

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

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

FOR LINE NUMBER: PAGE 71 OF 189

(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. Tellesbo-Kembel, Marsha, , ,

Mailing Address 1001 4th Avenue, Suite 3200

City
Seattle

State
WA

Zip Code
98154-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tellesbo & Company

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

Transaction ID : 13445403

Amount of Each Receipt this Period

170.00

☐ Memo Item

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

B. Munger, David, , ,

Mailing Address 3312 W. Magistrate Loop

City
Hayden

State
ID

Zip Code
83835-5019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Munger Insurance

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

Transaction ID : 13445406

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Baskett, John, , ,

Mailing Address 2601C Blanding Ave #222

City
Alameda

State
CA

Zip Code
94501-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
John Baskett Insurance Services

Occupation (for Individual)
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
10 / 23 / 2019

Transaction ID : 13445408

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)..... ►

300.00