

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (In full)USE FEC MAILING LABEL
OR TYPE OR PRINTExample: If typing, type
over the lines

PacificCare Health Systems, Inc. Employees' Political Action Committee

ADDRESS (number and street)

5985 Plaza Drive, M/S CY20-536

Check if different
than previously
reported. (ACC)

Cypress

CA

90630

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00240903

3. IS THIS
REPORT

X

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
Quarterly 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)

X

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 (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the
State of

5. Covering Period

11

01

2005

through

11

30

2005

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 Janet Newport

Signature of Treasurer Electronically Filed by Janet Newport

Date 12 20 2005

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

Office
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(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PacificCare Health Systems, Inc. Employees' Political Action Committee

Report Covering the Period: From: 11 01 2005 To: 11 30 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		59185.71
(b) Cash on Hand at Beginning of Reporting Period	61076.72	
(c) Total Receipts (from Line 19)	17877.00	215718.01
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	78953.72	274903.72
7. Total Disbursements (from Line 31)	14000.00	209950.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	64953.72	64953.72
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

☒ 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. 02/2003)

Page 3

Write or Type Committee Name

PacificCare Health Systems, Inc. Employees' Political Action Committee

Report Covering the Period: From: ^M11 ⁻01 ⁻2005 To: ^M11 ⁻30 ⁻2005

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)	14870.00	130108.50
(ii) Unitemized	3007.00	62372.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ►	17877.00	192481.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ►	17877.00	192481.00
12. Transfers From Affiliated/Other Party Committees	0.00	23087.01
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	150.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17877.00	215718.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17877.00	215718.01

DETAILED SUMMARY PAGE
of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ►	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	180800.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	4500.00	29150.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14000.00	209950.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	14000.00	209950.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	17877.00	192481.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17877.00	192481.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 85

(check only one)

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

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Gregory Wright Mailing Address 13901 Mauve Drive City State Zip Code Santa Ana CA 92705 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Network Dev & Mgmt Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 248.00			Date of Receipt M / D / Y Transaction ID: PR925810312953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Lauri N Belberman Mailing Address 9819 Mistletoe Ave. City State Zip Code Fountain Valley CA 92708 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Consult-Sr Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925810912953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Robert S Brunnett Mailing Address 18308 Santa Stephana City State Zip Code Fountain Valley CA 92708 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Fin-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00			Date of Receipt M / D / Y Transaction ID: PR925811112953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 85

(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Robert Franklin Mailing Address 318 Snug Harbor City State Zip Code Newport Beach CA 92663 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Public Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2400.00 			Date of Receipt M / D / Y Transaction ID: PR925811612953 Amount of Each Receipt this Period 200.00 P/R Deduction (\$100.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Janet G Newport Mailing Address 2421 East 18Th Street #4 #4 City State Zip Code Newport Beach CA 92663 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Govt Reltns-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1440.00 			Date of Receipt M / D / Y Transaction ID: PR925812812953 Amount of Each Receipt this Period 120.00 P/R Deduction (\$60.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Glenn Terwilliger Mailing Address 29628 Woodbrook Dr. City State Zip Code Agoura Hills CA 91301 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Pricing/Underwrtng Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1935.00 			Date of Receipt M / D / Y Transaction ID: PR925813112953 Amount of Each Receipt this Period 270.00 P/R Deduction (\$135.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 590.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 85

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Steven M Tucker Mailing Address 2422 N. Eaton Ct City State Zip Code Orange CA 92867 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Govt Affairs Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1614.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925813212953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Sharon A Riccioli Mailing Address 3301 S Bear St #35R City State Zip Code Santa Ana CA 92704 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, QI-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925885712953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Alice A Kuchinakas Mailing Address 4455 Elm Av City State Zip Code Long Beach CA 90807 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Netwk Mgmt/Contracting-I Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925888812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 252.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Nancy J Monk			Date of Receipt M / D / Y	
Mailing Address 12271 Chianti Dr.			Transaction ID: PR925886712953	
City State Zip Code Los Alamitos CA 90720	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer PacificCare Health Systems Inc	Occupation VP, Govt Reltns-II	P/R Deduction (\$50.00 Bi-Weekly)		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00			
Full Name (Last, First, Middle Initial) B. Heather M Mace-Meador			Date of Receipt M / D / Y	
Mailing Address 13531 Carlton Oaks			Transaction ID: PR925887712953	
City State Zip Code San Antonio TX 78232	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00	
Name of Employer PacificCare Health Systems Inc	Occupation Dir, Appeals-II	P/R Deduction (\$40.00 Bi-Weekly)		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00			
Full Name (Last, First, Middle Initial) C. Kathie L Bryan			Date of Receipt M / D / Y	
Mailing Address 912 Joshua Place			Transaction ID: PR925888412953	
City State Zip Code San Diego CA 92154	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer PacificCare Health Systems Inc	Occupation Consult-Sr	P/R Deduction (\$25.00 Bi-Weekly)		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			

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)
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FOR LINE NUMBER: PAGE 10 / 85
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) William Cunningham, MD Mailing Address 28321 Cannes City State Zip Code Mission Viejo CA 92692 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Inc Dir, Med Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR925888712953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Pamela S Leal Mailing Address 8371 Clarkdale City State Zip Code Huntington Beach CA 92646 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Inc Dir, Netwk Mgmt/Contracting-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR925888912953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Bruce B Falk Mailing Address 530 Orpheus Avenue City State Zip Code Encinitas CA 92024 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Inc Dir, Pharm Svc-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR924554212953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)

