

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

Office Use Only

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

12FE4M5

Health Underwriters Political Action Committee

ADDRESS (number and street) ▼

1212 New York Ave

Suite 1100

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00283135

3. IS THIS
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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 01 2015

through

M M M / D D D / Y Y Y Y Y Y
05 31 2015

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 M / D D D / Y Y Y Y Y Y
06 11 2015

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
05		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
05		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2015</div>		<div>93702.40</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>100111.67</div>	
(c) Total Receipts (from Line 19)	<div>37680.92</div>	<div>240789.82</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>137792.59</div>	<div>334492.22</div>
7. Total Disbursements (from Line 31).....	<div>18820.30</div>	<div>215519.93</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>118972.29</div>	<div>118972.29</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	



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)

Page 3

Write or Type Committee Name

Health Underwriters Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 05 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 05 / 31 / 2015
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).....

20748.25

118065.75

(ii) Unitemized

16932.67

118931.35

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

37680.92

236997.10

(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)

37680.92

236997.10

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

3792.72

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))..... ▶

37680.92

240789.82

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

37680.92

240789.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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	1320.30	9054.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1320.30	9054.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	205700.00
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	765.00
(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	765.00
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)) ..	18820.30	215519.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18820.30	215519.93

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)	37680.92	236997.10
34. Total Contribution Refunds (from Line 28(d))	0.00	765.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37680.92	236232.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1320.30	9054.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3792.72
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1320.30	5262.21

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 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Juna M. Penney

Mailing Address 2091 Shepherdia Drive

City

Anchorage

State

AK

Zip Code

99508-4043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Providence Health & Services Alaska

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

05 / 02 / 2015

Transaction ID : 9824761

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Chad P. Schneider

Mailing Address 2211 Michelson Drive
Suite 1150

City

Irvine

State

CA

Zip Code

92612-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aflac

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

05 / 03 / 2015

Transaction ID : 9824764

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Spencer A. Lehmann

Mailing Address 2145 E. Tahquitz Cnyn Wy.
Suite 4-506

City

Palm Springs

State

CA

Zip Code

92262-7020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lehmann/Wood & Associates, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

05 / 03 / 2015

Transaction ID : 9824766

Amount of Each Receipt this Period

170.00

Monthly Contribution

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

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

340.00

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 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. John V Heath

Mailing Address 5750 Genesis Ct
Ste 210

City Frisco State TX Zip Code 75034-4182

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lone Star Benefits, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : 9824777

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Erin B. Fisher

Mailing Address 131-6 Courtland Avenue

City Stamford State CT Zip Code 06902-3443

FEC ID number of contributing
federal political committee.

C

Name of Employer
Find Medicare Plans

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : 9824780

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Jacqueline Qualizza

Mailing Address 12877 W. 151st Street

City Olathe State KS Zip Code 66062-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Associate Insurance Services, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : 9824787

Amount of Each Receipt this Period

365.00

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

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

1065.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. James Ming

Mailing Address P.O. Box 621

City

State

Zip Code

Union

MO

63084-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ming Senior Services

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2015

Transaction ID : 9824789

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Heidi Jona Sterner

Mailing Address 2724 North Tenaya Way
Suite 100

City

State

Zip Code

Las Vegas

NV

89128-0424

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

UnitedHealthcare Plan of NV Sierra Hea

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : 9824801

Amount of Each Receipt this Period

30.00

Monthly Contribution

Full Name (Last, First, Middle Initial)

C. Holly V. Hanson

Mailing Address 503 N. Main St., Ste 107LL

City

State

Zip Code

Pueblo

CO

81003-3179

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Benefits Broker

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
05 / 05 / 2015

Transaction ID : 9824812

Amount of Each Receipt this Period

365.00

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

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

760.00

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

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

FOR LINE NUMBER: PAGE 9 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. 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

BLIS Corp. dba Lee Health Insurance Se

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2015

Transaction ID : 9825016

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Teresa F. DeBruin

Mailing Address 5880 Live Oak Parkway
Suite 230

City State Zip Code
Norcross GA 30093-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer

DeBruin Benefit Services, Inc./ The La

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 9825376

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Joanne Bikmaz

Mailing Address 1860 Shaded Wood Road

City State Zip Code
Diamond Bar CA 91789-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fisher & Associates Insurance Services

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 9825380

Amount of Each Receipt this Period

30.00

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

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

110.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Judith A Hayes

Mailing Address 1802 West Crescent Drive

City State Zip Code
Odessa TX 79761-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hayes Insurance Services

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : 9825451

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Paul Pendorf

Mailing Address 31666 W. Nine Dr.

City State Zip Code
Laguna Niguel CA 92677-2955

FEC ID number of contributing
federal political committee.

C

Name of Employer
Independent Financial Group LLC

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2015

Transaction ID : 9825459

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Krista Palmer

Mailing Address 4851 LBJ FWY, Ste 100

City State Zip Code
Dallas TX 75244-6079

FEC ID number of contributing
federal political committee.

C

Name of Employer

BenefitMall

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : 9825464

Amount of Each Receipt this Period

30.00

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

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

215.00

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

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

FOR LINE NUMBER: PAGE 11 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer Brittain

Mailing Address 208 N. Mill

City State Zip Code
Pryor OK 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 ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : 9825465

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. David S. Johnson

Mailing Address 1482 Baron Court

City State Zip Code
Stone Mountain GA 30087-3037

FEC ID number of contributing
federal political committee.

C

Name of Employer

David S. Johnson Insurance

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 9825486

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Chad Gay

Mailing Address 812 Comer Circle

City State Zip Code
Vestavia AL 35216-2012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cahaba Benefits Group

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 9825540

Amount of Each Receipt this Period

500.00

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

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

780.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter G Herkey

Mailing Address PO Box 4216

City State Zip Code
 Sunland CA 91041-4216

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PGH Insurance Marketing

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / 15 / 2015

Transaction ID : 9825553

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Amy Purcilly

Mailing Address PO Box 7028 3290 W. Big Beaver #50

City State Zip Code
 Troy MI 48007-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mason- McBride Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 17 / 2015

Transaction ID : 9825564

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. 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
 American Benefit Services, LLC

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 18 / 2015

Transaction ID : 9825569

Amount of Each Receipt this Period

100.00

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

495.00

TOTAL This Period (last page this line 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 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dawn Barr

Mailing Address 1305 NE 29th St.

