agency LLC Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436869313606

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

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

Mailing Address 31930 Daniel Way

City Temecula State CA Zip Code 92591-2129

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

Name of Employer Paula Wilson, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436873513606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Kathy M. Rainwater
Full Name (Last, First, Middle Initial)

Mailing Address 515 West Southwest Loop 323

City Tyler State TX Zip Code 75701-9455

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

Name of Employer Threlkeld & Company Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436873713606

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: (check only one)	PAGE 80 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Rodney Stuart
Full Name (Last, First, Middle Initial)

Mailing Address 600 E Carmel Dr
Suite 100

City Carmel State IN Zip Code 46032-2805

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

Name of Employer Strategic Insurance Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR436883313606

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Jackie L. Spragins
Full Name (Last, First, Middle Initial)

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 Allred-Thompson-Mason-Daugherty Insura Occupation Producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR436895313606

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

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

Mailing Address 1173 Brittmore

City Houston State TX Zip Code 77043-5003

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

Name of Employer Benefit Concepts, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR436903713606

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 142.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Tonya S. Booth
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 Gateway Blvd.
 Suite 200
 City Richardson State TX Zip Code 75080-3646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Upshaw Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436911013606
 Amount of Each Receipt this Period 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Louie L. Cason
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 11229
 City Columbia State SC Zip Code 29211-1229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Cason Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436934813606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Jimmie Whitmire
 Full Name (Last, First, Middle Initial)
 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 Whitmire & Whitmire, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR436939113606
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. James R. Stenger
 Full Name (Last, First, Middle Initial)
 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 NAHU Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1145.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436939913606
 Amount of Each Receipt this Period **170.00**
 Memo Item
 P/R Deduction (\$170.00 Monthly)

B. Gregory J. Seifert
 Full Name (Last, First, Middle Initial)
 Mailing Address PO 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 Biggs Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **510.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436941613606
 Amount of Each Receipt this Period **85.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. John C. Parker
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Hope St
 Unit 1312
 City Niantic State CT Zip Code 06357-2454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Parker Agency Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **775.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR436986813606
 Amount of Each Receipt this Period **100.00**
 Memo Item
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	355.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. William Craig Splawn
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Avenue C
 City State Zip Code
 Katy TX 77493-2302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Splawn & Associates Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : PR436992813606
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

B. Kelly Don Fristoe
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 8th Street, Suite 300
 City State Zip Code
 Wichita Falls TX 76301-3317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Financial Partners Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 815.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : PR437002313606
 Amount of Each Receipt this Period
 30.00
 Memo Item
 P/R Deduction (\$30.00 Monthly)

C. Ryan P. Thorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 10342 South Springcrest Lane
 City State Zip Code
 South Jordan UT 84095-4538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ryan P. Thorn Insurance Planning, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 415.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : PR437004013606
 Amount of Each Receipt this Period
 40.00
 Memo Item
 P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Scott T. Buie
Full Name (Last, First, Middle Initial)

Mailing Address 6440 South Wasatch Blvd., #150

City	State	Zip Code
Salt Lake City	UT	84121-3513

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

Name of Employer	Occupation
Buie Insurance Services	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR437010513606

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

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

Mailing Address 11 Summer Street, Suite 6

City	State	Zip Code
Chelmsford	MA	01824-3064

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

Name of Employer	Occupation
New England Medical Insurance Agency	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR437011513606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

Mailing Address 233 South 13th Street, Suite 1650

City	State	Zip Code
Lincoln	NE	68508-2036

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

Name of Employer	Occupation
The Harry A. Koch Co	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR437016713606

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: (check only one)	PAGE 85 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Matt B. Schwartz
Full Name (Last, First, Middle Initial)

Mailing Address 2950 Breckenridge Lane, Suite 8

City Louisville State KY Zip Code 40220-1462

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

Name of Employer Schwartz Insurance Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437037813606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

Mailing Address 1027 S Pendleton Street Suite B-217

City Easley State SC Zip Code 29642-1046

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

Name of Employer Ebenconcepts Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437058213606

Amount of Each Receipt this Period 40.00

Memo Item

P/R Deduction (\$40.00 Monthly)

C. Terri M. Olson
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 21479

City Keizer State OR Zip Code 97307-1479

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

Name of Employer Olson Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437070213606

