

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
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

ADDRESS (number and street) 1212 NEW YORK AVE NW
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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
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 05 / 01 / 2012 through 05 / 31 / 2012

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 06 / 13 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		186528.21
(b) Cash on Hand at Beginning of Reporting Period.....	194384.58	
(c) Total Receipts (from Line 19)	35797.52	263081.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	230182.10	449609.32
7. Total Disbursements (from Line 31).....	34522.09	253949.31
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	195660.01	195660.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20173.37	129648.47
(ii) Unitemized	15623.09	127426.31
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35796.46	257074.78
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35796.46	257074.78
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	6000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1.06	6.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	35797.52	263081.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35797.52	263081.11

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	2022.09	11907.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2022.09	11907.31
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32500.00	240500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	42.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	42.00
29. Other Disbursements	0	1500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34522.09	253949.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34522.09	253949.31

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)	35796.46	257074.78
34. Total Contribution Refunds (from Line 28(d))	0	42.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35796.46	257032.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2022.09	11907.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2022.09	11907.31

**SCHEDULE A (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 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Jeff Ahrendsen
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 S Weber St
 City Colorado Springs State CO Zip Code 80903-2153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Resources, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59143
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

B. Catherine Antonie
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 510925
 City New Berlin State WI Zip Code 53151-0925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Planned Futures LLC Occupation Employee Benefit Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59148
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

C. Elizabeth Ashmore
 Full Name (Last, First, Middle Initial)
 Mailing Address 6102 82nd St Ste 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 ▼ 1000.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58729
 Amount of Each Receipt this Period 170.00
 Payroll Deduction (\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 320.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ginger Ashton-Vernon
Full Name (Last, First, Middle Initial)
Mailing Address 1900 Electric Rd
City Salem State VA Zip Code 24153-7474
FEC ID number of contributing federal political committee. **C**
Name of Employer Lewis-Gale Medical Center Occupation Director of Provider Relations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58730
Amount of Each Receipt this Period 42.00
Payroll Deduction (\$42.00 Monthly)

B. Rick Bailey
Full Name (Last, First, Middle Initial)
Mailing Address 4390 Earney Rd Ste 240
City Woodstock State GA Zip Code 30188-5687
FEC ID number of contributing federal political committee. **C**
Name of Employer Rick Bailey & Company, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 675.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59426
Amount of Each Receipt this Period 135.00
Payroll Deduction (\$135.00 Monthly)

C. Andrea Baldrica
Full Name (Last, First, Middle Initial)
Mailing Address 108 E Saint Vrain St Ste 12
City Colorado Springs State CO Zip Code 80903-1161
FEC ID number of contributing federal political committee. **C**
Name of Employer Baldrica & Company Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59428
Amount of Each Receipt this Period 42.00
Payroll Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **219.00**
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 8 OF 94
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Kathryn Beals
 Mailing Address 1277 Deming Way
 City State Zip Code
 Madison WI 53717-1971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dean Health Plan Director Group Retention
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58659
 Amount of Each Receipt this Period
 170.00
 Payroll Deduction
 (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Bruce Benton
 Mailing Address 19528 Ventura Blvd # 596
 City State Zip Code
 Tarzana CA 91356-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Genesis Financial & Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58664
 Amount of Each Receipt this Period
 170.00
 Payroll Deduction
 (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
C. David A. Berman
 Mailing Address 6510 N Shadeland Ave
 City State Zip Code
 Indianapolis IN 46220-4369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Neace Lukens Holding Company, Inc. Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58665
 Amount of Each Receipt this Period
 85.00
 Payroll Deduction
 (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Thomas Besselman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6421 Perkins Rd Bldg A # 2B
 City Baton Rouge State LA Zip Code 70808-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Besselman & Little Agency, LLC Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59309
 Amount of Each Receipt this Period 250.00
 Payroll Deduction (\$250.00 Monthly)

B. James P. Better
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Olde North Rd Ste 301
 City Chelmsford State MA Zip Code 01824-1453
 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 ▼ 255.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59310
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. Robert Bishop
 Full Name (Last, First, Middle Initial)
 Mailing Address 2785 E Desert Inn Rd Ste 260
 City Las Vegas State NV Zip Code 89121-3693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KIA Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59168
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 435.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Donna J. Blizman
Full Name (Last, First, Middle Initial)

Mailing Address 1939 Racimo Dr

City Sarasota State FL Zip Code 34240-9426

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

Name of Employer Employee Benefits Marketing Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58596

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 602 Main St

City Cedar Falls State IA Zip Code 50613-2949

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

Name of Employer The Accel Group Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59179

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

C. Victoria Braden
Full Name (Last, First, Middle Initial)

Mailing Address 5726 Fairley Hall Ct

City Norcross State GA Zip Code 30092-1425

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 ▼ 1000.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58762

Amount of Each Receipt this Period 250.00

Payroll Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 365.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 94
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Emily Black Bremer
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 Bonhomme Ave Ste 320
 City State Zip Code
 Saint Louis MO 63105-3515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Liggett, Black & Company President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 242.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P59494
 Amount of Each Receipt this Period
 42.00
 Payroll Deduction
 (\$42.00 Monthly)

B. Scott Buie
 Full Name (Last, First, Middle Initial)
 Mailing Address 6440 Wasatch Blvd Ste 150
 City State Zip Code
 Salt Lake City UT 84121-3513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Buie Insurance Services Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58700
 Amount of Each Receipt this Period
 50.00
 Payroll Deduction
 (\$50.00 Monthly)

C. Jennifer W. Bundy-Cobb
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 A St Ste 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 ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58701
 Amount of Each Receipt this Period
 30.00
 Payroll Deduction
 (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 122.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Patrick Burns
Full Name (Last, First, Middle Initial)
Mailing Address 5653 Maxwellton Rd
City Oakland State CA Zip Code 94618-2654
FEC ID number of contributing federal political committee. **C**
Name of Employer Burns Employee Benefits Insurance Ser Occupation Managing Member
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59382
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

B. Joseph Buyalos
Full Name (Last, First, Middle Initial)
Mailing Address 9713 Key West Ave Ste 401
City Rockville State MD Zip Code 20850-3918
FEC ID number of contributing federal political committee. **C**
Name of Employer The Insurance Exchange, Inc. Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59386
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Kareim Cade
Full Name (Last, First, Middle Initial)
Mailing Address 28411 Northwestern Hwy Ste 950
City Southfield State MI Zip Code 48034-5515
FEC ID number of contributing federal political committee. **C**
Name of Employer Great Lakes Benefit Group Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58704
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 255.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 1500 Liberty Ridge Dr Ste 321

City Wayne State PA Zip Code 19087-5574

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59389

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

B. Louie Cason
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11229

City Columbia State SC Zip Code 29211-1229

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

Name of Employer The Cason Group, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59288

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address PO Box 1547

City Americus State GA Zip Code 31709-1547

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

Name of Employer Russ Childers, CLU Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58657

Amount of Each Receipt this Period **95.00**

Payroll Deduction (\$95.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Rita H Cleveland
Full Name (Last, First, Middle Initial)
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 Benefits Specialist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **470.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59217
Amount of Each Receipt this Period **30.00**
Payroll Deduction (\$30.00 Monthly)

B. Dorothy Cociu
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6677
City Fullerton State CA Zip Code 92834-6677
FEC ID number of contributing federal political committee. **C**
Name of Employer Advanced Benefit Consulting & Insuran Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59222
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

C. Kevin M. Conley
Full Name (Last, First, Middle Initial)
Mailing Address 8000 Bonhomme Ave, Suite 320
City Saint Louis State MO Zip Code 63105-
FEC ID number of contributing federal political committee. **C**
Name of Employer Conley Benefit Services Occupation Agency Principal
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59227
Amount of Each Receipt this Period **42.00**
Payroll Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Teresa Conto

Mailing Address 15800 Crabbs Branch Way # 350

City State Zip Code
Rockville MD 20855-2604

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

Name of Employer Occupation
Independent Benefit Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12752-P58624

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Troy Cook

Mailing Address 12421 Meredith Dr

City State Zip Code
Urbandale IA 50398-3344

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

Name of Employer Occupation
Marsh U.S. Consumer Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12752-P58625

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 39500 High Pointe Blvd Ste 400

City State Zip Code
Novi MI 48375-5517

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

Name of Employer Occupation
Health Care Administrators Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12754-P59229

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 212.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 700 Larkspur Landing Cir Ste 285

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

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2012

Transaction ID : 12754-P59230

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 200 E Park Dr Ste 600

City Mount Laurel	State NJ	Zip Code 08054-1297
----------------------	-------------	------------------------

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

Name of Employer Corporate Synergies Group, Inc.	Occupation VP & Lead Conosultant
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2012

Transaction ID : 12754-P59141

Amount of Each Receipt this Period
50.00

Payroll Deduction
(\$50.00 Monthly)