City

Ankeny

State

IA

Zip Code

50021-6722

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercer

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

05 / 18 / 2015

Transaction ID : 9825570

Amount of Each Receipt this Period

63.00

Full Name (Last, First, Middle Initial)

B. Elana R. D'Arciprete

Mailing Address 12945 U.S. Highway 331

City

Montgomery

State

AL

Zip Code

36105-6431

FEC ID number of contributing
federal political committee.

C

Name of Employer

D'Arciprete & Associates, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 9825662

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. William M. Mulvaney

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 ▼

245.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 9825710

Amount of Each Receipt this Period

25.00

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

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

588.00

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 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Debra Beaucoudray

Mailing Address 5515 Superior Dr. Suite A-1

City State Zip Code
 Baton Rouge LA 70816-8051

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Beaucoudray Medica Insurance

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015

Transaction ID : 9825942

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. James C. Bosier

Mailing Address 602 Main Street

City State Zip Code
 Cedar Falls IA 50613-2949

FEC ID number of contributing
federal political committee.

C

Name of Employer
 The Accel Group

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015

Transaction ID : 9825944

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. David A. Cagliola

Mailing Address 1500 Liberty Ridge Drive, Suite 32

City State Zip Code
 Chesterbrook PA 19087-5574

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015

Transaction ID : 9825949

Amount of Each Receipt this Period

85.00

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

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

212.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. 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 ▼

325.00

Date of Receipt

05 / 22 / 2015

Transaction ID : 9825971

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Richard R. Girdler

Mailing Address 5110 Maryland Way, Suite 250

City

Brentwood

State

TN

Zip Code

37027-7508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cowan Benefit Services, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 22 / 2015

Transaction ID : 9825974

Amount of Each Receipt this Period

100.00

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 ▼

250.00

Date of Receipt

05 / 22 / 2015

Transaction ID : 9825980

Amount of Each Receipt this Period

50.00

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

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

180.00

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

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

FOR LINE NUMBER: PAGE 16 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. 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
L.E. Goodgame & Associates

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 9825990

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. 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
RealCare Insurance Marketing, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 9825994

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. William Hepscher

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
The Canadian Drugstore

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 9825998

Amount of Each Receipt this Period

85.00

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

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

215.00

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

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

FOR LINE NUMBER: PAGE 17 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert Lindsay

Mailing Address 220 Emerson Place

City State Zip Code
Davenport IA 52801-1624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gallagher Benefit Services, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 22 / 2015

Transaction ID : 9826004

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Al C. Schiebel

Mailing Address 200 Sandy Springs Pl., # 300A

City State Zip Code
Atlanta GA 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 ▼

225.00

Date of Receipt

05 / 22 / 2015

Transaction ID : 9826032

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. Ross W. Pendergraft

Mailing Address 21700 Oxnard Street, 12th Floor

City State Zip Code
Woodland Hills CA 91367-3642

FEC ID number of contributing
federal political committee.

C

Name of Employer
USI Insurance Services

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 22 / 2015

Transaction ID : 9826047

Amount of Each Receipt this Period

85.00

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

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

215.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Raymer M. Sale

Mailing Address 2905 Premiere Parkway
Suite 285

City State Zip Code
Duluth GA 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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 9826049

Amount of Each Receipt this Period

170.00

Full Name (Last, First, Middle Initial)

B. Trei Wild

Mailing Address 3724 Hearst Castle Way

City State Zip Code
Plano TX 75025-3719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Consultant

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 9826050

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Johnny Dawkins

Mailing Address 921-C S. McPherson Church Road

City State Zip Code
Fayetteville NC 28303-5368

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 ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 9826631

Amount of Each Receipt this Period

135.00

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

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

390.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas R. Wilson

Mailing Address 701 Lamar

City

Wichita Falls

State

TX

Zip Code

76301-6824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Boley Featherston Insurance Agency

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826632

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

B. Robert Mark Fitzgerald

Mailing Address 2842 Landing Way

City

Marietta

State

GA

Zip Code

30066-2362

FEC ID number of contributing
federal political committee.

C

Name of Employer

Robert Fitzgerald Insurance Agency, In

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826635

Amount of Each Receipt this Period

85.00

Reception

Full Name (Last, First, Middle Initial)

C. Ronald David Knight

Mailing Address PO Box 507

City

Carrollton

State

GA

Zip Code

30112-0009

FEC ID number of contributing
federal political committee.

C

Name of Employer

J. Smith Lanier & Co., Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826637

Amount of Each Receipt this Period

85.00

Monthly Contribution

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 20 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric Kohlsdorf

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

Prisma Strategies

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826638

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Russell R. Dixon

Mailing Address PO Box 27

City State Zip Code
Wheaton IL 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 ▼

435.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826639

Amount of Each Receipt this Period

68.75

Full Name (Last, First, Middle Initial)

C. Keith Wallace

Mailing Address 1400 Broadway

City State Zip Code
Bellingham WA 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

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826643

Amount of Each Receipt this Period

85.00

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

238.75

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 21 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lee R. Patton

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 ▼

340.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826644

Amount of Each Receipt this Period

85.00

Monthly Contribution

Full Name (Last, First, Middle Initial)

B. G. Wayne Pettigrew

Mailing Address 3815 East Memorial Road

City

Edmond

State

OK

Zip Code

73013-7228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Compass Benefit Solutions, LLC

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826645

Amount of Each Receipt this Period

85.00

Monthly Contribution

Full Name (Last, First, Middle Initial)

C. Shelly K. Winson

Mailing Address PO Box 1914

City

Chandler

State

AZ

Zip Code

85244-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

True Choice Benefits LLC

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826650

Amount of Each Receipt this Period

30.00

Reception

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 22 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven Selinsky

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826652

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Carey H. Brown

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826653

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. David R. Gwin

Mailing Address I-20 At Alpine Rd.
AV-100

City

Columbia

State

SC

Zip Code

29219-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

BlueChoice HealthPlan

Occupation

Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826661

Amount of Each Receipt this Period

85.00

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 23 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark K. Ackerman

Mailing Address 1600 St. Julian Place

City State Zip Code
Columbia SC 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826662

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Catherine M. Antonie

Mailing Address P.O. Box 510925
2725 S. Moorland Rd

City State Zip Code
New Berlin WI 53151-0925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Planned Futures LLC

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826668

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. William Brandon Beavers

Mailing Address P O Box 1472

City State Zip Code
Virginia Beach VA 23451-0472

FEC ID number of contributing
federal political committee.