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)
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FOR LINE NUMBER: PAGE 11 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Craig E Winkler			Date of Receipt M / D / Y	
Mailing Address 4320 Myrtle Ave			Transaction ID: PR924555412953	
City Long Beach	State CA	Zip Code 90807	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Actuarial II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)	
B. Full Name (Last, First, Middle Initial) Linda D Whalton			Date of Receipt M / D / Y	
Mailing Address 815 South Race Street			Transaction ID: PR825367512953	
City Denver	State CO	Zip Code 80209	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Risk Mgmt		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)	
C. Full Name (Last, First, Middle Initial) Diana S Pate			Date of Receipt M / D / Y	
Mailing Address 9207 NE 44th Avenue			Transaction ID: PR825071112953	
City Vancouver	State WA	Zip Code 98685	Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation Mgr, Clin Ops		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 288.00	P/R Deduction (\$12.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) 84.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 85
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Brendan Baker Full Name (Last, First, Middle Initial) Mailing Address 9183 E. Mountain Springs Road City State Zip Code Scottsdale AZ 85255 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Region Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 860.00 Date of Receipt M / D / Y Transaction ID: PR925845112953 Amount of Each Receipt this Period 80.00 P/R Deduction (\$40.00 Bi-Weekly)		
B. Fredric S Edwards Full Name (Last, First, Middle Initial) Mailing Address 8062 Bestel Ave. City State Zip Code Garden Grove CA 92644 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Proj Mgr-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 288.00 Date of Receipt M / D / Y Transaction ID: PR824820912953 Amount of Each Receipt this Period 24.00 P/R Deduction (\$12.00 Bi-Weekly)		
C. Ronald R Stettler Full Name (Last, First, Middle Initial) Mailing Address 602B Scotmist Dr City State Zip Code RanchoPalosVerdes CA 90275 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Med Economics Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Date of Receipt M / D / Y Transaction ID: PR825232012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) 124.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 / 85
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) <u>Martin Sing</u>			Date of Receipt M / D / Y	
Mailing Address <u>9407 Llano Verde</u>			Transaction ID: <u>PR925212012953</u>	
City <u>Helotes</u>	State <u>TX</u>	Zip Code <u>78023</u>	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <u>C</u>				
Name of Employer PacifiCare Health Systems Inc		Occupation Dir, Cust Svc Ctr-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)	
B. Full Name (Last, First, Middle Initial) <u>Wandy W Kuran</u>			Date of Receipt M / D / Y	
Mailing Address <u>3302 Druid Lane</u>			Transaction ID: <u>PR925232612953</u>	
City <u>Los Alamitos</u>	State <u>CA</u>	Zip Code <u>90720</u>	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <u>C</u>				
Name of Employer PacifiCare Health Systems Inc		Occupation VP, Mktg		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)	
C. Full Name (Last, First, Middle Initial) <u>James Frey</u>			Date of Receipt M / D / Y	
Mailing Address <u>28621 Stetson Pl</u>			Transaction ID: <u>PR924695512953</u>	
City <u>Laguna Hills</u>	State <u>CA</u>	Zip Code <u>92653</u>	Amount of Each Receipt this Period 384.00	
FEC ID number of contributing federal political committee. <u>C</u>				
Name of Employer PacifiCare Health Systems Inc		Occupation EVP, Major Accounts		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 4608.00	P/R Deduction (\$192.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) 444.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 14 / 85

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Sandra R Glickman Mailing Address 13622 Sioux Rd City State Zip Code Westminster CA 92683 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Clin/Util Mgmt-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925262312953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Jeannine B Ruffner Mailing Address 21723 Lawrey Drive City State Zip Code San Antonio TX 78258 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Netwk Mgmt/Contracting-I Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00			Date of Receipt M / D / Y Transaction ID: PR824836412953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Kristina Courmeyer Mailing Address 1019 Campanile City State Zip Code Newport Beach CA 92660 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Fin-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR825337312953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Scott A Neururer			Date of Receipt M / D / Y	
Mailing Address 9852 Silvette Drive			Transaction ID: PR924778112953	
City Cypress	State CA	Zip Code 90630	Amount of Each Receipt this Period 96.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$48.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Ops	Aggregate Year-to-Date ▼ 1152.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Edward C Gynens			Date of Receipt M / D / Y	
Mailing Address 866 SandCastle			Transaction ID: PR825277912953	
City Corona Del Mar	State CA	Zip Code 92625	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Stop Loss	Aggregate Year-to-Date ▼ 1200.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Tyler J Mason			Date of Receipt M / D / Y	
Mailing Address P O Box 2083			Transaction ID: PR824583912953	
City Cypress	State CA	Zip Code 90630	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, PR	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 216.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 85

(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Shari R Singleton			Date of Receipt M / D / Y	
Mailing Address 8902 S 39th W Ave			Transaction ID: PR924565212953	
City Tulsa	State OK	Zip Code 74132	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Regltry Affairs		P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		
B. Full Name (Last, First, Middle Initial) Patrick J Contrada			Date of Receipt M / D / Y	
Mailing Address 1726 Farwood Court			Transaction ID: PR924550912953	
City Oceanside	State CA	Zip Code 92054	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Mgr, Pharm Audit		P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		
C. Full Name (Last, First, Middle Initial) Sharon L Hubert			Date of Receipt M / D / Y	
Mailing Address 3215 Locust Avenue			Transaction ID: PR924895612953	
City Long Beach	State CA	Zip Code 90807	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Assoc General Counsel		P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) 70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) David S Carlson Mailing Address 13130 Westport St. City Moorpark State CA Zip Code 93021 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Resrch & Mktg Anlys Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR924897712953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Michael S Hull Mailing Address 32 Santa Sophia City Rancho Santa Marga State CA Zip Code 92688 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Busn Mgr (Mid) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR924897812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Austin T Pittman Mailing Address 3109 Spur Trail City Dallas State TX Zip Code 75234 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, GM-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1515.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR924914012953 Amount of Each Receipt this Period 270.00 P/R Deduction (\$135.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 85

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Marilyn A O'Brien Mailing Address 8207 Surfcoave Cir City State Zip Code Huntington Beach CA 92648 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Sales & Svc Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR924568212953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Doris F Mass Mailing Address 850 E Ocean Blvd #1208 City State Zip Code Long Beach CA 90802 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Acct Mgr-Sr (MA) Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR924568612953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Karen L Williams Mailing Address 5551 Selkirk Drive City State Zip Code Huntington Beach CA 92649 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, HR-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 960.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR924872512953 Amount of Each Receipt this Period 80.00 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Leslie J Carter			Date of Receipt M / D / Y	
Mailing Address 19021 Poppy Hill Circle			Transaction ID: PR925028712953	
City Huntington Beach	State CA	Zip Code 92648	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$96.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Network Dev & Mgmt Ops	Aggregate Year-to-Date ▼ 1584.00	
Receipt For: Primary General Other (specify) ▼				

B. Full Name (Last, First, Middle Initial) Laura D Hangelier			Date of Receipt M / D / Y	
Mailing Address 521D Torrance Blvd.			Transaction ID: PR824916412953	
City Torrance	State CA	Zip Code 90503	Amount of Each Receipt this Period 32.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$16.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Consult-Sr	Aggregate Year-to-Date ▼ 384.00	
Receipt For: Primary General Other (specify) ▼				