C. Valerie Cramer
Full Name (Last, First, Middle Initial)

Mailing Address 44565 Broadmoor Cir N

City Northville	State MI	Zip Code 48168-8632
--------------------	-------------	------------------------

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

Name of Employer Cadillac Insurance Center	Occupation Employee Benefits Specialist
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2012

Transaction ID : 12752-P58576

Amount of Each Receipt this Period
50.00

Payroll Deduction
(\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Reed Damron
Full Name (Last, First, Middle Initial)

Mailing Address 5880 Live Oak Pkwy Ste 250

City Norcross State GA Zip Code 30093-1740

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

Name of Employer Occupation
HIRE Benefits, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12754-P59154

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 25 Rolling Oaks Dr Ste 110

City Thousand Oaks State CA Zip Code 91361-1003

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

Name of Employer Occupation
Self Employed Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12754-P59156

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address PO Box 148

City Watson State LA Zip Code 70786-0148

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

Name of Employer Occupation
Self Employed Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12752-P58435

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 212.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Johnny L Dawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 921-C S McPherson Church Rd
 City Fayetteville State NC Zip Code 28303-5368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts Occupation Broker/Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 835.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58882
 Amount of Each Receipt this Period 142.00
 Payroll Deduction (\$142.00 Monthly)

B. Craig Dawson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 N A St Bldg 1 Ste 246
 City Midland State TX Zip Code 79705-5421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Crawford & Dawson Benefits Group Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58883
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

C. Teresa DeBruin
 Full Name (Last, First, Middle Initial)
 Mailing Address 5880 Live Oak Pkwy Ste 230
 City Norcross State GA Zip Code 30093-1740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DeBruin Benefit Services, Inc./ The L Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58884
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 2811 Lenoir Dr

City Greensboro State NC Zip Code 27408-5212

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

Name of Employer Community Eye Care Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P58886

Amount of Each Receipt this Period 50.00

Payroll Deduction (\$50.00 Monthly)

B. Rush D Dixon
Full Name (Last, First, Middle Initial)

Mailing Address 15200 Omega Drive Suite 100

City Rockville State MD Zip Code 20850-

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

Name of Employer Early Cassidy and Schilling Occupation VP of Employee Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 805.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P58852

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address PO Box 285

City Geneva State IL Zip Code 60134-0285

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

Name of Employer Colonial Life Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P58853

Amount of Each Receipt this Period 27.00

Payroll Deduction (\$27.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 162.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Steve Dodder
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2069
 City Monument State CO Zip Code 80132-2069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Assurant Health Occupation Regional Sales Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58854
 Amount of Each Receipt this Period **85.00**
 Payroll Deduction
 (\$85.00 Monthly)

B. Sam Drysdale
 Full Name (Last, First, Middle Initial)
 Mailing Address 4520 S National
 City Springfield State MO Zip Code 65810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mercy Health Plans Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **335.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58858
 Amount of Each Receipt this Period **42.00**
 Payroll Deduction
 (\$42.00 Monthly)

C. Michael J. Dugan
 Full Name (Last, First, Middle Initial)
 Mailing Address 4549 Highway 17 Byp S
 City Myrtle Beach State SC Zip Code 29577-6680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ka-Nol Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58859
 Amount of Each Receipt this Period **10.00**
 Payroll Deduction
 (\$10.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Geoffrey Duke
Full Name (Last, First, Middle Initial)
Mailing Address 9920 Kinsey Ave Ste 120
City State Zip Code
Huntersville NC 28078-2401
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MPAY Inc Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
210.00

Date of Receipt
05 / 23 / 2012
Transaction ID : 12754-P58861
Amount of Each Receipt this Period
42.00
Payroll Deduction
(\$42.00 Monthly)

B. Tina Durand
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 61157
City State Zip Code
Corpus Christi TX 78466-1157
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Heavin & Associates Insurance Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
210.00

Date of Receipt
05 / 23 / 2012
Transaction ID : 12752-P58425
Amount of Each Receipt this Period
42.00
Payroll Deduction
(\$42.00 Monthly)

C. Michael A. Embry
Full Name (Last, First, Middle Initial)
Mailing Address 26240 Wacker Dr
City State Zip Code
Chesterfield MI 48051-3306
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Comerica Insurance Services, Inc. VP - Group Benefits Division
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
635.00

Date of Receipt
05 / 23 / 2012
Transaction ID : 12754-P59483
Amount of Each Receipt this Period
170.00
Payroll Deduction
(\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **254.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. John Fagen
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 19
City State Zip Code
Demotte IN 46310-0019
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Financial Arts Inc. Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
425.00

Date of Receipt
05 / 23 / 2012
Transaction ID : 12754-P59487
Amount of Each Receipt this Period
85.00
Payroll Deduction
(\$85.00 Monthly)

B. Valerie Fagen
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 19
City State Zip Code
Demotte IN 46310-0019
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Financial Arts, Inc. Broker
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
208.35

Date of Receipt
05 / 23 / 2012
Transaction ID : 12754-P59488
Amount of Each Receipt this Period
41.67
Payroll Deduction
(\$41.67 Monthly)

C. Cheryl Farmer
Full Name (Last, First, Middle Initial)
Mailing Address 5010 Carriage Dr
City State Zip Code
Evansville IN 47715-2570
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Health Resources Inc. Regional Sales Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
425.00

Date of Receipt
05 / 23 / 2012
Transaction ID : 12754-P58848
Amount of Each Receipt this Period
85.00
Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 211.67
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jennifer Farrell
Full Name (Last, First, Middle Initial)
Mailing Address 3800 N Central Ave Fl 9
City Phoenix State AZ Zip Code 85012-1979
FEC ID number of contributing federal political committee. **C**
Name of Employer Black, Gould & Associates Occupation Sr. Account Executive
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **230.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58849
Amount of Each Receipt this Period **40.00**
Payroll Deduction (\$40.00 Monthly)

B. Jeffrey Fishback
Full Name (Last, First, Middle Initial)
Mailing Address 736 Johnson Ferry Rd Bldg C Ste 2
City Marietta State GA Zip Code 30068-4379
FEC ID number of contributing federal political committee. **C**
Name of Employer Purchasing Alliance Solutions, Inc. Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58869
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

C. Barry J. Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 7343 El Camino Real
City Atascadero State CA Zip Code 93422-4697
FEC ID number of contributing federal political committee. **C**
Name of Employer Barry J. Fisher Insurance Marketing Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **575.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58870
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **210.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 131 Courtland Ave Apt 6

City Stamford State CT Zip Code 06902-3443

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

Name of Employer Find Medicare Plans Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **855.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58871

Amount of Each Receipt this Period **87.00**

Payroll Deduction **(\$87.00 Monthly)**

B. Linda Friedrich
Full Name (Last, First, Middle Initial)

Mailing Address 4435 O St

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 / 23 / 2012**
Transaction ID : 12752-P58459

Amount of Each Receipt this Period **50.00**

Payroll Deduction **(\$50.00 Monthly)**

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

Mailing Address 1706 Grayscroft Dr

City Waxhaw State NC Zip Code 28173-6678

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

Name of Employer Horizon Benefits Consultants, Inc Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P58943

Amount of Each Receipt this Period **45.00**

Payroll Deduction **(\$45.00 Monthly)**

SUBTOTAL of Receipts This Page (optional)..... **182.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial) A. Joan Galletta		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59130
Mailing Address 3342 Kori Rd		Amount of Each Receipt this Period 85.00
City Jacksonville	State FL	Zip Code 32257-8883
FEC ID number of contributing federal political committee. C	Name of Employer JP Perry Insurance, Inc.	Occupation Producer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
		Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) B. James Garbina		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58572
Mailing Address 14010 Fnb Pkwy Ste 300		Amount of Each Receipt this Period 85.00
City Omaha	State NE	Zip Code 68154-5206
FEC ID number of contributing federal political committee. C	Name of Employer Harry A. Koch Co.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
		Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) C. Joy K Gardner		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58573
Mailing Address 9424 Double R Blvd		Amount of Each Receipt this Period 40.00
City Reno	State NV	Zip Code 89521-5977
FEC ID number of contributing federal political committee. C	Name of Employer Comstock Insurance Agencies, Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
		Payroll Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 94
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Charles Gartlan
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1268

City Toms River	State NJ	Zip Code 08754-1268
--------------------	-------------	------------------------

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

Name of Employer Emerson, Reid & Co.	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59136

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

B. Charles L. Geissinger
Full Name (Last, First, Middle Initial)
Mailing Address 3530 N. 163 Plaza

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

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

Name of Employer Preferred Marketing Associates	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	04	/	2012

Transaction ID : 12643

Amount of Each Receipt this Period
500.00

C. Jeffrey W. Gennaro
Full Name (Last, First, Middle Initial)
Mailing Address 3820 W Happy Valley Rd Ste 141, P

City Glendale	State AZ	Zip Code 85310-
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FEC ID number of contributing federal political committee. **C**

Name of Employer Capitol Insurance Brokers, Inc.	Occupation Pres.
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59158