C

Name of Employer
CPActuaries

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826678

Amount of Each Receipt this Period

42.00

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

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

177.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert J Bishop

Mailing Address 205 E. Warm Springs Rd., Suite 108

City State Zip Code
 Las Vegas NV 89119-4250

FEC ID number of contributing
federal political committee.

C

Name of Employer
 National Healthcare Access Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826685

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Keith Brownrigg

Mailing Address 8156 E South Wadworth Blvd
 Ste 328

City State Zip Code
 Littleton CO 80128

FEC ID number of contributing
federal political committee.

C

Name of Employer
 The Benefit Team, LLC

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826695

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Paul H. Jackson

Mailing Address 311 Plantation Chase

City State Zip Code
 Sea Island GA 31561

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Paul Jackson Ins. & Investments, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826696

Amount of Each Receipt this Period

30.00

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

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

172.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lori Carter

Mailing Address 2316 Atherholt Rd

City

Lynchburg

State

VA

Zip Code

24501-2100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Piedmont Community Health Plan, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826705

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Rita H. Cleveland

Mailing Address 3342 Greystone Way

City

Valdosta

State

GA

Zip Code

31605-1096

FEC ID number of contributing
federal political committee.

C

Name of Employer

H&H Insurance Solutions, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826707

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Bob Copeland

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 ▼

425.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826710

Amount of Each Receipt this Period

85.00

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

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

169.00

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

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

FOR LINE NUMBER: PAGE 26 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory Engle

Mailing Address 1151 Red Mile Road

City Lexington State KY Zip Code 40504-2649

FEC ID number of contributing federal political committee.

C

Name of Employer

Benefit Insurance Marketing

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826725

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Jennifer Liane Farrell

Mailing Address 3800 North Central Avenue
9th Floor

City Phoenix State AZ Zip Code 85012-1979

FEC ID number of contributing federal political committee.

C

Name of Employer

Black Gould & Associates

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826729

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Sam Fiorentino

Mailing Address 1931 Georgetown Rd., Suite 212

City Hudson State OH Zip Code 44236-5028

FEC ID number of contributing federal political committee.

C

Name of Employer

Sam Fiorentino & Associates

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826731

Amount of Each Receipt this Period

42.00

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

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

134.00

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

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

FOR LINE NUMBER: PAGE 27 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey Wm. Gennaro

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

City State Zip Code
Glendale AZ 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826743

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Beverly Gossage

Mailing Address 9325 Evening Star Terr

City State Zip Code
Eudora KS 66025-8334

FEC ID number of contributing
federal political committee.

C

Name of Employer

HSA Benefits Consulting

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826749

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Patricia A. Griffey

Mailing Address 17535 Generations Drive

City State Zip Code
South Bend IN 46635-1589

FEC ID number of contributing
federal political committee.

C

Name of Employer

Healy Group, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826751

Amount of Each Receipt this Period

100.00

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 28 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matthew F. Hatfield

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
M Hatfield Insurance

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826756

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Donna D. Hill

Mailing Address 2905 Premiere Parkway
Suite 285

City State Zip Code
Duluth GA 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 ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826763

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Michael Hollis

Mailing Address 2800 Veterans Memorial Blvd, Suite

City State Zip Code
Metairie LA 70002-6194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollis Companies

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826766

Amount of Each Receipt this Period

42.00

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

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

134.00

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

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

FOR LINE NUMBER: PAGE 29 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Al Hombroek

Mailing Address 30 Lumpkin St, Suite D

City State Zip Code
Lawrenceville GA 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 ▼

425.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826767

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Michelle S. Howard

Mailing Address 2850 West Grand Boulevard

City State Zip Code
Detroit MI 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 ▼

550.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826770

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Karen K. Irwin

Mailing Address 3912 Sunforest Ct

City State Zip Code
Toledo OH 43623-4486

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roemer-Insurance

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826772

Amount of Each Receipt this Period

42.00

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 30 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Roger J. Kelley

Mailing Address 424 Lewis Hargett Circle Ste 100

City Lexington State KY Zip Code 40503-3683

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 ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826780

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Douglas Lubenow

Mailing Address 214 West Main Street
Suite 203

City Moorestown State NJ Zip Code 08057-2345

FEC ID number of contributing federal political committee.

C

Name of Employer
Lubenow Agency

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826793

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Michael D. Lujan

Mailing Address 2669 Handstand Way

City Tracy State CA Zip Code 95377-6700

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 ▼

425.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826794

Amount of Each Receipt this Period

85.00

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

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

169.00

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

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

FOR LINE NUMBER: PAGE 31 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Maurice Lyons

Mailing Address 301 Madison Avenue, 4th Floor

City State Zip Code
 New York NY 10017-8103

FEC ID number of contributing
federal political committee.