Amount of Each Receipt this Period 65.00

Memo Item

P/R Deduction (\$65.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 26555 Evergreen Drive
Ste 535

City Southfield State MI Zip Code 48076-4213

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

Name of Employer Comprehensive Benefits Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
679.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437076113606

Amount of Each Receipt this Period
84.00

Memo Item

P/R Deduction (\$84.00 Monthly)

B. Juan R. Lopez
Full Name (Last, First, Middle Initial)

Mailing Address 22431 Antonio Pkwy
Suite B160-420

City Rancho Santa Margarita State CA Zip Code 92688-2804

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437079013606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Shelley A Chornak
Full Name (Last, First, Middle Initial)

Mailing Address 7251 Engle Rd. Suite 103

City Cleveland State OH Zip Code 44130-3400

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

Name of Employer Sage Partners, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437080813606

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: (check only one)	PAGE 87 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Linda Rose Koehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 Main Street
 City Pleasanton State CA Zip Code 94566-8206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Herzog Insurance Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437090113606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Dierdre Kennedy-Simington
 Full Name (Last, First, Middle Initial)
 Mailing Address 17200 Ventura Blvd., Suite 312
 City Encino State CA Zip Code 91316-5018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Genesis Financial & Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437094113606
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. Joseph E. Henehan
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 Carnegie Dr., Ste. #205
 City San Bernardino State CA Zip Code 92408-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Henehan Company Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437097913606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Mario Roiz
Full Name (Last, First, Middle Initial)

Mailing Address 10446 NW 31st Terrace

City Doral State FL Zip Code 33172-1200

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

Name of Employer HR Benefit Services, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437104913606

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

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

Mailing Address 6101 Executive Boulevard, Suite 12

City Rockville State MD Zip Code 20852-3907

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

Name of Employer Insurance Marketing Center, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437105913606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Joseph W. Buyalos
Full Name (Last, First, Middle Initial)

Mailing Address 9713 Key West Ave, Suite 401

City Rockville State MD Zip Code 20850-4082

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

Name of Employer The Insurance Exchange, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437111613606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 212.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BRIAN J. MCEVILLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4455 S. Pecos Rd.
 City Las Vegas State NV Zip Code 89121-5029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GLB Insurance Group of Nevada Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437117713606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Joseph K. Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 1128 Lincoln Mall Suite 200
 City Lincoln State NE Zip Code 68508-2878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNICO Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437118013606
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

C. Wendy Vanderwater Bratteli
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 West Southwest Loop 323
 City Tyler State TX Zip Code 75701-9455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Threlkeld & Company Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437122413606
 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 90 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Bruce D. Benton
 Full Name (Last, First, Middle Initial)
 Mailing Address 17200 Ventura Blvd
 Suite 312
 City Encino State CA Zip Code 91316-5018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Genesis Financial & Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437123013606
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

B. Linda K. Friedrich
 Full Name (Last, First, Middle Initial)
 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 UNICO Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437129113606
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

C. Laura L. Hebert
 Full Name (Last, First, Middle Initial)
 Mailing Address 935 Graham Road
 PO BOX 18508
 City Corpus Christi State TX Zip Code 78418-5123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hebert Insurance Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437154813606
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 262.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 120
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Robert H. White
Full Name (Last, First, Middle Initial)
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 Plan Benefit Analysts of Tulsa, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437174113606
Amount of Each Receipt this Period 42.00
 Memo Item
P/R Deduction (\$42.00 Monthly)

B. Dale Ducote
Full Name (Last, First, Middle Initial)
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 Health Plus Consulting Services Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437184613606
Amount of Each Receipt this Period 42.00
 Memo Item
P/R Deduction (\$42.00 Monthly)

C. Alan R. Schulman
Full Name (Last, First, Middle Initial)
Mailing Address 6500 Rock Spring Drive Suite 410
City Bethesda State MD Zip Code 20817-1199
FEC ID number of contributing federal political committee. **C**
Name of Employer The Meltzer Group Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437194613606
Amount of Each Receipt this Period 85.00
 Memo Item
P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 169.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 92 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. John B. Crable
 Full Name (Last, First, Middle Initial)
 Mailing Address 5000 Dearborn Cir. Ste 100
 City State Zip Code
 Mount Laurel NJ 08054-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Corporate Synergies Group, Inc. 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
 06 / 30 / 2016
Transaction ID : PR437199713606
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