Amount of Each Receipt this Period
78.00

Payroll Deduction
(\$78.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	678.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Julie George
Full Name (Last, First, Middle Initial)

Mailing Address 2016 Muirfield Pl

City Clemmons State NC Zip Code 27012-9345

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

Name of Employer JBA Benefits, LLC Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59160

Amount of Each Receipt this Period **42.00**

Payroll Deduction (\$42.00 Monthly)

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

Mailing Address 810 Dutch Square Blvd Ste 115

City Columbia State SC Zip Code 29210-7337

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

Name of Employer Gibson & Associates, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59162

Amount of Each Receipt this Period **170.00**

Payroll Deduction (\$170.00 Monthly)

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

Mailing Address 810 Dutch Square Blvd Ste 115

City Columbia State SC Zip Code 29210-7337

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

Name of Employer Gibson & Associates Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59161

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **297.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Richard Girdler
Full Name (Last, First, Middle Initial)

Mailing Address 113 Seaboard Ln Ste C-170

City Franklin State TN Zip Code 37067-8281

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

Name of Employer Cowan Benefit Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59164

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 442 Teaneck Rd

City Ridgefield Park State NJ Zip Code 07660-1516

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

Name of Employer The Employee Benefits Advisors Group Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59181

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$60.00 Monthly)

C. Ryan Gordon
Full Name (Last, First, Middle Initial)

Mailing Address 1813 Sweetbay Dr

City Salisbury State MD Zip Code 21804-1663

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

Name of Employer Group Insurance Solutions Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 515.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59187

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 233 S 13th St Ste 1650

City Lincoln State NE Zip Code 68508-2036

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

Name of Employer The Harry A. Koch Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58606

Amount of Each Receipt this Period **125.00**

Payroll Deduction
(\$125.00 Monthly)

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

Mailing Address 4404 Technology Dr

City South Bend State IN Zip Code 46628-9700

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

Name of Employer Page 1 Benefits, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P58994

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. John Gross

Mailing Address 1703 Santa Fe Dr

City Weatherford State TX Zip Code 76086-6419

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

Name of Employer J. B. Gross Insurance Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P58997

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	295.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Lorelei Gross
 Full Name (Last, First, Middle Initial)
 Mailing Address 1703 Santa Fe Dr
 City Weatherford State TX Zip Code 76086-6419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer J. B. Gross Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58998
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Robert Grundman
 Full Name (Last, First, Middle Initial)
 Mailing Address 7412 Karl Dr
 City Lincoln State NE Zip Code 68516-4368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Benefit Strategies Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58607
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

C. Craig Gussin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4330 La Jolla Village Dr Ste 330
 City San Diego State CA Zip Code 92122-6241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Auerbach & Gussin Insurance and Finan Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59193
 Amount of Each Receipt this Period 95.00
 Payroll Deduction (\$95.00 Monthly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Teresa Gutierrez

Mailing Address 12833 Riverdance Dr

City Raleigh State NC Zip Code 27613-7093

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59195

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. David 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 BlueCross BlueShield of South Carolina Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12752-P58608

Amount of Each Receipt this Period **42.00**

Payroll Deduction
(\$42.00 Monthly)

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

Mailing Address PO Box 5716

City Boise State ID Zip Code 83705-0716

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

Name of Employer Insurance Network America Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59207

Amount of Each Receipt this Period **50.00**

Payroll Deduction
(\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **177.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Sheila Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 22801 Ventura Blvd Ste 205
 City Woodland Hills State CA Zip Code 91364-5834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sheila Hartman Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59208
 Amount of Each Receipt this Period 170.00
 Payroll Deduction (\$170.00 Monthly)

B. Hedy Hebert
 Full Name (Last, First, Middle Initial)
 Mailing Address 4816 Woodberry Ln
 City Benton State LA Zip Code 71006-9361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Consulting Services Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59210
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

C. Dan Heffley
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 50031
 City Henderson State NV Zip Code 89016-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Employer Benefit Source, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59212
 Amount of Each Receipt this Period 10.00
 Payroll Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. Timothy 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 Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58497

Amount of Each Receipt this Period **100.00**

Payroll Deduction
(\$100.00 Monthly)

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

Mailing Address 19310 Sonoma Hwy Ste A

City Sonoma State CA Zip Code 95476-5454

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

Name of Employer RealCare Insurance Marketing, Inc. Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59014

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 38176 Medical Center Ave

City Zephyrhills State FL Zip Code 33540-1380

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

Name of Employer The Canadian Drugstore Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59015

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 211 McLaws Cir Ste 2

City Williamsburg State VA Zip Code 23185-5649

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

Name of Employer Centaurus Financial, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59238

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 530 Water St Fl 7

City Oakland State CA Zip Code 94607-3524

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

Name of Employer Dealey, Renton & Associates Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59247

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 2850 W Grand Blvd

City Detroit State MI Zip Code 48202-2643

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

Name of Employer Health Alliance Plan Occupation Director of Producer Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59248

Amount of Each Receipt this Period **42.00**

Payroll Deduction (\$42.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1029 Monarch St Ste 130

City Lexington State KY Zip Code 40513-1904

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

Name of Employer Employee Benefit Associates, Inc. Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59252

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 1482 Baron Ct

City Stone Mountain State GA Zip Code 30087-3037

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

Name of Employer David S. Johnson Insurance Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1325.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58987

Amount of Each Receipt this Period 250.00

Payroll Deduction (\$250.00 Monthly)

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

Mailing Address 6235 Morrison Blvd Ste 302

City Charlotte State NC Zip Code 28211-3508

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

Name of Employer Strategic Employee Benefit Services Occupation Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 508.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59257

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 377.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. George Keeling
Full Name (Last, First, Middle Initial)

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

City Levelland State TX Zip Code 79336

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

Name of Employer George R. Keeling Insurance Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12752-P58649

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

B. Dianne Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 7320 N La Cholla Blvd Ste 154-219

City Tucson State AZ Zip Code 85741-2309

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

Name of Employer Sandbrook Benefits Group, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12752-P58650

Amount of Each Receipt this Period
50.00

Payroll Deduction
 (\$50.00 Monthly)

C. Roger J Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 424 Lewis Hargett Cir Ste 100

City Lexington State KY Zip Code 40503-3683

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

Name of Employer Northwestern Mutual Financial Network Occupation Employee Benefits Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12754-P59267

Amount of Each Receipt this Period
42.00

Payroll Deduction
 (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **177.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jean M. Kelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 12485 28th St N Fl 2
 City Saint Petersburg State FL Zip Code 33716-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BB&T Iler Wall & Shonter Insurance Se Occupation Benefit Account Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59270
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Tamara Kennedy
 Full Name (Last, First, Middle Initial)
 Mailing Address 7740 N 16th St Ste 110
 City Phoenix State AZ Zip Code 85020-4481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rogers Benefit Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59272
 Amount of Each Receipt this Period 200.00
 Payroll Deduction (\$200.00 Monthly)

C. Angela M. Kiani
 Full Name (Last, First, Middle Initial)
 Mailing Address 6040 S 58th St Ste E
 City Lincoln State NE Zip Code 68516-3695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lincoln Financial Management, LLC Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 05 / 30 / 2012
Transaction ID : 12767
 Amount of Each Receipt this Period 365.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 595.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. John Kiebler
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 W Vine St Ste 1600
 City Lexington State KY Zip Code 40507-1814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Humana Occupation CHC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59276
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Valerie Koch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2429 North Ave
 City Bridgeport State CT Zip Code 06604-2336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Ganim Group, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59050
 Amount of Each Receipt this Period 45.00
 Payroll Deduction (\$45.00 Monthly)

C. Linda Rose Koehler
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 Shelley St
 City Livermore State CA Zip Code 94550-2368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Herzog Insurance Agency Occupation Health Benefits Insurance Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58515
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	215.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58652
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

B. Suzanne Kolterman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 426
 City Seward State NE Zip Code 68434-0426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kolterman Agency, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58653
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

C. Mary Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2637 S 158th Plz Ste 200
 City Omaha State NE Zip Code 68130-1769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Holmes Murphy and Associates, Inc. Occupation Senior Acct Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58654
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Daniel LaBroad
 Full Name (Last, First, Middle Initial)
 Mailing Address 6315 Crested Butte Dr
 City Dallas State TX Zip Code 75252-5764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ovation Health & Life Services, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59283
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Jim Lawless
 Full Name (Last, First, Middle Initial)
 Mailing Address 989 Governors Ln Ste 350
 City Lexington State KY Zip Code 40513-1173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Advisors dba Lawless Insuranc Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59318
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

C. Emma S Leigh
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Townpark Ln NW Ste LL1000
 City Kennesaw State GA Zip Code 30144-3729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alliant Health Plans, Inc. Occupation Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59321
 Amount of Each Receipt this Period 50.00
 Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 177.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Karen Leonard
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 50
City Hackettstown State NJ Zip Code 07840-0050
FEC ID number of contributing federal political committee. **C**
Name of Employer Leonard Financial Group, LLC Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59323
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

