SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 118
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Americas Health Insurance Plans PAC (AHIP PAC)

A.
Full Name (Last, First, Middle Initial)
Dan Leonard
Mailing Address 601 Pennsylvania Ave NW
South Bldg; Ste 500
City: Washington State: DC Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: America's Health Insurance Plans
Occupation: Chief Administrative Officer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2499.96
Date of Receipt: 04 30 2005
Transaction ID: 2005_04_3010
Amount of Each Receipt this Period: 208.33

B.
Full Name (Last, First, Middle Initial)
Dan Leonard
Mailing Address 601 Pennsylvania Ave NW
South Bldg; Ste 500
City: Washington State: DC Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: America's Health Insurance Plans
Occupation: Chief Administrative Officer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2499.96
Date of Receipt: 05 15 2005
Transaction ID: 2005_05_1511
Amount of Each Receipt this Period: 208.33

C.
Full Name (Last, First, Middle Initial)
Dan Leonard
Mailing Address 601 Pennsylvania Ave NW
South Bldg; Ste 500
City: Washington State: DC Zip Code: 20004-2601
FEC ID number of contributing federal political committee: C
Name of Employer: America's Health Insurance Plans
Occupation: Chief Administrative Officer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2499.96
Date of Receipt: 05 31 2005
Transaction ID: DDC2005053124
Amount of Each Receipt this Period: 208.33

SUBTOTAL of Receipts This Page (optional) ..... ▶ 624.99

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