C

Name of Employer
 The Medical Link, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 23 / 2015

Transaction ID : 9826795

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Benji Marrs

Mailing Address 1151 Red Mile Rd

City State Zip Code
 Lexington KY 40504-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Benefit Insurance Marketing

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 23 / 2015

Transaction ID : 9826798

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Matthew J. McGrath

Mailing Address 625 Maryville Center Drive
 Suite 200

City State Zip Code
 Saint Louis MO 63141-5834

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CBIZ Benefits & Insurance Services, In

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 23 / 2015

Transaction ID : 9826805

Amount of Each Receipt this Period

42.00

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

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

377.00

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

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

FOR LINE NUMBER: PAGE 32 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Griffin L. Meredith

Mailing Address 550 South 5th Street, Unit 303

City State Zip Code
Louisville KY 40202-4309

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Benefits Firm

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826811

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. James Ming

Mailing Address P.O. Box 621

City State Zip Code
Union MO 63084-0621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ming Senior Services

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826818

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Susan Maley Rash

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

BB&T Benefit Consultants of Virginia,

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826835

Amount of Each Receipt this Period

170.00

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

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

285.00

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

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

FOR LINE NUMBER: PAGE 33 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joni Robin Reents

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826836

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Valerie Reeves

Mailing Address 3702 Brownsboro Rd

City Louisville State KY Zip Code 40207-1820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preferred Benefits, LLC

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826837

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Russell Lee Rice

Mailing Address 8000 IH-10 West, # 715

City San Antonio State TX Zip Code 78230-3880

FEC ID number of contributing
federal political committee.

C

Name of Employer
AVESIS, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826840

Amount of Each Receipt this Period

85.00

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

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

169.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael A. Rivera

Mailing Address 12200 Northwest Frwy, Suite 662

City State Zip Code
Houston TX 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 ▼

550.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826842

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Peter L. Rowe

Mailing Address 3033 N. Central Ave
Suite 810

City State Zip Code
Phoenix AZ 85012-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunwest Benefits Consulting, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826848

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Mel A. Schlesinger

Mailing Address PO Box 21533

City State Zip Code
Winston Salem NC 27120-1533

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 ▼

370.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826853

Amount of Each Receipt this Period

85.00

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

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

270.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sean G. Shoemake

Mailing Address 169A Lameuse St

City

Biloxi

State

MS

Zip Code

39530-3810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Employee Benefit Specialists, P.A.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826858

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Paul E. Smith

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 ▼

900.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826864

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

C. Tamela L. Southan

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 ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826866

Amount of Each Receipt this Period

42.00

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

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

302.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. James Randall Southard

Mailing Address PO Box 487

City

Stokesdale

State

NC

Zip Code

27357-0487

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 ▼

325.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826867

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

B. Anne P. Sperling

Mailing Address 805 St. Michael's Drive

City

Santa Fe

State

NM

Zip Code

87505-7625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Daniels Insurance Agency, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826869

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. William Craig Splawn

Mailing Address 800 Avenue C

City

Katy

State

TX

Zip Code

77493-2302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Splawn & Associates

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826870

Amount of Each Receipt this Period

50.00

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 37 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Audra I. Sullivan

Mailing Address 1201 N Watson Rd
Ste 287

City State Zip Code
Arlington TX 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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826877

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Marsha Tellesbo-Kembel

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

Tellesbo & Company

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826882

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Marc Thompson

Mailing Address 111 Center Street, Suite 1410

City State Zip Code
Little Rock AR 72201-4431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stephens Insurance Services

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826883

Amount of Each Receipt this Period

42.00

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

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

157.00

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

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

FOR LINE NUMBER: PAGE 38 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Ward

Mailing Address 3219 E. Camelback Road
#569

City State Zip Code
Phoenix AZ 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826888

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. John L. Warwick

Mailing Address 1907 B Mangrove Ave.

City State Zip Code
Chico CA 95926-2381

FEC ID number of contributing
federal political committee.

C

Name of Employer
John Warwick Insurance Services

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826890

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. David V. Wilcox

Mailing Address 195 River Vista Place
Suite 206

City State Zip Code
Twin Falls ID 83301-3189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Magic Valley Insurance, Inc.

Occupation
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
05 / 23 / 2015

Transaction ID : 9826895

Amount of Each Receipt this Period

42.00

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

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

169.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven L. Wilson

Mailing Address 1151 Red Mile Road

City

Lexington

State

KY

Zip Code

40504-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benefit Insurance Marketing

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826896

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Owen W. Wingate

Mailing Address 155 Professional Dr

City

Ponte Vedra Beach

State

FL

Zip Code

32082-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wingate Insurance Group, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826897

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

325.00

Date of Receipt

05 / 23 / 2015

Transaction ID : 9826898

Amount of Each Receipt this Period

30.00

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

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

157.00

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

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

FOR LINE NUMBER: PAGE 40 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dennis E. Wright

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

Employee Plans, LLC

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826901

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Ashley Wynkoop Kapostins

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

CIGNA

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2015

Transaction ID : 9826903

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Kimberley Molthen

Mailing Address 3975 Fair Ridge Drive
110-N

City State Zip Code
Fairfax VA 22033-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

BB&T

Occupation

Employee Benefits Consultant & Vice Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2015

Transaction ID : 9826908

Amount of Each Receipt this Period

85.00

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 41 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carolyn Beck

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
 SIHO Insurance Services

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 24 / 2015

Transaction ID : 9826912

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Erica R. Hain

Mailing Address 1995 Point Township Drive

City State Zip Code
 Northumberland PA 17857-8856

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Keystone Insurers Group, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 24 / 2015

Transaction ID : 9826914

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Erika Sklar

Mailing Address 1415 Walton Blvd

City State Zip Code
 Rochester Hills MI 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 ▼

343.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 25 / 2015

Transaction ID : 9826915

Amount of Each Receipt this Period

42.00

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

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

184.00

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

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

FOR LINE NUMBER: PAGE 42 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Margaret Evelyn Stedt

Mailing Address P. O. Box 74325

City State Zip Code
 San Clemente CA 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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : 9826940

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Michael S. Reddy

Mailing Address 13800 Jackson Road

City State Zip Code
 Mishawaka IN 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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : 9826944

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Daniel R. Tompkins

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
 Admin America

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : 9826946

Amount of Each Receipt this Period

85.00

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

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

255.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Neil R. Crosby

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 ▼

340.00

Date of Receipt

05 / 27 / 2015

Transaction ID : 9826955

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. JoAnn Marie Charron

Mailing Address 11325 Pegasus St., Suite W-102

City

Dallas

State

TX

Zip Code

75238-5214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Benefits Dallas

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

05 / 27 / 2015

Transaction ID : 9826957

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Justin Lord

Mailing Address 5400 North Grand Blvd

City

Oklahoma City

State

OK

Zip Code

73112-5692

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 ▼

205.00

Date of Receipt

05 / 27 / 2015

Transaction ID : 9826962

Amount of Each Receipt this Period

10.00

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

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

180.00

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

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

FOR LINE NUMBER: PAGE 44 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles E. Underhill

Mailing Address PO Box 626

City State Zip Code
Woodland Hills CA 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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2015

Transaction ID : 9826970

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Russell B. Childers

Mailing Address PO Box 1547

City State Zip Code
Americus GA 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 ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2015

Transaction ID : 9827003

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. David Mordo

Mailing Address 26 Kennedy Court

City State Zip Code
North Middletown NJ 07748-3532

FEC ID number of contributing
federal political committee.