B. Juan R Lopez
Full Name (Last, First, Middle Initial)
Mailing Address 1851 E 1st St Ste 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 Area Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59327
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

C. Scott Lopez
Full Name (Last, First, Middle Initial)
Mailing Address 106 Oil Center Dr Ste 250
City Lafayette State LA Zip Code 70503-2459
FEC ID number of contributing federal political committee. **C**
Name of Employer Insurance Resource Group Occupation Broker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59329
Amount of Each Receipt this Period **42.00**
Payroll Deduction (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Douglas Lubenow
Full Name (Last, First, Middle Initial)

Mailing Address 214 W Main St Ste 203

City Moorestown State NJ Zip Code 08057-2345

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

Name of Employer Lubenow Agency Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58670

Amount of Each Receipt this Period 30.00

Payroll Deduction (\$30.00 Monthly)

B. Ronald Luft
Full Name (Last, First, Middle Initial)

Mailing Address 2525 Harrodsburg Rd Ste 300

City Lexington State KY Zip Code 40504-3359

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59334

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Monthly)

C. Maurice Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 301 Madison Ave Fl 4

City New York State NY Zip Code 10017-8103

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

Name of Employer The Medical Link, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59335

Amount of Each Receipt this Period 250.00

Payroll Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 322.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Victoria A. Major-Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 540034
 City Lake Worth State FL Zip Code 33454-0034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VMB Solutions Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58674
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30.00 Monthly)

B. Dale W. Maloney
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 S Swoope Ave Ste 210
 City Maitland State FL Zip Code 32751-5784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefits Division, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59341
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

C. Benji A. Marrs
 Full Name (Last, First, Middle Initial)
 Mailing Address 1151 Red Mile Rd
 City Lexington State KY Zip Code 40504-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Insurance Marketing Occupation Benefit Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59344
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 6731 Columbia Gateway Dr Ste 210

City Columbia	State MD	Zip Code 21046-2165
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln Financial Group	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59349

Amount of Each Receipt this Period
45.00

Payroll Deduction
(\$45.00 Monthly)

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

Mailing Address PO Box 38905

City Greensboro	State NC	Zip Code 27438-8905
--------------------	-------------	------------------------

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

Name of Employer North Carolina AHU	Occupation Executive Director
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12752-P58680

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

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

Mailing Address 3300 Battleground Ave Ste 320

City Greensboro	State NC	Zip Code 27410-2491
--------------------	-------------	------------------------

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 M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59352

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	187.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Dwight M Mazzone
 Full Name (Last, First, Middle Initial)
 Mailing Address 8878 Haviland Rd
 City Las Vegas State NV Zip Code 89123-0191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dwight M. Mazzone - Insurance Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **340.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59054
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction (\$20.00 Monthly)

B. H. McDermott
 Full Name (Last, First, Middle Initial)
 Mailing Address 883 Baxter Dr
 City South Jordan State UT Zip Code 84095-8506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDermott Company & Associates Occupation Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59061
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction (\$50.00 Monthly)

C. Susan McGinnis
 Full Name (Last, First, Middle Initial)
 Mailing Address 8516 E 101st St Ste H
 City Tulsa State OK Zip Code 74133-7035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BenEx Insurance Agency Occupation Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **05 / 22 / 2012**
Transaction ID : 12749
 Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **100.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 8516 E 101st St Ste H

City Tulsa State OK Zip Code 74133-7035

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

Name of Employer BenEx Insurance Agency Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58681

Amount of Each Receipt this Period 300.00

Payroll Deduction (\$30.00 Monthly)

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

Mailing Address 532 Pajaro St

City Salinas State CA Zip Code 93901-3346

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

Name of Employer Leavitt Central Coast Insurance Servi Occupation Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59354

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

C. K. Brian McLaughlin
Full Name (Last, First, Middle Initial)

Mailing Address 1001 Elm St Ste 301

City Manchester State NH Zip Code 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 / 23 / 2012
Transaction ID : 12754-P59356

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Daniel McMahon		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59357
Mailing Address 501 N Riverpoint Blvd Ste. 403		Amount of Each Receipt this Period 85.00
City Spokane	State WA	Zip Code 99202-1649
FEC ID number of contributing federal political committee. C	Name of Employer Western States Jones & Mitchell	Occupation Benefits Producer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) B. Keith H. McNeil		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59102
Mailing Address 7200 Redwood Blvd Ste 400		Amount of Each Receipt this Period 100.00
City Novato	State CA	Zip Code 94945-3249
FEC ID number of contributing federal political committee. C	Name of Employer Elite Brokerage Services, Inc.	Occupation Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Payroll Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. Griffin L. Meredith		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58977
Mailing Address 2518 Wendell Ave		Amount of Each Receipt this Period 85.00
City Louisville	State KY	Zip Code 40205-3012
FEC ID number of contributing federal political committee. C	Name of Employer FSAB Benefits	Occupation Insurance Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	Payroll Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Norman Michaels
Full Name (Last, First, Middle Initial)
Mailing Address 80 Business Park Dr Ste 306
City Armonk State NY Zip Code 10504-1705
FEC ID number of contributing federal political committee. **C**
Name of Employer Michaels & Associates Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59363
Amount of Each Receipt this Period 250.00
Payroll Deduction (\$250.00 Monthly)

B. Jeffrey Miles
Full Name (Last, First, Middle Initial)
Mailing Address 578 Washington Blvd # 801
City Marina del Rey State CA Zip Code 90292-5442
FEC ID number of contributing federal political committee. **C**
Name of Employer The Miles Organization, Inc. Occupation Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59364
Amount of Each Receipt this Period 85.00
Payroll Deduction (\$85.00 Monthly)

C. Dennis Mobley
Full Name (Last, First, Middle Initial)
Mailing Address 5454 I 55 N # B
City Jackson State MS Zip Code 39211-4027
FEC ID number of contributing federal political committee. **C**
Name of Employer Mobley Insurance Agency, LLC Occupation Office Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58694
Amount of Each Receipt this Period 50.00
Payroll Deduction (\$50.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 94
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 137 Executive Dr Ste D

City Madison	State MS	Zip Code 39110-8456
-----------------	-------------	------------------------

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

Name of Employer Mobley Insurance Agency LLC	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12752-P58693

Amount of Each Receipt this Period
50.00

Payroll Deduction
(\$50.00 Monthly)

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

Mailing Address PO Box 1006

City Burlington	State NC	Zip Code 27216-1006
--------------------	-------------	------------------------

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

Name of Employer David R. Moore, CLU & Associates	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	/	23	/	2012

Transaction ID : 12752-P58519

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Douglas F Moore

Mailing Address 1010 Ohio River Blvd

City Pittsburgh	State PA	Zip Code 15202-2836
--------------------	-------------	------------------------

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

Name of Employer Seubert & Associates, Inc.	Occupation Principal & Director, Benefits Divisi
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59066

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. David Mordo		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59068
Mailing Address 718 River Road		Amount of Each Receipt this Period 20.00
City Fair Haven	State NJ	Zip Code 07704-
FEC ID number of contributing federal political committee. C	Name of Employer Walsh Benefits	Occupation Director, Small Group Operatio
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
		Payroll Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial) B. Todd Morrow		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59371
Mailing Address 1173 Brittmoore Rd		Amount of Each Receipt this Period 42.00
City Houston	State TX	Zip Code 77043-5003
FEC ID number of contributing federal political committee. C	Name of Employer Benefit Concepts	Occupation General Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
		Payroll Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial) C. Ray Musser		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59377
Mailing Address 404 N 2nd Ave Ste B		Amount of Each Receipt this Period 85.00
City Upland	State CA	Zip Code 91786-4793
FEC ID number of contributing federal political committee. C	Name of Employer Ray Musser & Associates Insurance Ser	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
		Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	147.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. John J. Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 32110 Agoura Rd
 City Westlake Village State CA Zip Code 91361-4026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Warner Pacific Insurance Services Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1666.80**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59397
 Amount of Each Receipt this Period **416.70**
 Payroll Deduction **(\$416.70 Monthly)**

B. Penny Nikel
 Full Name (Last, First, Middle Initial)
 Mailing Address 917 S Main St Ste 200B
 City Longmont State CO Zip Code 80501-6400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nikel Insurance Associates LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **255.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59399
 Amount of Each Receipt this Period **20.00**
 Payroll Deduction **(\$20.00 Monthly)**

C. Terri Olson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO 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 Independent Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12752-P58522
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction **(\$50.00 Monthly)**

SUBTOTAL of Receipts This Page (optional).....	486.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Tiffany Otis-Albert
Full Name (Last, First, Middle Initial)

Mailing Address 27000 W. 11 Mile Road Mail Code B

City Southfield	State MI	Zip Code 48034
--------------------	-------------	-------------------

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

Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director, External Sales Distribution
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59073

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

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

Mailing Address 47 Laurel Hill Dr

City Niantic	State CT	Zip Code 06357-1536
-----------------	-------------	------------------------