C. Full Name (Last, First, Middle Initial) Michael R Henderson			Date of Receipt M / D / Y	
Mailing Address 24 Camino Manzano			Transaction ID: PR825771312953	
City Placitas	State NM	Zip Code 87043	Amount of Each Receipt this Period 270.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$135.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation SVP, Finance	Aggregate Year-to-Date ▼ 2655.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 494.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) William H Olson Mailing Address 36 Honey Hill Road City State Zip Code Orinda CA 94563 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Med Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925057612953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Robert M Burchuk Mailing Address 23522 Califa St City State Zip Code Woodland Hills CA 91367 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Hlth Svc-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1614.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR824818712953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Anne P Harvey Mailing Address 491B Thor Way City State Zip Code Camichael CA 95608 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Mgr, Network Mgmt/Ops Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR825747212953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 232.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 21 / 85

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Gregory A Gregson Mailing Address 913 Pinecrest Dr City Richardson State TX Zip Code 75080 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Analyst, Sys-III Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 			Date of Receipt M / D / Y Transaction ID: PR925772512953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Randell J Correia Mailing Address P.O. Box 1025 City Rancho Santa Fe State CA Zip Code 92067 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Pharm Mail Svc Ops Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 720.00 			Date of Receipt M / D / Y Transaction ID: PR925774012953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Jon W Waashtek Mailing Address 5407 Emporia Av City Culver City State CA Zip Code 90230 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Tax Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 			Date of Receipt M / D / Y Transaction ID: PR925775312953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

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)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Jennifer J Block Mailing Address 120 Granada Ave City Long Beach State CA Zip Code 90803 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Consult Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925716312953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Edward M Feaver Mailing Address 8 Leatherwood Court City Coto De Caza State CA Zip Code 92673 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Pres, Busn Unit-II Aggregate Year-to-Date ▼ 720.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925816912953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) John D Jones Mailing Address 3562 Redwood City Irvine State CA Zip Code 92603-2124 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation VP, Govt Affairs Aggregate Year-to-Date ▼ 1614.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925817012953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)

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)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Joe L Guinn Mailing Address 201 W. Edgewater Terr City State Zip Code New Braunfels TX 78130 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Govt Reltns Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1440.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR925820712953 Amount of Each Receipt this Period 120.00 P/R Deduction (\$60.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Susan L Berkel Mailing Address 10 Shadow Glen City State Zip Code Irvine CA 92620-0204 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Finance Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4808.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR925862312953 Amount of Each Receipt this Period 384.00 P/R Deduction (\$192.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Martyn D Dryseh Mailing Address 25 Blackbird Lane City State Zip Code Aliso Viejo CA 92654 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Chief of Staff Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 990.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR925863712953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 604.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Patti Tucker Mailing Address 16815 Wanderly Lane City State Zip Code Huntington Beach CA 92649 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Sales & Svc-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1584.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925889312953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Tim K Yee Mailing Address 11 Regents City State Zip Code Newport Beach CA 92660 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Actuarial II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925889412953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Cheryl Tanigawa, MD Mailing Address 559B Naples Canal City State Zip Code Long Beach CA 90803 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Hlth Svc-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 704.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925889512953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **312.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Michael J Chiaradit			Date of Receipt M / D / Y	
Mailing Address 4705 Arcola Av			Transaction ID: PR925889712953	
City Toluca Lake	State CA	Zip Code 91602	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Sales & Svc-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	P/R Deduction (\$10.00 Bi-Weekly)	
B. Full Name (Last, First, Middle Initial) Pamela A Puelz			Date of Receipt M / D / Y	
Mailing Address 12242 Blackmer St			Transaction ID: PR925890912953	
City Garden Grove	State CA	Zip Code 92645	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation VP, HR-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)	
C. Full Name (Last, First, Middle Initial) Sharon Bottini			Date of Receipt M / D / Y	
Mailing Address 3841 S. Greythorne Way			Transaction ID: PR925891112953	
City Chandler	State AZ	Zip Code 85248	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation VP, Cust Svc Ctr-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) 100.00

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Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Debra Althouse Mailing Address 2856 Calle Guadalajara City San Clemente State CA Zip Code 92673 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation VP, Sales & Mktg-II Aggregate Year-to-Date ▼ 860.00			Date of Receipt M / D / Y Transaction ID: PR925891512953 Amount of Each Receipt this Period 80.00 P/R Deduction (\$40.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Susan A Linde Mailing Address 9845 Joel Circle City Cypress State CA Zip Code 90630-3912 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Proj Mgr-III Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925891812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Kevin C Hoskins Mailing Address 191B E. Diamond Drive City Tempe State AZ Zip Code 85283 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Analyst, Fin-Prin Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925838012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) <u>Bharat V Patel</u>			Date of Receipt M / D / Y	
Mailing Address <u>10251 Sherwood Cir</u>			Transaction ID: <u>PR925841312953</u>	
City <u>Villa Park</u>	State <u>CA</u>	Zip Code <u>92861</u>	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <u>C</u>			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer <u>PacificCare Health Systems Inc</u>		Occupation <u>VP, Tax</u>	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) <u>Madeline L Haden</u>			Date of Receipt M / D / Y	
Mailing Address <u>8302 Hill Rock Dr.</u>			Transaction ID: <u>PR925885112953</u>	
City <u>Round Rock</u>	State <u>TX</u>	Zip Code <u>78681</u>	Amount of Each Receipt this Period 38.00	
FEC ID number of contributing federal political committee. <u>C</u>			P/R Deduction (\$19.00 Bi-Weekly)	
Name of Employer <u>PacificCare Health Systems Inc</u>		Occupation <u>Dir, Reglry Affairs-II</u>	Aggregate Year-to-Date ▼ 458.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) <u>Edward R Jones</u>			Date of Receipt M / D / Y	
Mailing Address <u>2234 Veteran Ave.</u>			Transaction ID: <u>PR925885212953</u>	
City <u>Los Angeles</u>	State <u>CA</u>	Zip Code <u>90064</u>	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <u>C</u>			P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer <u>PacificCare Health Systems Inc</u>		Occupation <u>VP, Med Mgmt</u>	Aggregate Year-to-Date ▼ 1170.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 178.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Wayne I Miller			Date of Receipt M / D / Y	
Mailing Address 19521 Sierra Soto Rd			Transaction ID: PR925885512953	
City Inver	State CA	Zip Code 92603	Amount of Each Receipt this Period 140.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$70.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Client Mgmt	Aggregate Year-to-Date ▼ 1350.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Kevin R. Morell			Date of Receipt M / D / Y	
Mailing Address P.O. Box 5070			Transaction ID: PR925885612953	
City Huntington Beach	State CA	Zip Code 92615-5070	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Consult-Sr	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Scott Kalm			Date of Receipt M / D / Y	
Mailing Address 15241 Shadow Mountain Ranch Rd			Transaction ID: PR925886312953	
City Larkspur	State CO	Zip Code 80118	Amount of Each Receipt this Period 78.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$39.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Network Dev & Mgmt	Aggregate Year-to-Date ▼ 938.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 258.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Bradford A Bowles Mailing Address 3 Ocean Ridge City State Zip Code Newport Coast CA 92657 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Pres, CEO Hlth Plans Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 4560.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925807312953 Amount of Each Receipt this Period 380.00 P/R Deduction (\$180.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Gregory W Scott Mailing Address 24 Inverness Lane City State Zip Code Newport Beach CA 92660 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 720.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925605112953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Carol A Seacola Mailing Address 6093 Trinidad Ave City State Zip Code Cypress CA 90630 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Sales Assoc (Mid) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR925894912953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. David H Booher			Date of Receipt M / D / Y	
Mailing Address 14812 Smmr Breeze W/y			Transaction ID: PR925895812953	
City San Diego	State CA	Zip Code 92128	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Mgr, Pharm Ops	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Cheryl J Randolph			Date of Receipt M / D / Y	
Mailing Address 212 Via Alcanoe			Transaction ID: PR925827512953	
City Palos Verdes Estat	State CA	Zip Code 90274	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Proj Mgr-IV	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Garnet WHO			Date of Receipt M / D / Y	
Mailing Address 422D Ocean Dr			Transaction ID: PR925853112953	
City Manhattan Beach	State CA	Zip Code 90288	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$100.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation EVP, Chief Medical Officer	Aggregate Year-to-Date ▼ 2400.00	
Receipt For: Primary General Other (specify) ▼				