C

Name of Employer
D Mordo Employee Benefits & Consulting

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2015

Transaction ID : 9827006

Amount of Each Receipt this Period

35.00

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 45 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Erin B. Fisher

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 ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : 9827020

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Angela Oakes

Mailing Address 1323 Highway 2, Ste. 300

City State Zip Code
 Sandpoint ID 83864-2741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Summit Insurance Resource Group

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : 9827083

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Terry Allard

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 ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 28 / 2015

Transaction ID : 9827116

Amount of Each Receipt this Period

150.00

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

715.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Madeleine Brown

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 ▼

600.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR433118911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Dwane C. McFerrin

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 ▼

355.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR433168111935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Robert L. Rifkin

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR433196811935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 47 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Spleet

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
Franklin Benefit Solutions

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR433316611935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. John P. Garven

Mailing Address P. O. Box 8
11715 East Main Street -

City State Zip Code
Huntley IL 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436791111935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Gerald G Hartman

Mailing Address PO Box 5716

City State Zip Code
Boise ID 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436808011935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

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

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

142.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Janet Trautwein

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 ▼

850.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436821411935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)

B. William L. Sutherland

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 ▼

500.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436823411935

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Elizabeth E. Rios-Carl

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

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436824511935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

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

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

320.00

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

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

FOR LINE NUMBER: PAGE 49 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas Besselman

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

City State Zip Code
 Baton Rouge LA 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 ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR436824611935

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Jesse A. Patton

Mailing Address 1112 Maple Street

City State Zip Code
 West Des Moines IA 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 ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR436829511935

Amount of Each Receipt this Period

350.00

P/R Deduction (\$350.00 Monthly)

Full Name (Last, First, Middle Initial)

C. David A Berman

Mailing Address 6510 N. Shadeland Avenue

City State Zip Code
 Indianapolis IN 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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR436829711935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

685.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elizabeth Ashmore

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 ▼

850.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436830311935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Timothy J. Hendricks

Mailing Address 1605 S Eucalyptus Ave

City

Broken Arrow

State

OK

Zip Code

74012-5995

FEC ID number of contributing
federal political committee.

C

Name of Employer

Business Planning Group Of OK

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436831311935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

c. Mary B. Kramer

Mailing Address 2637 S. 158th Plaza #200

City

Omaha

State

NE

Zip Code

68130-1769

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436836211935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

262.00

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

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

FOR LINE NUMBER: PAGE 51 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. John R. McConnaughey

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436837511935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Robert A. Grundman

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436838911935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Michael E. Matznick

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436839811935

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

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

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

192.00

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

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

FOR LINE NUMBER: PAGE 52 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dorothy M. Cociu

Mailing Address P.O. Box 6677

City State Zip Code
Fullerton CA 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436844611935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Harry P. Thal

Mailing Address PO Box 2137

City State Zip Code
Kernville CA 93238-2137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harry P. Thal Insurance Agency

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436847211935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. H. Larry Fortenberry

Mailing Address PO Box 16566

City State Zip Code
Jackson MS 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR436852611935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tom Swayne

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 ▼

500.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436853711935

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. George R. Keeling

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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436865511935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Sandra V. Mobley

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 ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436869311935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

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

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

235.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 54 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paula L. Wilson

Mailing Address 31930 Daniel Way

City

Temecula

State

CA

Zip Code

92591-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Paula Wilson, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436873511935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Kathy M. Rainwater

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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436873711935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Rodney Stuart

Mailing Address 600 East Carmel Drive
Suite 110

City

Carmel

State

IN

Zip Code

46032-3003

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 ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436883311935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

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

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

220.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jackie L. Spragins

Mailing Address 1300 10th St

City

Wichita Falls

State

TX

Zip Code

76301-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Higginbotham Ins Agency, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436895311935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Todd Morrow

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436903711935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. William T. Robinson

Mailing Address 1775 E Palm Canyon Dr, Ste 110 -

City

Palm Springs

State

CA

Zip Code

92264-1623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palm Canyon Insurance Agency

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436906911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

177.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 56 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael A. Embry

Mailing Address 26555 Evergreen Road
Suite 535

City State Zip Code
Southfield MI 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 ▼

1975.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 31 2015

Transaction ID : PR43691411935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)

B. 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

D Hall & Associates

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 31 2015

Transaction ID : PR436914811935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Louie L. Cason

Mailing Address PO Box 11229

City State Zip Code
Columbia SC 29211-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Cason Group, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 31 2015

Transaction ID : PR436934811935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

285.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jimmie Whitmire

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436939111935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. James R. Stenger

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

MVS Consulting

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436939911935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)

C. John C. Parker

Mailing Address 47 Laurel Hill Drive

City

Niantic

State

CT

Zip Code

06357-1536

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 ▼

625.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436986811935

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

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

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

312.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rand R. Wall

Mailing Address 12603 Southwest Freeway, Suite 620

City State Zip Code
 Stafford TX 77477-3864

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Lone Star Health Plans, Ltd.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436992611935

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Paige W. Phillips

Mailing Address 1434 Hwy 301

City State Zip Code
 Calera AL 35040-5466

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AWM, Inc

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.50

Date of Receipt

05 / 31 / 2015

Transaction ID : PR436993011935

Amount of Each Receipt this Period

98.50

P/R Deduction (\$98.50 Monthly)

Full Name (Last, First, Middle Initial)

C. Kelly Don Fristoe

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
 Financial Partners

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437002311935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

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

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

228.50

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 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julie A. Jennings

Mailing Address 500 Faunce Corner Rd
Bldg 100, Suite 120

City Dartmouth State MA Zip Code 02747-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sylvia & Co. Ins. Agency, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437009211935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Scott T. Buie

Mailing Address 6440 South Wasatch Blvd., #150

City Salt Lake City State UT Zip Code 84121-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer
Buie Insurance Services

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437010511935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. James P Better

Mailing Address 11 Summer Street, Suite 6

City Chelmsford State MA Zip Code 01824-3064

FEC ID number of contributing
federal political committee.