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

Name of Employer Parker Agency	Occupation Principal
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12752-P58720

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

C. Jesse Patton
Full Name (Last, First, Middle Initial)

Mailing Address 1112 Maple St

City West Des Moines	State IA	Zip Code 50265-4420
-------------------------	-------------	------------------------

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

Name of Employer Associations Marketing Group, Inc.	Occupation CEO/President
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59406

Amount of Each Receipt this Period
350.00

Payroll Deduction
(\$350.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Ross Pendergraft

Mailing Address 21600 Oxnard St Fl 8

City Woodland Hills State CA Zip Code 91367-4904

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

Name of Employer USI Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12754-P59407

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Juna Penney

Mailing Address 3760 Piper Street, Suite 1026

City Anchorage State AK Zip Code 99508-

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

Name of Employer Providence Health & Services Alaska Occupation Region Manager, Payer Relation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12754-P59410

Amount of Each Receipt this Period
85.00

Payroll Deduction
 (\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Paige Phillips

Mailing Address PO Box 380968

City birmingham State AL Zip Code 35238-

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

Name of Employer Benefit Partners, LLC Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12752-P58725

Amount of Each Receipt this Period
42.00

Payroll Deduction
 (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Susan Pittman		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58727
Mailing Address 32418 51st Ave SW		Amount of Each Receipt this Period 50.00
City Federal Way	State WA	Zip Code 98023-1936
FEC ID number of contributing federal political committee. C	Name of Employer Insure NW Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		Payroll Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) B. Tom Polenzani		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59074
Mailing Address 3452 E Foothill Blvd Ste 514		Amount of Each Receipt this Period 170.00
City Pasadena	State CA	Zip Code 91107-3163
FEC ID number of contributing federal political committee. C	Name of Employer Polenzani Benefits & Ins. Svcs., Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	
		Payroll Deduction (\$170.00 Monthly)

Full Name (Last, First, Middle Initial) C. John G. Prue		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58474
Mailing Address 12713 S Edinburgh St		Amount of Each Receipt this Period 85.00
City Olathe	State KS	Zip Code 66062-1300
FEC ID number of contributing federal political committee. C	Name of Employer Humana, Inc.	Occupation Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
		Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 8375 W Flamingo Rd Ste 102

City Las Vegas	State NV	Zip Code 89147-4149
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FEC ID number of contributing federal political committee. **C**

Name of Employer Distinctive Insurance	Occupation Broker
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59434

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

B. Kathy Rainwater
Full Name (Last, First, Middle Initial)

Mailing Address 515 W Southwest Loop 323

City Tyler	State TX	Zip Code 75701-9455
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FEC ID number of contributing federal political committee. **C**

Name of Employer Threlkeld & Company Insurance	Occupation Executive Vice President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12752-P58732

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

C. Susan M Rash
Full Name (Last, First, Middle Initial)

Mailing Address 2108 W Laburnum Ave Ste 310

City Richmond	State VA	Zip Code 23227-4300
------------------	-------------	------------------------

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

Name of Employer BB&T Benefit Consultants of Virginia,	Occupation Vice President
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
975.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59438

Amount of Each Receipt this Period
170.00

Payroll Deduction
(\$170.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	297.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Dennis Recker		Date of Receipt
Mailing Address 971 N Perry St		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City	State	Zip Code
Ottawa	OH	45875-1218
FEC ID number of contributing federal political committee.		Transaction ID : 12752-P58737
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	Payroll Deduction
Fawcett, Lammon, Recker & Associates	Registered Representative	
Receipt For:	Aggregate Year-to-Date ▼	(\$30.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Reddy		Date of Receipt
Mailing Address 13800 Jackson Rd		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City	State	Zip Code
Mishawaka	IN	46544-9195
FEC ID number of contributing federal political committee.		Transaction ID : 12754-P59439
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="85.00"/>
Name of Employer	Occupation	Payroll Deduction
Keystone Insurers Group	Broker	
Receipt For:	Aggregate Year-to-Date ▼	(\$85.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Patrick Reuszer		Date of Receipt
Mailing Address 312 Elm Sreet		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City	State	Zip Code
Cincinnati	OH	45202
FEC ID number of contributing federal political committee.		Transaction ID : 12754-P59122
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	Payroll Deduction
Assurant Employee Benefits	Agent	
Receipt For:	Aggregate Year-to-Date ▼	(\$50.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="165.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (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 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. R Dane Rianhard
Full Name (Last, First, Middle Initial)
Mailing Address 1 E Pratt St Unit 902
City Baltimore State MD Zip Code 21202-1128
FEC ID number of contributing federal political committee. **C**
Name of Employer FranklinMorris Occupation Broker
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **550.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59448
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

B. Shan Ricketts
Full Name (Last, First, Middle Initial)
Mailing Address 736 Johnson Ferry Rd Bldg C Ste 2
City Marietta State GA Zip Code 30068-4379
FEC ID number of contributing federal political committee. **C**
Name of Employer Purchasing Alliance Solutions, Inc. Occupation Executive Vice President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59453
Amount of Each Receipt this Period **85.00**
Payroll Deduction (\$85.00 Monthly)

C. Susan Rider
Full Name (Last, First, Middle Initial)
Mailing Address 1402 N Capitol Ave Ste 400
City Indianapolis State IN Zip Code 46202-2375
FEC ID number of contributing federal political committee. **C**
Name of Employer Gregory & Appel Insurance Occupation Senior Account Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **360.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12752-P58743
Amount of Each Receipt this Period **72.00**
Payroll Deduction (\$30.00 Monthly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Robert L. Rifkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Stonewall Lane
 City Mamaroneck State NY Zip Code 10543-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Robert L. Rifkin Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59456
 Amount of Each Receipt this Period **42.00**
 Payroll Deduction (\$42.00 Monthly)

B. Mark Riley
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1635
 City Irmo State SC Zip Code 29063-1635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Benefit Services, LLC Occupation Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12754-P59457
 Amount of Each Receipt this Period **100.00**
 Payroll Deduction (\$100.00 Monthly)

C. Elizabeth Rios-Carl
 Full Name (Last, First, Middle Initial)
 Mailing Address 414 Executive Blvd #205
 City El Paso State TX Zip Code 79902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Employee Benefits VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : 12752-P58744
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **192.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

A. Michael Rivera
 Full Name (Last, First, Middle Initial)
 Mailing Address 12200 Northwest Fwy Ste 662
 City Houston State TX Zip Code 77092-4927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwest General Insurance Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P59461
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

B. Joseph Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 S 82nd St Ste B
 City Lincoln State NE Zip Code 68516-6584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midlands Financial Benefits Occupation Registered Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58746
 Amount of Each Receipt this Period 170.00
 Payroll Deduction (\$170.00 Monthly)

C. William Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1775 E Palm Canyon Dr Ste 110 # 2
 City Palm Springs State CA Zip Code 92264-1623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Palm Canyon Insurance Agency Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58747
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 14432 SE Eastgate Way Ste 400

City Bellevue	State WA	Zip Code 98007-6493
------------------	-------------	------------------------

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

Name of Employer Baldwin Resource Group	Occupation Vice President Sales
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59079

Amount of Each Receipt this Period

170.00

Payroll Deduction
 (\$170.00 Monthly)

Full Name (Last, First, Middle Initial)
B. 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 ▼ **410.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59080

Amount of Each Receipt this Period

42.00

Payroll Deduction
 (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Francis Ruggiero

Mailing Address 15 Kennedy Dr

City Budd Lake	State NJ	Zip Code 07828-1438
-------------------	-------------	------------------------

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

Name of Employer Slattery GA a division of Bollinger	Occupation Director of Broker Education
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P59470

Amount of Each Receipt this Period

85.00

Payroll Deduction
 (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	297.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Gregory Sailer		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59474
Mailing Address 8623 Eagle Point Blvd		Amount of Each Receipt this Period 85.00
City Lake Elmo	State MN	Zip Code 55042-8628
FEC ID number of contributing federal political committee. C	Name of Employer Sailer Benefit Services, Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) B. Paul Saiter		Date of Receipt MM / DD / YYYY 05 / 21 / 2012 Transaction ID : 12734
Mailing Address 230 S Bemiston Ave Ste 900		Amount of Each Receipt this Period 400.00
City Clayton	State MO	Zip Code 63105-1907
FEC ID number of contributing federal political committee. C	Name of Employer MRCT Benefits Plus	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Stephen Salamon		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59475
Mailing Address 111 Warren Road, Suite 14B		Amount of Each Receipt this Period 85.00
City Hunt Valley	State MD	Zip Code 21030-1930
FEC ID number of contributing federal political committee. C	Name of Employer HealthPlan Headquarters	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	570.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1735 N Brown Rd Ste 175

City State Zip Code
Lawrenceville GA 30043-8153

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

Name of Employer Occupation
E2E Benefits Services, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12754-P59476

