

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 189

☒ 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. Schwartz, Matt, B., ,

Mailing Address 2950 Breckenridge Lane, Suite 8

City
Louisville

State
KY

Zip Code
40220-1462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Schwartz Insurance Group

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2019

Transaction ID : 13395217

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

B. Garcia, J., Michael, ,

Mailing Address 820 Jordan Street
Suite 400

City

Shreveport

State

LA

Zip Code

71101-4522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Moreman, Moore & Co. Inc.

Occupation (for Individual)
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2019

Transaction ID : 13395221

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Crotty, Karen, R., ,

Mailing Address 67 Walnut Avenue
Suite 304

City

Clark

State

NJ

Zip Code

07066-1640

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kistler Tiffany Benefits

Occupation (for Individual)
Employee Benefits Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 08 / 2019

Transaction ID : 13395534

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

260.00