C

Name of Employer
New England Medical Insurance Agency

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437011511935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

220.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael D. Gray

Mailing Address 233 South 13th Street, Suite 1650

City
Lincoln

State
NE

Zip Code
68508-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Harry A. Koch Co

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437016711935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Matt B. Schwartz

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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437037811935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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 ▼

385.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437042311935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 61 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Delvin L. Stahl

Mailing Address P.O. Box 388

807 S. Maltby Ave.

City

Sutton

State

NE

Zip Code

68979-0388

FEC ID number of contributing
federal political committee.

C

Name of Employer

Insurance Plus, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437046611935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Terri M. Olson

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 ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437070211935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Suzetta E. Alberts

Mailing Address 26555t Evergreen Drive

Ste 535

City

Southfield

State

MI

Zip Code

48076-4201

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 ▼

545.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437076111935

Amount of Each Receipt this Period

84.00

P/R Deduction (\$84.00 Monthly)

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

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

176.00

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

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

FOR LINE NUMBER: PAGE 62 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Juan R. Lopez

Mailing Address 1851 E. First, #1100

City
Santa Ana

State
CA

Zip Code
92705-4051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Permanente

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437079011935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Shelley A Chornak

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437080811935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Linda Rose Koehler

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

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437090111935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 63 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dierdre Kennedy-Simington

Mailing Address 17200 Ventura Blvd., Suite 312

City State Zip Code
Encino CA 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 ▼

385.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2015

Transaction ID : PR43709411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Joseph E. Henehan

Mailing Address 685 Carnegie Dr., Ste. #205

City State Zip Code
San Bernardino CA 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 ▼

255.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2015

Transaction ID : PR43709791935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Mario Roiz

Mailing Address 10446 NW 31st Terrace

City State Zip Code
Doral FL 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 ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2015

Transaction ID : PR437104911935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

169.00

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

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

FOR LINE NUMBER: PAGE 64 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert P. Poli

Mailing Address 6101 Executive Boulevard, Suite 12

City State Zip Code
 Rockville MD 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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437105911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Joseph W. Buyalos

Mailing Address 9713 Key West Ave, Suite 401

City State Zip Code
 Rockville MD 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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437111611935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Brian Joseph McEvilly

Mailing Address 7260 W. Azure Drive
 #140-201

City State Zip Code
 Las Vegas NV 89130-7999

FEC ID number of contributing
federal political committee.

C

Name of Employer
 McEvilly Group

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437117711935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

255.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joseph K. Roberts

Mailing Address 7101 S. 82nd St., #B

City
Lincoln

State
NE

Zip Code
68516-6584

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midlands Financial Benefits

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437118011935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Wendy Vanderwater Bratteli

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437122411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Bruce D. Benton

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 ▼

975.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437123011935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

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

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

382.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 66 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Linda K. Friedrich

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 Financial Services, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR43712911935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Laura L. Hebert

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR43715481935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Tina Durand

Mailing Address P.O.Box 61157

City

Corpus Christi

State

TX

Zip Code

78466-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heavin & Associates Insurance

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437154911935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

134.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 67 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert H. White

Mailing Address 6724 S 29th W Place

City State Zip Code
Tulsa OK 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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR43717411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Neal Murray

Mailing Address 1314 East Atlantic Boulevard

City State Zip Code
Pompano Beach FL 33060-6745

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frank H. Furman, Inc

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437183411935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Kenneth McLaughlin

Mailing Address 1001 Elm Street, Suite 301

City State Zip Code
Manchester NH 03101-1845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Granite Group Benefits, LLC

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437187211935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

157.00

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

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

FOR LINE NUMBER: PAGE 68 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. John B. Crable

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
 Corporate Synergies Group, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR437199711935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Victoria J. Braden

Mailing Address 11555 Medlock Bridge Rd

City State Zip Code
 Johns Creek GA 30097-1564

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Braden Benefit Strategies, Inc

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR437201911935

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Lon G. Wilson

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
 The Wilson Agency, LLC

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR437204311935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

385.00

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

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

FOR LINE NUMBER: PAGE 69 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy N. Barhorst

Mailing Address 5222 Double Eagle Drive

City State Zip Code
 Westerville OH 43081-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Business Partners, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 31 2015

Transaction ID : PR437205211935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Marilyn A. Stenger

Mailing Address 8926 Crown Colony Blvd

City State Zip Code
 Fort Myers FL 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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 31 2015

Transaction ID : PR437206411935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. James S. Garbina

Mailing Address 14010 FNB Pkwy Ste 300

City State Zip Code
 Omaha NE 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 31 2015

Transaction ID : PR437212211935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 70 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (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
 Auerbach & Gussin Insurance and Financ

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR437216011935

Amount of Each Receipt this Period

105.00

P/R Deduction (\$105.00 Monthly)

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
 Health Alliance Administrators

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR437218311935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Thomas E. Shores

Mailing Address 8596 W Bolsa Ct.

City State Zip Code
 Boise ID 83709-5196

FEC ID number of contributing
federal political committee.

C

Name of Employer
 T.A. Shores Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2015

Transaction ID : PR437221411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

232.00

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

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

FOR LINE NUMBER: PAGE 71 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. 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
 Comstock Insurance Agencies, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 31 2015

Transaction ID : PR437231211935

Amount of Each Receipt this Period

47.00

P/R Deduction (\$47.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Christian Bergstrom

Mailing Address 300 1st Avenue South,#500

City State Zip Code
 Saint Petersburg FL 33701-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Wallace Welch & Willingham, Inc.