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)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Michael S Malory Mailing Address 1195 Lorain Road City San Marino State CA Zip Code 91108 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Sales & Svc-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1248.00		Date of Receipt M / M / Y Y Y Y Transaction ID: PR925853412953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Linda M Dayan Mailing Address 5364 E. Abbeyfield St City Long Beach State CA Zip Code 90815-3023 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Corp Finance & Planning Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 458.00		Date of Receipt M / M / Y Y Y Y Transaction ID: PR925854812953 Amount of Each Receipt this Period 38.00 P/R Deduction (\$19.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Harold Costa Mailing Address 8112 Sapphire Bay Circle City Las Vegas State NV Zip Code 89128 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Hlth Svc-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1200.00		Date of Receipt M / M / Y Y Y Y Transaction ID: PR925856212953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 330.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Katherine F Feeny Mailing Address 25 Sparrowhawk City State Zip Code Irvine CA 92612 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation EVP, Senior Solutions Aggregate Year-to-Date ▼ 4608.00			Date of Receipt M / D / Y Transaction ID: PR925856412953 Amount of Each Receipt this Period 384.00 P/R Deduction (\$192.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Carol A Black Mailing Address 4167 Andros Circle Box 622 City State Zip Code Huntington Beach CA 92649 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation SVP, HR Aggregate Year-to-Date ▼ 1152.00			Date of Receipt M / D / Y Transaction ID: PR925856612953 Amount of Each Receipt this Period 96.00 P/R Deduction (\$48.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Gloria S Owens Mailing Address 416 Ave G #6 City State Zip Code Redondo Beach CA 90277 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Consult-Sr Aggregate Year-to-Date ▼ 480.00			Date of Receipt M / D / Y Transaction ID: PR925857112953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Terri Maraccino Mailing Address 22821 Belquest Dr. City State Zip Code Lake Forest CA 92630 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Occupation Prog Mgr-IV Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925857812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Brian Jeffrey Mailing Address 5471 Catowba Lane City State Zip Code Irvine CA 92603 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Occupation VP, Network Dev & Mgt Strategy Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 525.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925858212953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Ronald W Jordan Mailing Address 207 Furr Dr City State Zip Code San Antonio TX 78201 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Occupation Mgr, Operations-Cust Svc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925003912953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Linda M Hase			Date of Receipt M / D / Y	
Mailing Address 12371 Vicksburg Circle			Transaction ID: PR925688912953	
City Los Alamitos	State CA	Zip Code 90720	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Supv. Operations-Claims	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Jennifer J Marlin			Date of Receipt M / D / Y	
Mailing Address 817 1/2 Marigold Ave			Transaction ID: PR825746212953	
City Corona Del Mar	State CA	Zip Code 92625	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Prog Mgr-IV	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Jerome M Vaccaro M.D.			Date of Receipt M / D / Y	
Mailing Address 2122 Century Park Ln #203			Transaction ID: PR824911112953	
City Century City	State CA	Zip Code 90067	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Pres. Busn Unit-II	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Annette K Parsons Mailing Address 21541 Saint John Ln City State Zip Code Huntington Beach CA 92646 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Prog Mgr-IV Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925209212953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Andrew R Lies Mailing Address 1205 Greenpark City State Zip Code Plano TX 75075 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Dir, Busn Ops/Improve-II Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925210012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Eugene J Rapleard Mailing Address 7360 Weatherly Pl City State Zip Code Rancho Cucum CA 91730 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Dir, Sales & Svc-II Aggregate Year-to-Date ▼ 360.00			Date of Receipt M / D / Y Transaction ID: PR925398212953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 70.00

TOTAL This Period (last page this line number only)

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Mary C Acoris Mailing Address P.O. Box 29613 City State Zip Code San Antonio TX 78229 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Mgr, Office Svc Ops Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 720.00 			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925824612953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Michael J Reddy Mailing Address 2701 E. Woodacre City State Zip Code Brea CA 92621 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Cust Svc Ctr-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1568.00 			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925826512953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Elizabeth F San Filippo, Hays Mailing Address 19131 Tigerfish Cir City State Zip Code Huntington Beach CA 92648 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Regltry Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR925826812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