Amount of Each Receipt this Period
150.00

Payroll Deduction
(\$150.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Rose Sandoval

Mailing Address 2 Main St Ste 340

City State Zip Code
Stoneham MA 02180-3336

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

Name of Employer Occupation
Benefit Strategy Partners, LLC Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12754-P59479

Amount of Each Receipt this Period
100.00

Payroll Deduction
(\$100.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Gregory Schell

Mailing Address 13551 Triton Park Blvd Ste 1000

City State Zip Code
Louisville KY 40223-4196

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

Name of Employer Occupation
Arison Insurance services, Inc. Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2012
Transaction ID : 12754-P59480

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 200 Sandy Springs PI NE # 300A

City	State	Zip Code
Atlanta	GA	30328-3854

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

Name of Employer	Occupation
Schiebel & Associates, LLC dba Shopbe	Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P58891

Amount of Each Receipt this Period
45.00

Payroll Deduction
(\$45.00 Monthly)

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

Mailing Address 4238 N Limberlost PI

City	State	Zip Code
Tucson	AZ	85705-1626

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

Name of Employer	Occupation
AFLAC	Broker Development Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P58892

Amount of Each Receipt this Period
42.00

Payroll Deduction
(\$42.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Alan Schulman

Mailing Address 2003 Little Haven Ct

City	State	Zip Code
Olney	MD	20832-1634

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

Name of Employer	Occupation
Insurance Benefits & Advisors	Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : 12754-P58984

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	172.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Ron Segal

Mailing Address 23901 Calabasas Rd Ste 1021

City Calabasas State CA Zip Code 91302-3390

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

Name of Employer Ron Segal Insurance Services, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12754-P59081

Amount of Each Receipt this Period
60.00

Payroll Deduction
 (\$60.00 Monthly)

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

Mailing Address PO Box 189

City Vancouver State WA Zip Code 98666-0189

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

Name of Employer Biggs Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **975.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12754-P59083

Amount of Each Receipt this Period
170.00

Payroll Deduction
 (\$170.00 Monthly)

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

Mailing Address 28638 Oak Point Dr

City Farmington Hills State MI Zip Code 48331-2706

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

Name of Employer BeneSys, Inc Occupation Director of Sales and Marketin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **386.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : 12754-P59085

Amount of Each Receipt this Period
42.00

Payroll Deduction
 (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► **272.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kenneth Sherlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Fairview Rd Ste 112
 City Asheville State NC Zip Code 28803-1028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Keystone Financial & Benefit Resources Regional Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 05 / 23 / 2012
Transaction ID : 12752-P58445
 Amount of Each Receipt this Period
 42.00
 Payroll Deduction
 (\$42.00 Monthly)

B. Nicole K. Smalley
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 107502
 City Anchorage State AK Zip Code 99510-7502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mercer Health & Benefits Account Assistant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 05 / 23 / 2012
Transaction ID : 12754-P58916
 Amount of Each Receipt this Period
 100.00
 Payroll Deduction
 (\$100.00 Monthly)

C. Amy T. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 14207
 City Jackson State MS Zip Code 39236-4207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Stewart Sneed Hewes/Bancorp South Ins. Account Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 216.00

Date of Receipt
 05 / 23 / 2012
Transaction ID : 12754-P58925
 Amount of Each Receipt this Period
 42.00
 Payroll Deduction
 (\$42.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Frank Smith		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58919
Mailing Address PO Box 1559		Amount of Each Receipt this Period 85.00
City Wheaton	State IL	Zip Code 60187-1559
FEC ID number of contributing federal political committee. C	Name of Employer Business Insurance Underwriters, Inc.	Occupation Senior Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	Payroll Deduction (\$85.00 Monthly)

Full Name (Last, First, Middle Initial) B. Gregory Smith		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58921
Mailing Address PO Box 370		Amount of Each Receipt this Period 30.00
City Lincoln	State IL	Zip Code 62656-0370
FEC ID number of contributing federal political committee. C	Name of Employer Group Marketing Services Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) C. Paul E Smith		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58924
Mailing Address 100 Queen St		Amount of Each Receipt this Period 125.00
City Southington	State CT	Zip Code 06489-2052
FEC ID number of contributing federal political committee. C	Name of Employer AmeriBen Alliance, LLC	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	Payroll Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address PO Box 56149

City Sherman Oaks State CA Zip Code 91413-1149

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

Name of Employer Genesis Financial Insurance Services Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : **12754-P58920**

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 300 N Greene St Fl 6

City Greensboro State NC Zip Code 27401-2170

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

Name of Employer Wells Fargo Insurance Services USA, I Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : **12754-P58929**

Amount of Each Receipt this Period **65.00**

Payroll Deduction (\$65.00 Monthly)

C. Sher Sparano
Full Name (Last, First, Middle Initial)

Mailing Address 7020 108th St # 5-0

City Forest Hills State NY Zip Code 11375-4449

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

Name of Employer Benefits Advisory Service Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **05 / 23 / 2012**
Transaction ID : **12754-P58930**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **180.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial)
A. Anne Sperling

Mailing Address 805 Saint Michaels Dr

City Santa Fe State NM Zip Code 87505-7625

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

Name of Employer Daniels Insurance Agency, Inc. Occupation Employee Benefits Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P58932

Amount of Each Receipt this Period **50.00**

Payroll Deduction
(\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Jackie Spragins

Mailing Address PO Box 1071

City Wichita Falls State TX Zip Code 76307-1071

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 / 23 / 2012**

Transaction ID : 12752-P58455

Amount of Each Receipt this Period **50.00**

Payroll Deduction
(\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Delvin Stahl

Mailing Address PO Box 388

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 / 23 / 2012**

Transaction ID : 12752-P58539

Amount of Each Receipt this Period **42.00**

Payroll Deduction
(\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **142.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Eugene Starks
 Full Name (Last, First, Middle Initial)
 Mailing Address 613 Crescent Cir Ste 201
 City Ridgeland State MS Zip Code 39157-8635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Benefit Administration Services, Ltd. Occupation Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58541
 Amount of Each Receipt this Period 105.00
 Payroll Deduction (\$105.00 Monthly)

B. James Stenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 381 Victoria Drive
 City Bridgewater State NJ Zip Code 08807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MVS Consulting Occupation Leadership Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58543
 Amount of Each Receipt this Period 170.00
 Payroll Deduction (\$170.00 Monthly)

c. Marilyn Stenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 381 Victoria Drive
 City Bridgewater State NJ Zip Code 08807-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MVS Consulting Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58544
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)
A. Rodney Stuart

Mailing Address 9755 Randall Dr Ste 101

City Indianapolis State IN Zip Code 46280-2952

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

Name of Employer Benefit Innovations, LLP Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58462

Amount of Each Receipt this Period **50.00**

Payroll Deduction
(\$50.00 Monthly)

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

Mailing Address Kennedy, Michener Benefits, LLC 9

City Denver State CO Zip Code 80246

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

Name of Employer Kennedy Michener Benefits, LLC Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58463

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

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

Mailing Address 1630 Riverton Rd

City Cinnaminson State NJ Zip Code 08077-2343

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

Name of Employer Innovative Benefit Planning Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59039

Amount of Each Receipt this Period **85.00**

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **220.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. James Summers
 Full Name (Last, First, Middle Initial)
 Mailing Address 8420 West Dodge Road, 5th Floor
 City Omaha State NE Zip Code 68114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Market Sales, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58464
 Amount of Each Receipt this Period 125.00
 Payroll Deduction (\$125.00 Monthly)

B. William Sutherland
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Interpark Blvd
 City San Antonio State TX Zip Code 78216-1841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wortham Insurance & Risk Management Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58952
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

C. Tom Swayne
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 31029
 City Charleston State SC Zip Code 29417-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer David M. Gilston Insurance Agency, In Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12754-P58954
 Amount of Each Receipt this Period 100.00
 Payroll Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial) A. Ryan Swinton		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58955
Mailing Address 7101 S 82nd St		Amount of Each Receipt this Period 85.00
City Lincoln	State NE	Zip Code 68516-6584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$85.00 Monthly)
Name of Employer Midlands Financial Benefits	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. F. Todd Taylor		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58961
Mailing Address 2924 Emerywood Pkwy Ste 200		Amount of Each Receipt this Period 85.00
City Richmond	State VA	Zip Code 23294-3746
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$85.00 Monthly)
Name of Employer Medical Society of Virginia Insurance	Occupation Sales/Service Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) C. Marsha Tellesbo		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P58962
Mailing Address 1001 4th Ave Ste 3200		Amount of Each Receipt this Period 85.00
City Seattle	State WA	Zip Code 98154-1003
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$85.00 Monthly)
Name of Employer Tellesbo & Company	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 22850 Crenshaw Blvd Ste 206

City Torrance	State CA	Zip Code 90505-3056
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P58964

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Royce E. Terry

Mailing Address PO Box 943

City Chickasha	State OK	Zip Code 73023-0943
-------------------	-------------	------------------------