B. Victoria J. Braden
 Full Name (Last, First, Middle Initial)
 Mailing Address 3875 Johns Creek Parkway, Suite C
 City State Zip Code
 Suwanee GA 30024-1294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Braden Benefit Strategies, Inc Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437201913606
 Amount of Each Receipt this Period
 250.00
 Memo Item
 P/R Deduction (\$250.00 Monthly)

C. Lon G. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 A Street, Suite 400
 City State Zip Code
 Anchorage AK 99503-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Wilson Agency, LLC Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437204313606
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Jennifer Bundy-Cobb
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 A Street, Suite 400
 City Anchorage State AK Zip Code 99503-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Wilson Agency, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **545.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR437204413606
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Marilyn A. Stenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 8926 Crown Colony Blvd
 City Fort Myers State FL Zip Code 33908-5627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MVS Consulting Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **510.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR437206413606
 Amount of Each Receipt this Period **85.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. James S. Garbina
 Full Name (Last, First, Middle Initial)
 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 The Harry A. Koch Co Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **510.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR437212213606
 Amount of Each Receipt this Period **85.00**
 Memo Item
 P/R Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 39500 High Pointe Blvd., Suite 400

City	State	Zip Code
Novi	MI	48375-5517

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

Name of Employer	Occupation
Health Alliance Administrators	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR437218313606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

Mailing Address 9424 Double R Blvd

City	State	Zip Code
Reno	NV	89521-5977

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

Name of Employer	Occupation
Comstock Insurance Agencies, Inc.	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
507.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR437231213606

Amount of Each Receipt this Period
47.00

Memo Item

P/R Deduction (\$47.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Sandra Lee Powers-Booth

Mailing Address 4817 S. 175th Street

City	State	Zip Code
Seatac	WA	98188-3710

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

Name of Employer	Occupation
Health Benefits Northwest	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR437264313606

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: (check only one)	PAGE 95 OF 120
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jennifer L. Toups
 Full Name (Last, First, Middle Initial)
 Mailing Address #1 Galleria Blvd, Suite 1122
 City State Zip Code
 Metairie LA 70001-2092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Humana Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437270513606
 Amount of Each Receipt this Period
 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. James F. Summers
 Full Name (Last, First, Middle Initial)
 Mailing Address 8420 West Dodge Road, 5th Floor
 City State Zip Code
 Omaha NE 68114-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Senior Market Sales, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437281013606
 Amount of Each Receipt this Period
 125.00
 Memo Item
 P/R Deduction (\$125.00 Monthly)

C. Patricia Mihalyi-Stiffler
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 N. Riverview Drive
 City State Zip Code
 Anaheim CA 92808-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Options in Insurance Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437326113606
 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: (check only one)	PAGE 96 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Susan R. Pittman
Full Name (Last, First, Middle Initial)

Mailing Address 32418 51st Avenue, SW

City Federal Way State WA Zip Code 98023-1936

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

Name of Employer Insure NW Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437343513606

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Jim Lawless
Full Name (Last, First, Middle Initial)

Mailing Address Epic Insurance Solutions, LLC
710 East Main Street

City Lexington State KY Zip Code 40502-1602

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

Name of Employer Epic Insurance Solutions, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437348013606

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

C. Rina Tikia
Full Name (Last, First, Middle Initial)

Mailing Address 3525 N. Causeway Blvd., Suite 815

City Metairie State LA Zip Code 70002-3655

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

Name of Employer Tikia Consulting Group, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437375313606

Amount of Each Receipt this Period 30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Valerie Lynn Cramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 588 - 3 Mile Road, NW
 Suite 101
 City Grand Rapids State MI Zip Code 49544-8221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Grotenhuis Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437416413606
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

B. Robert S. Clark
 Full Name (Last, First, Middle Initial)
 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 Clark Insurance Associates, PLLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437427213606
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. Joel Rosenblum
 Full Name (Last, First, Middle Initial)
 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 Insurance for Asset Protection Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437427413606
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 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 98 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 3602 Harwich Ct

City State Zip Code
Greenacres FL 33467-1532

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

Name of Employer Occupation
VMB Solutions Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437432013606