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 31 2015

Transaction ID : PR437260911935

Amount of Each Receipt this Period

63.00

P/R Deduction (\$63.00 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
 Health Benefits Northwest

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 31 2015

Transaction ID : PR437264311935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

152.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul H. Jackson

Mailing Address 311 Plantation Chase

City State Zip Code
 Sea Island GA 31561

FEC ID number of contributing
federal political committee.

C

Name of Employer

Paul Jackson Ins. & Investments, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437270011935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Jennifer L. Toups

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

Humana

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437270511935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. James F. Summers

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

Senior Market Sales, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437281011935

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

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

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

240.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Angela Oakes

Mailing Address 1323 Highway 2, Ste. 300

City State Zip Code
Sandpoint ID 83864-2741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summit Insurance Resource Group

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437309011935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Russ Blakely

Mailing Address PO Box 11310

City State Zip Code
Chattanooga TN 37401-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Russ Blakely & Associates, LLC

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437317311935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Patricia Mihalyi-Stiffler

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
Options in Insurance

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437326111935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

102.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 74 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Susan R. Pittman

Mailing Address 32418 51st Avenue, SW

City

State

Zip Code

Federal Way

WA

98023-1936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Insure NW Inc.

Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437343511935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Dan Webb

Mailing Address 5251 Office Park Drive
Suite 350

City

State

Zip Code

Bakersfield

CA

93309-0644

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

The Webb Insurance Group

Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

850.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437343811935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Jim Lawless

Mailing Address Epic Insurance Solutions, LLC
710 East Main Street

City

State

Zip Code

Lexington

KY

40502-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Epic Insurance Solutions, LLC

Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437348011935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

262.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 75 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rina Tikia

Mailing Address 3525 N. Causeway Blvd., Suite 815

City State Zip Code
Metairie LA 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 ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2015

Transaction ID : PR437375311935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Valerie Lynn Cramer

Mailing Address 588 - 3 Mile Road, NW
Suite 101

City State Zip Code
Grand Rapids MI 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 ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2015

Transaction ID : PR437416411935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Robert S. Clark

Mailing Address 7548 Preston Road

City State Zip Code
Frisco TX 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 ▼

210.00

Date of Receipt

MM / DD / YYYY
05 / 31 / 2015

Transaction ID : PR437427211935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

134.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 76 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joel Rosenblum

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437427411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Rebecca L. Purdy

Mailing Address 9153 Whitekirk Place

City

Las Vegas

State

NV

Zip Code

89145-8720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nevada Health CO-OP

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437450411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Reed Damron

Mailing Address 5880 Live Oak Parkway, Suite 250

City

Norcross

State

GA

Zip Code

30093-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer

HIRE Benefits, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437468911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

169.00

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

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

FOR LINE NUMBER: PAGE 77 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (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
Ebenconcepts Company

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 31 2015

Transaction ID : PR437474511935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Joan L. Galletta

Mailing Address 3342 Kori Road

City State Zip Code
Jacksonville FL 32257-8883

FEC ID number of contributing
federal political committee.

C

Name of Employer
JP Perry Insurance, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 31 2015

Transaction ID : PR437480911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. 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
Self

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 31 2015

Transaction ID : PR437485711935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 78 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Susan M. Rider

Mailing Address 1402 N Capital
#400

City Indianapolis State IN Zip Code 46202-2375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gregory & Appel Insurance

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437510711935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Maggie Coley

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437534011935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. David Contorno

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 ▼

325.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437566611935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

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

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

102.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 79 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Emma Stacey Leigh

Mailing Address 600 TownPark Lane NW
Suite LL-1000

City Kennesaw State GA Zip Code 30144-3729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alliant Health Plans, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437574311935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. David V. Wilcox

Mailing Address 195 River Vista Place
Suite 206

City Twin Falls State ID Zip Code 83301-3189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Magic Valley Insurance, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437576511935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Dennis F. Mobley

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

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437587511935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

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

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

142.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 80 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott Allen Smith

Mailing Address 5300 Oakbrook Parkway
Building 300, Suite 350

City Norcross State GA Zip Code 30093-6206

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Agency of North Georgia

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437588411935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Daniel C. LaBroad

Mailing Address 17304 Preston Road
Suite 800

City Dallas State TX Zip Code 75252-5645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ovation Health & Life Services, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437588911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Doris Waller

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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437591511935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 81 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ryan R. Swinton

Mailing Address 7101 S. 82 St.

City Lincoln State NE Zip Code 68516-6584

FEC ID number of contributing federal political committee.

C

Name of Employer
Midlands Financial Benefits

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437594911935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Patrick Burns

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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437600511935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Eugene Starks

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 ▼

975.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437603111935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

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

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

340.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 82 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marcie Strouse

Mailing Address 1501 Ingersoll Ave
Ste 200

City State Zip Code
Des Moines IA 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 ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437683111935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Dianne M. Kelley

Mailing Address 7320 N La Cholla Blvd.
Suite 154-219

City State Zip Code
Tucson AZ 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 ▼

250.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437684511935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Arthur Granado

Mailing Address 418 Peoples, # 505

City State Zip Code
Corpus Christi TX 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 ▼

425.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437693211935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

177.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 83 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Yolanda Marie Webb

Mailing Address 901 Via Piemonte

City State Zip Code
 Ontario CA 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 ▼

275.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437705611935

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Sam Drysdale

Mailing Address 4520 S National

City State Zip Code
 Springfield MO 65810-2898

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Aetna

Occupation
 Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437733411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Teresa Conto

Mailing Address 15800 Crabbs Branch Way #350

City State Zip Code
 Rockville MD 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 ▼

975.00

Date of Receipt

05 / 31 / 2015

Transaction ID : PR437740811935

Amount of Each Receipt this Period

170.00

P/R Deduction (\$170.00 Monthly)

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

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

237.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 84 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. R Dane Rianhard

Mailing Address 1 E. Pratt St., Unit 902

City State Zip Code
Baltimore MD 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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437758411935

Amount of Each Receipt this Period

110.00

P/R Deduction (\$110.00 Monthly)

Full Name (Last, First, Middle Initial)

B. John P. Johnson

Mailing Address 8414 N. Wall Street
Ste C

City State Zip Code
Spokane WA 99208-6161

FEC ID number of contributing
federal political committee.