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

Name of Employer Royce Terry Insurance	Occupation Broker
---	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : 12692

Amount of Each Receipt this Period
150.00

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

Mailing Address PO Box 2137

City Kernville	State CA	Zip Code 93238-2137
-------------------	-------------	------------------------

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

Name of Employer Harry P. Thal Insurance Agency	Occupation Broker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P58965

Amount of Each Receipt this Period
85.00

Payroll Deduction
(\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Marc Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 111 Center St Ste 1410

City Little Rock State AR Zip Code 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 M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P59095

Amount of Each Receipt this Period 42.00

Payroll Deduction (\$42.00 Monthly)

B. Ryan Thorn
Full Name (Last, First, Middle Initial)

Mailing Address 10342 Springcrest Ln

City South Jordan State UT Zip Code 84095-4538

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

Name of Employer Ryan P. Thorn Insurance Planning, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58545

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$40.00 Monthly)

C. Jennifer Toups
Full Name (Last, First, Middle Initial)

Mailing Address 1 Galleria Blvd Ste 1224

City Metairie State LA Zip Code 70001-7582

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
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58547

Amount of Each Receipt this Period 85.00

Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	167.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Janet Trautwein		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58472
Mailing Address 2000 14th St N Ste 450		Amount of Each Receipt this Period 170.00
City Arlington	State VA	Zip Code 22201-2573
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$170.00 Monthly)
Name of Employer NAHU	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) B. C. Louanne Trebing		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58473
Mailing Address 1806 Patton Dr		Amount of Each Receipt this Period 50.00
City Garland	State TX	Zip Code 75042-8205
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$50.00 Monthly)
Name of Employer Trebing Insurance Services	Occupation Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Rand Wall		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12752-P58491
Mailing Address 12603 Southwest Fwy Ste 620		Amount of Each Receipt this Period 100.00
City Stafford	State TX	Zip Code 77477-3838
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$100.00 Monthly)
Name of Employer Lone Star Health Plans, Ltd.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Doris Waller
 Full Name (Last, First, Middle Initial)
 Mailing Address 6411 Highland Crest Ln
 City Sachse State TX Zip Code 75048-5552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan-American Benefits Solutions Occupation Senior Sales Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58492
 Amount of Each Receipt this Period 42.00
 Payroll Deduction (\$42.00 Monthly)

B. Jessica F Waltman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 14th St N Ste 450
 City Arlington State VA Zip Code 22201-2573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAHU Occupation VP, Policy and State Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58564
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

C. M. Hughes Waren
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7661
 City Wilmington State NC Zip Code 28406-7661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ebenconcepts, Inc. Occupation Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2012
Transaction ID : 12752-P58548
 Amount of Each Receipt this Period 85.00
 Payroll Deduction (\$85.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 1907 Mangrove Ave Ste B

City Chico State CA Zip Code 95926-2381

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

Name of Employer John Warwick Insurance Services Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59108

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

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

Mailing Address 17263 Wild Horse Creek Rd Ste 202

City Chesterfield State MO Zip Code 63005-1363

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

Name of Employer D.A. Watson & Company Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt **05 / 24 / 2012**

Transaction ID : 12755

Amount of Each Receipt this Period **500.00**

c. Mark Waugh
Full Name (Last, First, Middle Initial)

Mailing Address 710 Arendell St Ste 204

City Morehead City State NC Zip Code 28557-4240

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

Name of Employer EbenConcepts Occupation Employee Benefits Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58552

Amount of Each Receipt this Period **42.00**

Payroll Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **627.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 15 S Jefferson St

City Roanoke State VA Zip Code 24011-1303

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

Name of Employer Benefits Group, Inc. Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12754-P59113

Amount of Each Receipt this Period **85.00**

Payroll Deduction (\$85.00 Monthly)

B. Dan Webb
Full Name (Last, First, Middle Initial)

Mailing Address 5251 Office Park Dr Ste 350

City Bakersfield State CA Zip Code 93309-0644

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

Name of Employer The Webb Insurance Group Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **05 / 23 / 2012**

Transaction ID : 12752-P58553

Amount of Each Receipt this Period **170.00**

Payroll Deduction (\$170.00 Monthly)

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

Mailing Address 3331 W Big Beaver Rd Ste 200

City Troy State MI Zip Code 48084-2814

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

Name of Employer McGraw Wentworth Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 01 / 2012**

Transaction ID : 12634

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **505.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Charles Westmoreland
 Full Name (Last, First, Middle Initial)
 Mailing Address 532 Cliffview Dr
 City State Zip Code
 Brandon MS 39047-9183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Abacus Benefits Management, LLC Executive Regional Sales Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 05 / 23 / 2012
Transaction ID : 12752-P58494
 Amount of Each Receipt this Period
 60.00
 Payroll Deduction
 (\$30.00 Monthly)

B. David Wilcox
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 River Vista Pl
 City State Zip Code
 Twin Falls ID 83301-3056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Magic Valley Insurance, Inc. President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 05 / 23 / 2012
Transaction ID : 12754-P59019
 Amount of Each Receipt this Period
 42.00
 Payroll Deduction
 (\$42.00 Monthly)

C. Trei Wild
 Full Name (Last, First, Middle Initial)
 Mailing Address 2745 Dallas Pkwy Ste 500
 City State Zip Code
 Plano TX 75093-8731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Assurant Employee Benefits Broker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 05 / 23 / 2012
Transaction ID : 12754-P59020
 Amount of Each Receipt this Period
 85.00
 Payroll Deduction
 (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 302 S 36th St Ste 105

City Omaha State NE Zip Code 68131-3845

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

Name of Employer Williams Deras Associates, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P59021

Amount of Each Receipt this Period
 85.00

Payroll Deduction
 (\$85.00 Monthly)

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

Mailing Address 31930 Daniel Way

City Temecula State CA Zip Code 92591-2129

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

Name of Employer Paula Wilson, Inc Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12752-P58504

Amount of Each Receipt this Period
 85.00

Payroll Deduction
 (\$85.00 Monthly)

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

Mailing Address 701 Lamar St

City Wichita Falls State TX Zip Code 76301-6824

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

Name of Employer Boley Featherston Insurance Agency Occupation Benefits Consulant/Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2012
Transaction ID : 12754-P59022

Amount of Each Receipt this Period
 50.00

Payroll Deduction
 (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 94
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Shelly Winson		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59025
Mailing Address PO Box 1914		Amount of Each Receipt this Period 30.00
City Chandler	State AZ	Zip Code 85244-1914
FEC ID number of contributing federal political committee. C	Name of Employer True Choice Benefits LLC	Occupation Benefit Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) B. Dennis Woehler		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59027
Mailing Address 1 Main St		Amount of Each Receipt this Period 30.00
City Evansville	State IN	Zip Code 47708-1464
FEC ID number of contributing federal political committee. C	Name of Employer ONB Insurance Group, Inc.	Occupation Group Benefits Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Payroll Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial) C. Barbara Wright		Date of Receipt MM / DD / YYYY 05 / 23 / 2012 Transaction ID : 12754-P59115
Mailing Address 111 E Ludwig Rd Ste 108		Amount of Each Receipt this Period 85.00
City Fort Wayne	State IN	Zip Code 46825-4240
FEC ID number of contributing federal political committee. C	Name of Employer Intrahealthsolutions, Inc.	Occupation Broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	Payroll Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 82 OF 94
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

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

Mailing Address 1111 Chestnut Hills Parkway

City Fort Wayne State IN Zip Code 46825

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

Name of Employer Old National Insurance Group Occupation President

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 / 2012

Transaction ID : 12754-P59114

Amount of Each Receipt this Period
85.00

Payroll 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 General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	20173.37

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Service Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2012

Transaction ID : 12796

Amount of Each Disbursement this Period

317.67

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Merchant Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2012

Transaction ID : 12797

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. Regions Bank

Mailing Address 4701 N Keystone Ave # 100

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement
Merhant Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2012

Transaction ID : 12795

Amount of Each Disbursement this Period

1322.81

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

1648.43

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. Regions Bank

Mailing Address 4701 N Keystone Ave # 100

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement
Banking Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 12798

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. ANN MARIE BUERKLE FOR CONGRESS

Mailing Address PO BOX 219

City SYRACUSE State NY Zip Code 13214

Purpose of Disbursement
Lunch 5/9

011

Category/
Type

Candidate Name

ANN MARIE BUERKLE

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 25

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2012

Transaction ID : 12638

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. BILL CASSIDY FOR CONGRESS

Mailing Address PO BOX 80505

City BATON ROUGE State LA Zip Code 70898

Purpose of Disbursement
Local Event 5/21

011

Category/
Type

Candidate Name

WILLIAM CASSIDY

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2012

Transaction ID : 12649

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. BILL SHUSTER FOR CONGRESS

Mailing Address PO BOX 27

City HOLLIDAYSBURGH State PA Zip Code 16648

Purpose of Disbursement
Check Voided

011

Category/
Type

Candidate Name

WILLIAM MR. SHUSTER

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2012

Transaction ID : 12805

Amount of Each Disbursement this Period

-1000.00

Check Voided

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

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. BRADY FOR CONGRESS

Mailing Address P.O. BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement
Dinner 5/16