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

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Bradley M Fluit			Date of Receipt M / D / Y	
Mailing Address 108 North Rolling Oaks			Transaction ID: PR925892312953	
City San Antonio	State TX	Zip Code 78253	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$30.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Info Tech	Aggregate Year-to-Date ▼ 720.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Kenneth R Davis			Date of Receipt M / D / Y	
Mailing Address 764D N 10Th Ave			Transaction ID: PR925892412953	
City Phoenix	State AZ	Zip Code 85021	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Med	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Robert A Friedman			Date of Receipt M / D / Y	
Mailing Address 24336 La Masina Ct.			Transaction ID: PR925893612953	
City Calabasas	State CA	Zip Code 91302	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Busn Mgr-Sr (Mid)	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. James G Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 800B Bridge Street City North Richland Hill State TX Zip Code 76180 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Prog Mgr-IV Aggregate Year-to-Date ▼ 720.00			Date of Receipt M / D / Y Transaction ID: PR925893912953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
B. Michael G Lammers Full Name (Last, First, Middle Initial) Mailing Address 1452 S Ellsworth Rd #3D80 City Mesa State AZ Zip Code 85209 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Anlyst, Sys-Prin Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR925894312953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Paul R Miller Full Name (Last, First, Middle Initial) Mailing Address 903 Firmona City Redondo Beach State CA Zip Code 90278 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation VP, CFO-II Aggregate Year-to-Date ▼ 458.00			Date of Receipt M / D / Y Transaction ID: PR925894512953 Amount of Each Receipt this Period 38.00 P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 118.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Jennifer L Veasey			Date of Receipt M / M / Y Y Y Y	
Mailing Address 3700 S Plaza Dr #B 112			Transaction ID: PR925489112953	
City Santa Ana	State CA	Zip Code 92704	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$30.00 Bi-Weekly)	
Name of Employer PacifiCare Health Systems Inc		Occupation Proj Mgr-II	Aggregate Year-to-Date ▼ 720.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Adriana R Kingman			Date of Receipt M / M / Y Y Y Y	
Mailing Address 1209E Cottonwood Ln			Transaction ID: PR925154812953	
City Phoenix	State AZ	Zip Code 85048	Amount of Each Receipt this Period 72.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$36.00 Bi-Weekly)	
Name of Employer PacifiCare Health Systems Inc		Occupation Dir, Cust Svc Ctr	Aggregate Year-to-Date ▼ 864.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Peter W McKinley			Date of Receipt M / M / Y Y Y Y	
Mailing Address 6212 Oakbrook Circle			Transaction ID: PR925650712953	
City Huntington Beach	State CA	Zip Code 92648	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$75.00 Bi-Weekly)	
Name of Employer PacifiCare Health Systems Inc		Occupation SVP, Network Dev & Mgmt	Aggregate Year-to-Date ▼ 1800.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶ 282.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 85

(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Jeff S Duncum Mailing Address 24952 Oxford Drive City State Zip Code Laguna Niguel CA 92677 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Fin-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 660.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928472412953 Amount of Each Receipt this Period 80.00 P/R Deduction (\$40.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Daniel P Cadriel Mailing Address 701D W. Aurora Dr. City State Zip Code Glendale AZ 85308 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Busn Mgr-Sr (Mid) Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928481612953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Edward D Yarbrough Mailing Address 8271 Cherrywood Circle City State Zip Code Huntington Beach CA 92648 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Investor Reltns Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928497312953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Lee A Zambrano			Date of Receipt M / D / Y	
Mailing Address 2904 E. 2nd Street			Transaction ID: PR928513712953	
City Long Beach	State CA	Zip Code 90803	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Consult-Sr	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Julie A Kizior			Date of Receipt M / D / Y	
Mailing Address 11832 Martha Ann Drive			Transaction ID: PR928581512953	
City Los Alamitos	State CA	Zip Code 90720	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Assoc. Clin Info-III	Aggregate Year-to-Date ▼ 400.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) William Y Mickle			Date of Receipt M / D / Y	
Mailing Address 8 Durango Court			Transaction ID: PR928630712953	
City Aliso Viejo	State CA	Zip Code 92654	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Ops	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				

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)
or each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Jill V Selby			Date of Receipt M / D / Y Y Y Y	
Mailing Address 8082 Thor Drive			Transaction ID: PR928634212953	
City State Zip Code Huntington Beach CA 92647			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Prod Dvlp/Mgmt-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)	
Full Name (Last, First, Middle Initial) B. Joel R Graves			Date of Receipt M / D / Y Y Y Y	
Mailing Address 8 Twilight Bluff			Transaction ID: PR928645312953	
City State Zip Code Newport Coast CA 92657			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation VP, Sales & Svc-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)	
Full Name (Last, First, Middle Initial) C. Angela M Acres			Date of Receipt M / D / Y Y Y Y	
Mailing Address 480B E 142nd Place			Transaction ID: PR928645912953	
City State Zip Code Bixby OK 74008			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PacificCare Health Systems Inc		Occupation Mgr, Acct Mgmt (Mid)		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)

PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Elizabeth M McDonnell Mailing Address 13173 Pacif Promenade #115 City State Zip Code Playa Vista CA 90094 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Occupation VP, Branding & Advertising Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 456.00		Date of Receipt M / M / Y Y Y Y Transaction ID: PR928650812953 Amount of Each Receipt this Period 38.00 P/R Deduction (\$19.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Rita A Woodruff Mailing Address 13698 S Poplar St City State Zip Code Glenpool OK 74033 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Occupation Pharmacist, Clin Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00		Date of Receipt M / M / Y Y Y Y Transaction ID: PR928654712953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) William J Kelley Mailing Address 4040 Chestnut Ave. City State Zip Code Long Beach CA 90807 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Occupation VP, Sales & Svc-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00		Date of Receipt M / M / Y Y Y Y Transaction ID: PR928658512953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 98.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) John H Van Horn Mailing Address 5 Mandrin City State Zip Code Irvine CA 92604 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Network Dev & Mgmt Aggregate Year-to-Date ▼ Receipt For: Primary General Other (specify) ▼ 720.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928689212953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Gregg R Redkovic Mailing Address 803 Corte Calmo City State Zip Code San Clemente CA 92673 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Sales & Svc-II Aggregate Year-to-Date ▼ Receipt For: Primary General Other (specify) ▼ 1200.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR9286895612953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) David M Hansen Mailing Address 206 Via Sedona City State Zip Code San Clemente CA 92673 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Sales & Svc Aggregate Year-to-Date ▼ Receipt For: Primary General Other (specify) ▼ 1215.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR9286896412953 Amount of Each Receipt this Period 270.00 P/R Deduction (\$135.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Arnold C Paulson Mailing Address 5127 E El Roble St City State Zip Code Long Beach CA 90815 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR928711612953 Amount of Each Receipt this Period 38.00 P/R Deduction (\$19.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Marilyn D Sayers Mailing Address 8485 Wayfinders Ct City State Zip Code Carlsbad CA 92009 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR928723012953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) David J Milligan Mailing Address 21085 Ashley Lane City State Zip Code Lake Forest CA 92630 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR928726812953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) 118.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Bridget C Harper Mailing Address 2318 Penmar Ave. City State Zip Code Venice CA 90291 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928730512953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Deborah A Sales Mailing Address 2405 E Dana Ave City State Zip Code Orange CA 92667 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928757612953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Kathleen M Kanne Mailing Address 43 Barbados City State Zip Code Aliso Viejo CA 92654 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928763512953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) 292.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Isaac J Brown Mailing Address 2381 Moonridge Cir. City Corona State CA Zip Code 92879 FEC ID number of contributing federal political committee. C Name of Employer: PacifiCare Health Systems Inc Occupation: Dir, Underwrtng-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928767412953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Donna J Densie Mailing Address 155B SW Cloverdale Way City Aloha State OR Zip Code 97006 FEC ID number of contributing federal political committee. C Name of Employer: PacifiCare Health Systems Inc Occupation: Mgr, Facilities Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928771912953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Robert M Thompson Mailing Address 4181 E Sand Hill Ln City Highlands Ranch State CO Zip Code 80128 FEC ID number of contributing federal political committee. C Name of Employer: PacifiCare Health Systems Inc Occupation: Acct Exec-Sr (SG) Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928805112953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 80.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Paul Bihm			Date of Receipt M / M / Y Y Y Y	
Mailing Address 703 1/2 Marguerite Ave			Transaction ID: PR928806212953	
City	State	Zip Code	Amount of Each Receipt this Period	
Corona del Mar	CA	92625	100.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Business Dvlp	Aggregate Year-to-Date ▼	
Receipt For: Primary General Other (specify) ▼		1200.00		
B. Full Name (Last, First, Middle Initial) Diana G Robertson			Date of Receipt M / M / Y Y Y Y	
Mailing Address 5831 Heather View			Transaction ID: PR928806912953	
City	State	Zip Code	Amount of Each Receipt this Period	
San Antonio	TX	78249	20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Proj Mgr-II	Aggregate Year-to-Date ▼	
Receipt For: Primary General Other (specify) ▼		240.00		
C. Full Name (Last, First, Middle Initial) Carolyn M Seebolt			Date of Receipt M / M / Y Y Y Y	
Mailing Address 14042 Fair Oak Crossing			Transaction ID: PR928810212953	
City	State	Zip Code	Amount of Each Receipt this Period	
San Antonio	TX	78231	32.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$16.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Dir, QI-II	Aggregate Year-to-Date ▼	
Receipt For: Primary General Other (specify) ▼		384.00		

SUBTOTAL of Receipts This Page (optional) **152.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Colleen Campbell Mailing Address 2525 Arapahoe PMB 251 #E4 City State Zip Code Boulder CO 80302 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Dir, QI Aggregate Year-to-Date ▼ 360.00			Date of Receipt M / D / Y Transaction ID: PR928818512953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Charles E Lewis Mailing Address 7417 S Lafayette Cr East City State Zip Code Littleton CO 80122 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Mgr, Field Sales (Sr Sol) Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR928827812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Agnes Beyer Mailing Address 5403 W. Westberry City State Zip Code San Antonio TX 78228 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Mgr, Operations-MAS Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR928828812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) **70.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
or each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) David L Sachau Mailing Address 426B1 Ricki Dr City State Zip Code Parker CO 80138 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Acct Mgr-Sr (Mid) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928846012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Cynthia A Kunkel Mailing Address 285D S Dillon St City State Zip Code Aurora CO 80014 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Acct Mgr-Sr (Mid) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928846312953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Donna L Huber Mailing Address 406 Skytrail Dr. City State Zip Code New Braunfels TX 78130 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Supv, Operations-Claims Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928850112953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Miguel Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 8454 Silver Mesa Dr., Apt F City State Zip Code Highlands Ranch CO 80130 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Busn Mgr (Mid) Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928852412953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
B. Pauline M Hayes Full Name (Last, First, Middle Initial) Mailing Address 2706 Bourbon Street City State Zip Code Orange CA 92665 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Proj Mgr-IV Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928864412953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Steven D Young Full Name (Last, First, Middle Initial) Mailing Address 18401 Blue Bonnet Dr. City State Zip Code Parker CO 80134 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Acct Exec-Sr (SG) Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928868012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Lois B Norket Mailing Address 13806 Ridge Farm City San Antonio State TX Zip Code 78230 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR928870112953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Christina C Cooper Mailing Address 19351 E Berry Pl City Aurora State CO Zip Code 80015 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR828880812953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Lori S Wolfe Mailing Address 17118 Granger Patch City San Antonio State TX Zip Code 78247 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR828886312953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		

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)
or each category of the
Detailed Summary Page