C

Name of Employer
IFS

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437775811935

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Kareim R. Cade

Mailing Address 28411 Northwestern Hwy., Ste 950

City State Zip Code
Southfield MI 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437778611935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

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

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

225.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 85 OF 91

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michele Gasparre

Mailing Address 80 Business Park Drive
Suite 306

City State Zip Code
Armonk NY 10504-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Meridian Benefits Consulting

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437807411935

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Suzanne Kolterman

Mailing Address 344 Main Street
PO Box 426

City State Zip Code
Seward NE 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437855211935

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Cathy Little

Mailing Address 1145 2nd Street
#A-269

City State Zip Code
Brentwood CA 94513-2292

FEC ID number of contributing
federal political committee.

C

Name of Employer
Essential Exchange Insurance Services

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR437855611935

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

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

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

112.00

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

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

FOR LINE NUMBER: PAGE 86 OF 91
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jessica Waltman

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

VP, Policy and State Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

Transaction ID : PR439658611935

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

85.00

20748.25

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 91

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (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

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2015
Transaction ID : 9827679

Amount of Each Disbursement this Period

128.06

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

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2015
Transaction ID : 9827680

Amount of Each Disbursement this Period

718.52

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

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2015
Transaction ID : 9827681

Amount of Each Disbursement this Period

473.72

Credit Card Fees

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

1320.30

1320.30

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 88 OF 91

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bennet For Colorado

Mailing Address PO Box 3078

City State Zip Code
 Denver CO 80201

Purpose of Disbursement
 5/7 Breakfast

Candidate Name

Michael Bennet

Office Sought: ☐ House
☒ Senate
☐ President

State: CO District:

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 05 06 2015

Transaction ID : 9825020

Amount of Each Disbursement this Period

1000.00

5/7 Breakfast

Full Name (Last, First, Middle Initial)

B. Cory Gardner For Senate

Mailing Address 9227 E Lincoln Ave #200-234

City State Zip Code
 Lone Tree CO 80124

Purpose of Disbursement
 5/11 Dinner

Candidate Name

Sen. Cory Gardner

Office Sought: ☐ House
☒ Senate
☐ President

State: CO District:

Disbursement For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 05 08 2015

Transaction ID : 9825444

Amount of Each Disbursement this Period

1000.00

5/11 Dinner

Full Name (Last, First, Middle Initial)

C. Rodney For Congress

Mailing Address PO Box 344

City State Zip Code
 Taylorville IL 62568

Purpose of Disbursement
 5/13 Dinner

Candidate Name

Rodney Davis

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 13

Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 05 08 2015

Transaction ID : 9825446

Amount of Each Disbursement this Period

2000.00

5/13 Dinner

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

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

4000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 91

<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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lofgren For CongressMailing Address C/O Contribution Solutions, LLC
123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement
5/14 Lunch

Candidate Name

Zoe LofgrenOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2015

Transaction ID : 9825447

Amount of Each Disbursement this Period

1000.00

5/14 Lunch

Full Name (Last, First, Middle Initial)

B. Paul Tonko For CongressMailing Address 911 Central Avenue
PO Box 221

City Albany State NY Zip Code 12206

Purpose of Disbursement
5/15 Lunch

Candidate Name

Paul TonkoOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2015

Transaction ID : 9825449

Amount of Each Disbursement this Period

1000.00

5/15 Lunch

Full Name (Last, First, Middle Initial)

C. Bill Flores For Congress

Mailing Address PO Box 6207

City Bryan State TX Zip Code 77805

Purpose of Disbursement
5/12 Lunch

Candidate Name

Rep. Bill FloresOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2015

Transaction ID : 9825478

Amount of Each Disbursement this Period

1000.00

5/12 Lunch

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

3000.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 91

<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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pete Aguilar For Congress

Mailing Address PO Box 10954

City	State	Zip Code
San Bernardino	CA	92423

Purpose of Disbursement
5/14 Breakfast

011

Candidate Name

Rep. Pete AguilarCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 31

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2015

Transaction ID : 9825479

Amount of Each Disbursement this Period

1500.00

5/14 Breakfast

Full Name (Last, First, Middle Initial)

B. Hudson For Congress

Mailing Address PO Box 5053

City	State	Zip Code
Concord	NC	28027

Purpose of Disbursement
5/18 Dinner

011

Candidate Name

Richard Hudson Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2015

Transaction ID : 9825572

Amount of Each Disbursement this Period

1000.00

5/18 Dinner

Full Name (Last, First, Middle Initial)

C. Joe Kennedy For Congress

Mailing Address PO Box 590464

City	State	Zip Code
Newton	MA	02459

Purpose of Disbursement
5/19 Lunch

011

Candidate Name

Rep. Joseph Kennedy IIICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2015

Transaction ID : 9825573

Amount of Each Disbursement this Period

1000.00

5/19 Lunch

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

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 91

<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

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

NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
5/20 Dinner

011

Category/
Type

Candidate Name

Joseph DonnellyOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2015

Transaction ID : 9825574

Amount of Each Disbursement this Period

1000.00

5/20 Dinner

Full Name (Last, First, Middle Initial)

B. The Denali Leadership PAC

Mailing Address 2755 ILLIAMNA

City	State	Zip Code
Anchorage	AK	99517

Purpose of Disbursement
5/20 Dinner

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2015

Transaction ID : 9825576

Amount of Each Disbursement this Period

1000.00

5/20 Dinner

Full Name (Last, First, Middle Initial)

C. Kurt Schrader For Congress

Mailing Address PO Box 3314

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement
5/21 Lunch

011

Category/
Type

Candidate Name

Kurt SchraderOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2015

Transaction ID : 9825582

Amount of Each Disbursement this Period

5000.00

5/21 Lunch

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

7000.00

17500.00