Amount of Each Receipt this Period
30.00

Memo Item

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Amy D. Mutter

Mailing Address 2670 Electric Road

City State Zip Code
Roanoke VA 24018-3511

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

Name of Employer Occupation
Innovative Insurance Group, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437454913606

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Reed Damron

Mailing Address 5880 Live Oak Parkway, Suite 250

City State Zip Code
Norcross GA 30093-1740

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

Name of Employer Occupation
HIRE Benefits, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437468913606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

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

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

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

FOR LINE NUMBER: PAGE 99 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 915 Englewood Avenue

City State Zip Code
Durham NC 27701-1105

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

Name of Employer Occupation
Ebenconcepts Company Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1020.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437474513606

Amount of Each Receipt this Period
170.00

Memo Item

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Randy L. McDaniel

Mailing Address 575 Chambers Road

City State Zip Code
McDonough GA 30253-6447

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

Name of Employer Occupation
McDaniel Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437485713606

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Susan M. Rider

Mailing Address 1402 N Capital #400

City State Zip Code
Indianapolis IN 46202-2375

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

Name of Employer Occupation
Gregory & Appel Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
487.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2016
Transaction ID : PR437510713606

Amount of Each Receipt this Period
63.00

Memo Item

P/R Deduction (\$63.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Jeanne A. Embry
 Full Name (Last, First, Middle Initial)
 Mailing Address 26240 Wacker Drive
 City Chesterfield State MI Zip Code 48051-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Comprehensive Benefits Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR437533413606
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

B. Maggie Coley
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 Olde Gate Court
 City Pooler State GA Zip Code 31322-8281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coley Benefit Services, Inc Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR437534013606
 Amount of Each Receipt this Period **42.00**
 Memo Item
 P/R Deduction (\$42.00 Monthly)

C. David Contorno
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 Professional Park Dr Ste 103
 City Mooresville State NC Zip Code 28117-5538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lake Norman Benefits, Inc Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **355.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : PR437566613606
 Amount of Each Receipt this Period **30.00**
 Memo Item
 P/R Deduction (\$30.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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 Mobley Insurance Agency, LLC, a Divisi Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437587513606

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. Doris Waller
Full Name (Last, First, Middle Initial)

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 Pan-American Benefits Solutions Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437591513606

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

C. Judith L. Robinson
Full Name (Last, First, Middle Initial)

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 CFG Insurance Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437594113606

Amount of Each Receipt this Period 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 177.00

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

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

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

FOR LINE NUMBER: PAGE 102 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Ryan R. Swinton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1128 Lincoln Mall
 Suite 200
 City Lincoln State NE Zip Code 68508-2878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNICO Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437594913606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

B. Patrick Burns
 Full Name (Last, First, Middle Initial)
 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 Burns Employee Benefits Insurance Serv Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437600513606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

C. Eugene Starks
 Full Name (Last, First, Middle Initial)
 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 Benefit Administration Services, Ltd. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437603113606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 5880 Live Oak Parkway, # 230

City Norcross State GA Zip Code 30093-1740

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

Name of Employer The LaRocco Companies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR437640913606

Amount of Each Receipt this Period 40.00

Memo Item

P/R Deduction (\$40.00 Monthly)

B. Steven Israel
Full Name (Last, First, Middle Initial)

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 S. Florida Affiliated Health Insurers, Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 427.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR437654413606

Amount of Each Receipt this Period 42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

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

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 The Partners Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR437657713606

Amount of Each Receipt this Period 170.00

Memo Item

P/R Deduction (\$0.00 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: (check only one)	PAGE 104 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Marcie Strouse
Full Name (Last, First, Middle Initial)

Mailing Address 1501 Ingersoll Ave
Ste 200

City Des Moines State IA Zip Code 50309-3102

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

Name of Employer Prisma Strategies Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437683113606

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

B. Dianne M. Kelley
Full Name (Last, First, Middle Initial)

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 Sandbrook Benefits Group, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437684513606

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

C. Arthur Granado
Full Name (Last, First, Middle Initial)

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 The Granado Group Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437693213606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Yolanda Marie Webb
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Via Piemonte
 City Ontario State CA Zip Code 91710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Trinity Financial Partners Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 702.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437705613606
 Amount of Each Receipt this Period 142.00
 Memo Item
 P/R Deduction (\$142.00 Monthly)