011

Candidate Name

KEVIN BRADY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	2

Transaction ID : 12680

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. BRUNING FOR SENATE INCORPORATED

Mailing Address PO BOX 83950

City LINCOLN State NE Zip Code 68501

Purpose of Disbursement
Future Event

011

Candidate Name

JON C BRUNING

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NE District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	2

Transaction ID : 12650

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. DIANE BLACK FOR CONGRESS

Mailing Address PO BOX 1437

City GALLATIN State TN Zip Code 37066

Purpose of Disbursement
Lunch 5/8

011

Candidate Name

DIANE L MRS. BLACK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

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

Transaction ID : 12636

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. DUFFY FOR CONGRESS

Mailing Address PO BOX 538

City WAUSAU State WI Zip Code 54402

Purpose of Disbursement
Lunch 5/18

011

Category/
Type

Candidate Name

SEAN DUFFY

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District: 07

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2012

Transaction ID : 12679

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DENNIS ROSS

Mailing Address PO BOX 7310

City LAKELAND State FL Zip Code 33807

Purpose of Disbursement
Breakfast 5/10

011

Category/
Type

Candidate Name

DENNIS ALAN ROSS

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2012

Transaction ID : 12662

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD

City WEST CHESTER State OH Zip Code 45069

Purpose of Disbursement
Local Event - Golf 6/4

011

Category/
Type

Candidate Name

JOHN A BOEHNER

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 08

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2012

Transaction ID : 12676

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. GEORGE ALLEN FOR US SENATE

Mailing Address 2819 NORTH PARHAM ROAD

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement
Dinner/Reception 6/5

011

Candidate Name

GEORGE ALLEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 00

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2012

Transaction ID : 12639

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. GILLIBRAND FOR SENATE

Mailing Address 236 MASSACHUSETTS AVE SUITE 110

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Lunch 5/16

011

Candidate Name

KIRSTEN ELIZABETH GILLIBRAND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: DC District: 00

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2012

Transaction ID : 12682

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HELLER FOR SENATE

Mailing Address PO BOX 371907

City LAS VEGAS State NV Zip Code 89137

Purpose of Disbursement
Reception 5/22

011

Candidate Name

DEAN HELLER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2012

Transaction ID : 12750

Amount of Each Disbursement this Period

500.00

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. KATHY HOCHUL FOR CONGRESS

Mailing Address PO BOX 64

City: BUFFALO State: NY Zip Code: 14231

Purpose of Disbursement
Reception 5/8

011

Category/
Type

Candidate Name

KATHLEEN COURTNEY HOCHUL

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 26

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2012

Transaction ID : 12635

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO BOX 12667

City: BAKERSFIELD State: CA Zip Code: 93389

Purpose of Disbursement
Beverly Hills 6/13

011

Category/
Type

Candidate Name

KEVIN MCCARTHY

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 22

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : 12772

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KING FOR CONGRESS

Mailing Address 116 N MAIN ST.

City: EARLY State: IA Zip Code: 50535

Purpose of Disbursement
Local Event 6/25

011

Category/
Type

Candidate Name

STEVE MR. KING

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IA District: 04

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2012

Transaction ID : 12757

Amount of Each Disbursement this Period

500.00

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

2500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. KURT SCHRADER FOR CONGRESS

Mailing Address PO BOX 3314

City OREGON CITY State OR Zip Code 97045

Purpose of Disbursement
Breakfast 6/7

011

Category/
Type

Candidate Name

KURT SCHRADER

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

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

Transaction ID : 12637

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. LARSON FOR CONGRESS

Mailing Address PO BOX 479

City GLASTONBURY State CT Zip Code 06033

Purpose of Disbursement
Hartford 6/13

011

Category/
Type

Candidate Name

JOHN B LARSON

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

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

Transaction ID : 12775

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. LISA MURKOWSKI FOR US SENATE

Mailing Address PO BOX 100847

City ANCHORAGE State AK Zip Code 99510

Purpose of Disbursement
Lunch 5/23

011

Category/
Type

Candidate Name

LISA MURKOWSKI

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AK District: 00

Date of Disbursement

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

Transaction ID : 12736

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

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)

Grid for line numbers 21b through 30b, with line 23 checked.

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. MCCOLLUM FOR CONGRESS

Mailing Address P.O. BOX 14131

City ST. PAUL State MN Zip Code 55114

Purpose of Disbursement Breakfast 6/6

Candidate Name

BETTY MCCOLLUM

Office Sought: [X] House [] Senate [] President

Disbursement For: 2012 [X] Primary [] General [] Other (specify) v

State: MN District: 04

Date of Disbursement

Date selection box: 05 / 31 / 2012

Transaction ID : 12774

Amount of Each Disbursement this Period

Amount selection box: 1000.00

B. MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City LYNDORA State PA Zip Code 16045

Purpose of Disbursement Harrisburg 6/4

Candidate Name

GEORGE J JR J. JR. KELLY

Office Sought: [] House [X] Senate [] President

Disbursement For: 2012 [] Primary [X] General [] Other (specify) v

State: PA District: 03

Date of Disbursement

Date selection box: 05 / 31 / 2012

Transaction ID : 12773

Amount of Each Disbursement this Period

Amount selection box: 1000.00

C. MONTANANS FOR REHBERG

Mailing Address PO BOX 1597

City HELENA State MT Zip Code 59624

Purpose of Disbursement Dinner 5/17

Candidate Name

DENNIS RAY REHBERG

Office Sought: [] House [X] Senate [] President

Disbursement For: 2012 [X] Primary [] General [] Other (specify) v

State: MT District: 00

Date of Disbursement

Date selection box: 05 / 16 / 2012

Transaction ID : 12688

Amount of Each Disbursement this Period

Amount selection box: 1000.00

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

Amount selection box: 3000.00

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

Amount selection box

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. MONTANANS FOR REHBERG

Mailing Address PO BOX 1597

City HELENA State MT Zip Code 59624

Purpose of Disbursement
Lunch 5/17

011

Candidate Name

DENNIS RAY REHBERG

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2012

Transaction ID : 12696

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. NEUGEBAUER CONGRESSIONAL COMMITTEE

Mailing Address PO BOX 54175

City LUBBOCK State TX Zip Code 79453

Purpose of Disbursement
6/11 Golf Tournament

011

Candidate Name

RANDY HONORABLE NEUGEBAUER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 19

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : 12756

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. RICHMOND FOR CONGRESS

Mailing Address 1631 ELYSIAN FIELDS

City NEW ORLEANS State LA Zip Code 70126

Purpose of Disbursement
Local Event 5/29

011

Candidate Name

CEDRIC L. RICHMOND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2012

Transaction ID : 12758

Amount of Each Disbursement this Period

500.00

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

2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. STUTZMAN FOR CONGRESS

Mailing Address 0250 W 600 N

City HOWE State IN Zip Code 46746

Purpose of Disbursement
Local Event 5/14

011

Candidate Name

MARLIN A STUTZMAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	2

Transaction ID : 12675

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. THE CONGRESSMAN JOE BARTON COMMITTEE

Mailing Address P.O. BOX 1444

City ENNIS State TX Zip Code 75120

Purpose of Disbursement
Dinner 5/16

011

Candidate Name

JOE LINUS BARTON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	2

Transaction ID : 12681

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. TIM SCOTT FOR CONGRESS

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
Dinner 5/30

011

Candidate Name

TIMOTHY SCOTT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: SC District: 01

Date of Disbursement

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

Transaction ID : 12770

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

4	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0

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

4	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Full Name (Last, First, Middle Initial)

A. VERN BUCHANAN FOR CONGRESS

Mailing Address P. O. BOX 48928

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement
Lunch 6/6

011

Category/
Type

Candidate Name

VERNON BUCHANAN

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 13

Date of Disbursement

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

Transaction ID : 12771

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. WALDEN FOR CONGRESS

Mailing Address PO BOX 1091

City HOOD RIVER State OR Zip Code 97031

Purpose of Disbursement
Dinner 5/15

011

Category/
Type

Candidate Name

GREGORY P MR. WALDEN

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	2

Transaction ID : 12677

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. YARMUTH FOR CONGRESS

Mailing Address 1819 BROWNSBORO ROAD

City LOUISVILLE State KY Zip Code 40202

Purpose of Disbursement
Louisville Reception 5/21

011

Category/
Type

Candidate Name

JOHN A MR YARMUTH

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: KY District: 03

Date of Disbursement

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

Transaction ID : 12735

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

3	5	0	0	0	0	0	0	0	0
3	5	0	0	0	0	0	0	0	0

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

3	2	5	0	0	0	0	0	0	0
3	2	5	0	0	0	0	0	0	0