

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

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

FOR LINE NUMBER: PAGE 70 OF 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Health Underwriters Political Action Committee**

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

**A. Ackerman, Mark, K., ,**

Mailing Address 3700 Forest Drive  
Suite 300

City  
Columbia

State  
SC

Zip Code  
29204-4010

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : 13390142

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

**B. Berger, Stephanie, , ,**

Mailing Address 79 Daily Dr #276

City  
Camarillo

State  
CA

Zip Code  
93010-5807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Collaborative Insurance Solutions

Occupation (for Individual)  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : 13390146

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

**C. Blain, Bradford, H., ,**

Mailing Address 343 Waller Avenue  
Suite 101

City  
Lexington

State  
KY

Zip Code  
40504-2912

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2019

Transaction ID : 13390147

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

155.00