B. Teresa Conto
 Full Name (Last, First, Middle Initial)
 Mailing Address 15800 Crabbs Branch Way #350
 City Rockville State MD Zip Code 20855-2697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gallagher Benefit Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437740813606
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$170.00 Monthly)

C. Kareim R. Cade
 Full Name (Last, First, Middle Initial)
 Mailing Address 28411 Northwestern Hwy., Ste 950
 City Southfield State MI Zip Code 48034-5515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Great Lakes Benefit Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 30 / 2016
Transaction ID : PR437778613606
 Amount of Each Receipt this Period 85.00
 Memo Item
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	397.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 120
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Julie Hulsey
Full Name (Last, First, Middle Initial)

Mailing Address 6601 I-40 West, Ste. 1
PO Box 32015

City Amarillo State TX Zip Code 79120-2015

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

Name of Employer Insurance Professionals Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437785813606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

Mailing Address 545 South Third Street
Suite 300

City Louisville State KY Zip Code 40202-1936

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

Name of Employer Sterling G. Thompson Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437797613606

Amount of Each Receipt this Period
85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

C. Debbie R. Hediger
Full Name (Last, First, Middle Initial)

Mailing Address 400 N Tampa St
Suite 1900

City Tampa State FL Zip Code 33602-4776

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

Name of Employer Lykes Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
06 / 30 / 2016
Transaction ID : PR437852413606

Amount of Each Receipt this Period
42.00

Memo Item

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 212.00

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

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

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

FOR LINE NUMBER: PAGE 107 OF 120
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 344 Main Street
 PO Box 426

City Seward State NE Zip Code 68434-2117

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

Name of Employer Kolterman Agency, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : PR437855213606

Amount of Each Receipt this Period
 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

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

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 Forward Health Consulting Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 635.00

Date of Receipt
 06 / 30 / 2016
Transaction ID : PR470100113606

Amount of Each Receipt this Period
 85.00

Memo Item

P/R Deduction (\$85.00 Monthly)

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	37399.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10724719

Amount of Each Disbursement this Period

Memo Item
Credit Card Fees

Full Name (Last, First, Middle Initial)

B. PayPal

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit Card Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10724720

Amount of Each Disbursement this Period

Memo Item
Credit Card Fees

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address 7300 Chapman Way

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
Credit Card Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10724721

Amount of Each Disbursement this Period

Memo Item
Credit Card Fees

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. George Holding For Congress Inc.

Mailing Address PO Box 97187

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
5/10 1:1 Coffee

Candidate Name
George Holding

Office Sought: House Senate President
State: NC District: 13

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2016

Transaction ID : 10620580

Amount of Each Disbursement this Period

1000.00

Memo Item
5/10 1:1 Coffee

Full Name (Last, First, Middle Initial)

B. Pete Sessions For Congress

Mailing Address PO Box 823047

City Dallas State TX Zip Code 75382

Purpose of Disbursement
6/6 1:1 Coffee

Candidate Name
Pete Sessions

Office Sought: House Senate President
State: TX District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643726

Amount of Each Disbursement this Period

5000.00

Memo Item
6/6 1:1 Coffee

Full Name (Last, First, Middle Initial)

C. Friends Of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
6/7 Reception

Candidate Name
Sen. Charles Schumer

Office Sought: House Senate President
State: NY District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643727

Amount of Each Disbursement this Period

2500.00

Memo Item
6/7 Reception

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

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

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Jeff Fortenberry For United States Congress

Mailing Address PO Box 30265

City Lincoln State NE Zip Code 68503

Purpose of Disbursement
6/15 Lunch

011

Candidate Name

Jeffrey Fortenberry

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NE District: 01

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643737

Amount of Each Disbursement this Period

1000.00

Memo Item
6/15 Lunch

Full Name (Last, First, Middle Initial)

B. Ryan Costello For Congress

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement
6/15 Reception

011

Candidate Name

Rep. Ryan Costello

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643738

Amount of Each Disbursement this Period

1000.00

Memo Item
6/15 Reception

Full Name (Last, First, Middle Initial)

C. Friends Of Joe Heck

Mailing Address PO Box 753908

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
6/15 Dinner

011

Candidate Name

Joe Heck

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643740

Amount of Each Disbursement this Period

1000.00

Memo Item
6/15 Dinner

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

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Mark Pocan For Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
6/22 Reception