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Donna L Debner Mailing Address 1727 Aspen Ridge City State Zip Code San Antonio TX 78248 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Cust Svc Ctr-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928887712953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Tiffany L Boretkin Mailing Address 3321 Alabama Circle City State Zip Code Costa Mesa CA 92626 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Sales Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928899512953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) James F Morpheus Mailing Address 23505 Bant Oak Court City State Zip Code Parker CO 80138 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Info Tech-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR928904012953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 140.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Lynda A Pearson Mailing Address 3924 E. Garnet Pl. City State Zip Code Highlands Ranch CO 80126 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Prog Mgr-I Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Date of Receipt M / D / Y Y Y Y Y Transaction ID: PR928907412953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Brian L Gray Mailing Address 729 Emerson City State Zip Code Denver CO 80218 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Region Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1752.00 Date of Receipt M / D / Y Y Y Y Y Transaction ID: PR928930912953 Amount of Each Receipt this Period 146.00 P/R Deduction (\$73.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Virginia K McCabe Mailing Address 1482 Lily St. City State Zip Code El Cajon CA 92021-3531 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Assoc Acct Mgr (Mid) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Date of Receipt M / D / Y Y Y Y Y Transaction ID: PR928938212953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) ▶ 246.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Jacqueline M Tyska Full Name (Last, First, Middle Initial) Mailing Address 14074 Mercado Dr. City State Zip Code Del Mar CA 92014 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Inc Mgr, HDA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR928943812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Michael E Clark Full Name (Last, First, Middle Initial) Mailing Address 754D E Bubea City State Zip Code Scottsdale AZ 85255 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Inc VP, Sales & Mktg-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1200.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR928990712953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
C. Jon D Beatty Full Name (Last, First, Middle Initial) Mailing Address 13086 S E Scenic Ridge Rd City State Zip Code Clackamas OR 97015 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Inc Mgr, Medical Mgmt Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR929012912953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **140.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Camlien Q Tsai Mailing Address 117 Monticello City State Zip Code Irvine CA 92620 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR929021112953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Mary R Teylan Mailing Address 11948 E 186Th St City State Zip Code Artesia CA 90701 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR929021412953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Timothy L Clark Mailing Address 813 Kallin Ave. City State Zip Code Long Beach CA 90815-5005 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR929024212953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) 80.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) LeeAnn B Vinson Mailing Address 18003 Cerca Azul Dr City San Antonio State TX Zip Code 78254 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Mgr, Operations-MAS Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR929056212953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Joseph A Zimmerman Mailing Address 8811 Braun Valley City San Antonio State TX Zip Code 78254 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Dir, Cust Svc Ctr-II Aggregate Year-to-Date ▼ 600.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR929060812953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Athea Barber-Smith Mailing Address 3442 Alderly Lane City Orange State CA Zip Code 92667 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation VP, Med Mgmt Appeals & Griev Aggregate Year-to-Date ▼ 480.00			Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR929081012953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) **110.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Wendy E Sack Full Name (Last, First, Middle Initial) Mailing Address 5521 Ridgebury Dr City State Zip Code Huntington Beach CA 92649 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Underwriting Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00			Date of Receipt M / D / Y Transaction ID: PR929088112953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
B. Maria C Gonzalez Full Name (Last, First, Middle Initial) Mailing Address 14111 Parkhurst City State Zip Code San Antonio TX 78232 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Mgr, Medical Mgmt Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR829110512953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Alonzo Sanchez Full Name (Last, First, Middle Initial) Mailing Address 841 Vicksburg Ln City State Zip Code Burleson TX 76028 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Acct Mgr (Mid) Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / D / Y Transaction ID: PR829171812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 80.00

TOTAL This Period (last page this line number only)

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Use separate schedule(s)
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13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Rosemary Wood Mailing Address 4917 Weyland Drive City State Zip Code Hurst TX 76053-3816 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Dir, Sales & Svc Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 720.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929176112953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Danny Sanchez Mailing Address 811 Creekbend CT. City State Zip Code Mesquite TX 75149 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems VP, HR-II Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929247212953 Amount of Each Receipt this Period 25.00 P/R Deduction (\$12.50 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) David DeGraaf Mailing Address 5264 S Hoyt St City State Zip Code Littleton CO 80123 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacifiCare Health Systems Dir, Sales & Svc Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929253012953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Tara M Dungen Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 691354 City San Antonio State TX Zip Code 78269 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Supv-V/Team Ldr-V Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt Transaction ID: PR929261812953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
B. Keith E Nygard Full Name (Last, First, Middle Initial) Mailing Address 372 1/2 Newport Ave City Long Beach State CA Zip Code 90814 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Mgr, HDA Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00		Date of Receipt Transaction ID: PR929302312953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
C. Patrick A Anderson Full Name (Last, First, Middle Initial) Mailing Address 8702 Luss Drive City Huntington Beach State CA Zip Code 92648 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Contract-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt Transaction ID: PR929431512953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 80.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Jeffrey S Mason Mailing Address 587D Sherridan St City State Zip Code La Verne CA 91750 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Med Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 360.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929440012953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Raynes D Andrews Mailing Address 2323 Creekside Bend City State Zip Code San Antonio TX 78259 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Dir, Cust Svc Ctr-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 720.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929460112953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Cassandra M Loeh Mailing Address 14025 Riverside Drive, Unit 4 City State Zip Code Sherman Oaks CA 91423 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Chief of Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 884.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929536112953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 282.00

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) William G Connolly			Date of Receipt M / D / Y	
Mailing Address 24822 Birdie Ridge			Transaction ID: PR929554012953	
City San Antonio	State TX	Zip Code 78258	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$96.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Cust Svc Ctr-II	Aggregate Year-to-Date ▼ 1584.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) George M Young			Date of Receipt M / D / Y	
Mailing Address 16363 E. Fremont Ave.			Transaction ID: PR929613412953	
City Aurora	State CO	Zip Code 80016	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Netwk Mgmt/Contracting-II	Aggregate Year-to-Date ▼ 380.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) John W Whalley			Date of Receipt M / D / Y	
Mailing Address 5752 Madrid Lane			Transaction ID: PR929618612953	
City Long Beach	State CA	Zip Code 90814	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Sales & Svc	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 85
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Loy A Sudeman Mailing Address 9512 17th Ave NW City State Zip Code Seattle WA 98117 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Inc Dir, Netwk Mgmt/Contracting-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00			Date of Receipt M / D / Y Transaction ID: PR829633912953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Mark C Knutson Mailing Address 13102 Palomar Way City State Zip Code Santa Ana CA 92705 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Inc Dir, Cust Svc Ctr-II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 380.00			Date of Receipt M / D / Y Transaction ID: PR829633912953 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) David J Bohmfak Mailing Address 24 La Solita City State Zip Code Foothill Ranch CA 92610 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Inc VP, Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1200.00			Date of Receipt M / D / Y Transaction ID: PR829633912953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)