Category/
Type

Candidate Name
Mark Pocan

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10643741

Amount of Each Disbursement this Period

Memo Item
6/22 Reception

Full Name (Last, First, Middle Initial)

B. Coffman For Congress

Mailing Address 4950 S Yosemite Street F2 #511

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement
6/23 Lunch

Category/
Type

Candidate Name
Michael Coffman

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10643743

Amount of Each Disbursement this Period

Memo Item
6/23 Lunch

Full Name (Last, First, Middle Initial)

C. Friends Of Dave Reichert

Mailing Address PO Box 2032

City Issaquah State WA Zip Code 98027

Purpose of Disbursement
6/24 Lunch

Category/
Type

Candidate Name
Dave Reichert

Office Sought: House
 Senate
 President
State: WA District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10643744

Amount of Each Disbursement this Period

Memo Item
6/24 Lunch

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Georgians For Isakson

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement
6/28 Dinner

Candidate Name

John Isakson

Office Sought: House
 Senate
 President

State: GA District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643745

Amount of Each Disbursement this Period

4000.00

Memo Item
6/28 Dinner

Full Name (Last, First, Middle Initial)

B. Friends Of Joe Heck

Mailing Address PO Box 753908

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
6/29 Dinner

Candidate Name

Joe Heck

Office Sought: House
 Senate
 President

State: NV District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643746

Amount of Each Disbursement this Period

2000.00

Memo Item
6/29 Dinner

Full Name (Last, First, Middle Initial)

C. BLUEGRASS COMMITTEE

Mailing Address 220 1/2 E ST., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Mitch McConnell

Office Sought: House
 Senate
 President

State: KY District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 10643751

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

11000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Scott Peters For Congress

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Earmarked through NewDemPAC

011

Category/
Type

Candidate Name

Scott Peters

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : 10643974

Amount of Each Disbursement this Period

2000.00

Memo Item
Earmarked through NewDemPAC

Full Name (Last, First, Middle Initial)

B. Sean Patrick Maloney For Congress

Mailing Address PO Box 270

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Earmarked through NewDemPAC

011

Category/
Type

Candidate Name

Sean Maloney

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : 10643975

Amount of Each Disbursement this Period

2000.00

Memo Item
Earmarked through NewDemPAC

Full Name (Last, First, Middle Initial)

C. Kathleen Rice For Congress

Mailing Address 410 Jericho Turnpike
Suite 200

City Jericho State NY Zip Code 11753

Purpose of Disbursement
Earmarked through NewDemPAC

011

Category/
Type

Candidate Name

Rep. Kathleen Rice

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 04

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : 10643976

Amount of Each Disbursement this Period

2000.00

Memo Item
Earmarked through NewDemPAC

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

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Pete Aguilar For Congress

Mailing Address PO Box 10954

City San Bernardino State CA Zip Code 92423

Purpose of Disbursement
Earmarked through NewDemPAC

011

Candidate Name

Rep. Pete Aguilar

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	6

Transaction ID : 10643978

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item
Earmarked through NewDemPAC

Full Name (Last, First, Middle Initial)

B. Kurt Schrader For Congress

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement
6/9 Reception Host

011

Candidate Name

Kurt Schrader

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	6

Transaction ID : 10643979

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item
6/9 Reception Host

Full Name (Last, First, Middle Initial)

C. Rob Woodall For Congress

Mailing Address Post Office Box 1871

City Lawrenceville State GA Zip Code 30046

Purpose of Disbursement
6/22 Lunch

011

Candidate Name

Rob Woodall

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	6

Transaction ID : 10643980

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item
6/22 Lunch

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

8	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

8	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Ami Bera For Congress

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement
Earmarked through NewDemPAC

011

Category/
Type

Candidate Name

Amerish Bera

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : 10643981

Amount of Each Disbursement this Period

2000.00

Memo Item
Earmarked through NewDemPAC

Full Name (Last, First, Middle Initial)

B. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
6/15 Dinner

011

Category/
Type

Candidate Name

Joseph Donnelly

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IN District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : 10645712

Amount of Each Disbursement this Period

2000.00

Memo Item
6/15 Dinner

Full Name (Last, First, Middle Initial)

C. Wyden For Senate

Mailing Address 232 Ne 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement
August Weekend Trip

011

Category/
Type

Candidate Name

Ronald Wyden

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : 10645713

Amount of Each Disbursement this Period

5000.00

Memo Item
August Weekend Trip

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

9000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Buck For Colorado

Mailing Address P.O. Box 338018

City State Zip Code
Greeley CO 80633

Purpose of Disbursement
6/16 Lunch

011
Category/
Type

Candidate Name

Rep. Ken Buck

Office Sought: House
 Senate
 President
State: CO District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10719939

Amount of Each Disbursement this Period

Memo Item
6/16 Lunch

Full Name (Last, First, Middle Initial)

B. Friends Of John McCain Inc

Mailing Address PO Box 16664

City State Zip Code
Arlington VA 22215

Purpose of Disbursement
6/16 Lunch

011
Category/
Type

Candidate Name

Mr. John McCain

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10719940

Amount of Each Disbursement this Period

Memo Item
6/16 Lunch

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Linda Sanchez

Mailing Address 410 1st St Se
Suite 310

City State Zip Code
Washington DC 20003

Purpose of Disbursement
6/22 Lunch

011
Category/
Type

Candidate Name

Linda Sanchez

Office Sought: House
 Senate
 President
State: CA District: 39

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 10719941

Amount of Each Disbursement this Period

Memo Item
6/22 Lunch

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Dold For Congress

Mailing Address PO Box 6312

City Libertyville State IL Zip Code 60048

Purpose of Disbursement
6/22 Lunch

011
Category/
Type

Candidate Name

Robert Dold Jr

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : 10719942

Amount of Each Disbursement this Period

1000.00

Memo Item
6/22 Lunch

Full Name (Last, First, Middle Initial)

B. Clarke For Congress

Mailing Address 111-36 200th. Street

City Hollis State NY Zip Code 11412

Purpose of Disbursement
6/23 Lunch

011
Category/
Type

Candidate Name

Rep. Yvette Clarke

Office Sought: House
 Senate
 President
State: NY District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : 10719943

Amount of Each Disbursement this Period

1000.00

Memo Item
6/23 Lunch

Full Name (Last, First, Middle Initial)

C. Diane Black For Congress

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066

Purpose of Disbursement
6/22 Dinner Host

011
Category/
Type

Candidate Name

Diane Black

Office Sought: House
 Senate
 President
State: TN District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : 10719945

Amount of Each Disbursement this Period

3000.00

Memo Item
6/22 Dinner Host

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

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Donovan For Congress

Mailing Address 440 Leverett Avenue

City Staten Island State NY Zip Code 10308

Purpose of Disbursement
6/22 Dinner Host

011

Category/
Type

Candidate Name
Rep. Daniel Donovan Jr.

Office Sought: House
 Senate
 President
State: NY District: 11

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : 10720333

Amount of Each Disbursement this Period

2000.00

Memo Item
6/22 Dinner Host

Full Name (Last, First, Middle Initial)

B. Friends Of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
6/30 Breakfast Co-Host

011

Category/
Type

Candidate Name
Patrick Toomey

Office Sought: House
 Senate
 President
State: PA District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : 10720334

Amount of Each Disbursement this Period

3000.00

Memo Item
6/30 Breakfast Co-Host

Full Name (Last, First, Middle Initial)

C. Brian Fitzpatrick For Congress

Mailing Address PO Box 939

City Langhorne State PA Zip Code 19047

Purpose of Disbursement
DC Event

011

Category/
Type

Candidate Name
Brian Fitzpatrick

Office Sought: House
 Senate
 President
State: PA District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2016

Transaction ID : 10720943

Amount of Each Disbursement this Period

2000.00

Memo Item
DC Event

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

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Tiberi For Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement
6/22 Breakfast Host

011

Candidate Name

Patrick Tiberi

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 21 / 2016

Transaction ID : 10721430

Amount of Each Disbursement this Period

3000.00

Memo Item
6/22 Breakfast Host

Full Name (Last, First, Middle Initial)

B. Grassley Committee Inc

Mailing Address PO Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement
6/30 Breakfast Host

011

Candidate Name

Charles Grassley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 21 / 2016

Transaction ID : 10721434

Amount of Each Disbursement this Period

2500.00

Memo Item
6/30 Breakfast Host

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

5500.00

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

81000.00