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)
or each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Julie Thompson Mailing Address 5341 El Prado Ave City Long Beach State CA Zip Code 90815 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Dir, Busn Ops/Improve-II Aggregate Year-to-Date ▼ 288.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929707812953 Amount of Each Receipt this Period 24.00 P/R Deduction (\$12.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Adam C VanDyke Mailing Address 1316 Amapola City Torrance State CA Zip Code 90501 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Recruiter-Sr Aggregate Year-to-Date ▼ 575.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929708712953 Amount of Each Receipt this Period 25.00 P/R Deduction (\$25.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Doug M Wilson Mailing Address 17706 E Jamison Ave City Centennial State CO Zip Code 80018 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation VP, Sales & Svc-II Aggregate Year-to-Date ▼ 960.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR929721412953 Amount of Each Receipt this Period 80.00 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 129.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Vishraj P Phadnis		Date of Receipt M / D / Y	
Mailing Address 53 Canyon Ridge		Transaction ID: PR929722112953	
City Inver	State CA	Zip Code 92603	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc	Occupation Dir, Info Tech-II	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼			
B. Full Name (Last, First, Middle Initial) Charleen M Milburn		Date of Receipt M / D / Y	
Mailing Address 3041 San Lorenzo Way		Transaction ID: PR929727412953	
City Carmichael	State CA	Zip Code 95608	Amount of Each Receipt this Period 130.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$65.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc	Occupation Dir, Govt Reltns-II	Aggregate Year-to-Date ▼ 1560.00	
Receipt For: Primary General Other (specify) ▼			
C. Full Name (Last, First, Middle Initial) Robin L Garder		Date of Receipt M / D / Y	
Mailing Address 178B1 W. 35th Street South		Transaction ID: PR929730812953	
City Sand Springs	State OK	Zip Code 74063	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc	Occupation Mgr, HDA	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) 170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Deborah C Hammond Mailing Address 109 S Cuernavaca City State Zip Code Austin TX 78733 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Prog Mgr-III Aggregate Year-to-Date ▼ 368.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR929731612953 Amount of Each Receipt this Period 16.00 P/R Deduction (\$16.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Kevin D Hast Mailing Address 9090 Rotherham Ave City State Zip Code San Diego CA 92129 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Mgr, Pharm Ops Aggregate Year-to-Date ▼ 480.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR929742512953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Richard A Gross Mailing Address 11361 Donovan Road City State Zip Code Rossmore CA 90720 FEC ID number of contributing federal political committee. C Name of Employer PacifiCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Asst General Counsel Aggregate Year-to-Date ▼ 1239.00			Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR931741512953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) William L Prichard			Date of Receipt M / D / Y	
Mailing Address B Thornapple			Transaction ID: PR931845612953	
City	State	Zip Code	Amount of Each Receipt this Period	
Laguna Niguel	CA	92677	26.00	
FEC ID number of contributing federal political committee.				
C				
Name of Employer PacificCare Health Systems Inc		Occupation	P/R Deduction (\$13.00 Bi-Weekly)	
Receipt For: Primary General Other (specify) ▼		Prog Mgr-IV Aggregate Year-to-Date ▼	312.00	
B. Full Name (Last, First, Middle Initial) Paul D Jackson			Date of Receipt M / D / Y	
Mailing Address 19703 E. Fair Pl.			Transaction ID: PR931927712953	
City	State	Zip Code	Amount of Each Receipt this Period	
Aurora	CO	80016	20.00	
FEC ID number of contributing federal political committee.				
C				
Name of Employer PacificCare Health Systems Inc		Occupation	P/R Deduction (\$10.00 Bi-Weekly)	
Receipt For: Primary General Other (specify) ▼		Dir, Prod Dvlp/Mgmt Aggregate Year-to-Date ▼	240.00	
C. Full Name (Last, First, Middle Initial) Andrea E Diwag			Date of Receipt M / D / Y	
Mailing Address 2321 Carroll Pk South			Transaction ID: PR933492012953	
City	State	Zip Code	Amount of Each Receipt this Period	
Long Beach	CA	90814	74.00	
FEC ID number of contributing federal political committee.				
C				
Name of Employer PacificCare Health Systems Inc		Occupation	P/R Deduction (\$37.00 Bi-Weekly)	
Receipt For: Primary General Other (specify) ▼		Dir, Govt Reltns-II Aggregate Year-to-Date ▼	858.00	

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Russell A Bennett Mailing Address 5 Silver Creek City State Zip Code Irvine CA 92603 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼		Date of Receipt M / D / Y Transaction ID: PR963495912953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)	
B. Full Name (Last, First, Middle Initial) Susan M Blais Mailing Address 28 Flintlock Ln City State Zip Code Bell Canyon CA 91307 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼		Date of Receipt M / D / Y Transaction ID: PR1157800512953 Amount of Each Receipt this Period 96.00 P/R Deduction (\$48.00 Bi-Weekly)	
C. Full Name (Last, First, Middle Initial) Michael E Jansen Mailing Address 29463 Malibu View Ct. City State Zip Code Agoura Hills CA 91301 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼		Date of Receipt M / D / Y Transaction ID: PR1216829412953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) 236.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Gary J Alvarez Mailing Address 201 D Velez Dr City Rancho Palos Verde State CA Zip Code 90275 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation SVP, CIO Aggregate Year-to-Date ▼ 1200.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR1270884312953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Lawrence Baca Mailing Address 1576 Rancho Hills Drive City Chino Hills State CA Zip Code 91709 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Dir, Sales & Svc Aggregate Year-to-Date ▼ 240.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR1277080512953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Stael D Chambers Mailing Address 6716 N 24th Dr City Phoenix State AZ Zip Code 85015 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼ Occupation Contract Mgr, Netwkr Mgmt Sr-I Aggregate Year-to-Date ▼ 230.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR1383817512953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
PacifiCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Kathryn H Lounie			Date of Receipt M / D / Y	
Mailing Address 307 29th Street			Transaction ID: PR1363622712953	
City Hermosa Beach	State CA	Zip Code 90254	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacifiCare Health Systems Inc		Occupation Proj Mgr-II	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Cynthia L Polich			Date of Receipt M / D / Y	
Mailing Address 3401 E Via Palomita			Transaction ID: PR1397332512953	
City Tucson	State AZ	Zip Code 85718	Amount of Each Receipt this Period 96.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$48.00 Bi-Weekly)	
Name of Employer PacifiCare Health Systems Inc		Occupation SVP, Product Dvlp & Adv	Aggregate Year-to-Date ▼ 1152.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Roger A Davidson			Date of Receipt M / D / Y	
Mailing Address 3726 Effingham Pl			Transaction ID: PR1397336112953	
City Los Angeles	State CA	Zip Code 90027	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacifiCare Health Systems Inc		Occupation VP, Enterprise Analytics	Aggregate Year-to-Date ▼ 240.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶ **136.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Leigh Volkland Mailing Address 775 Promontory Dr West City State Zip Code Newport Beach CA 92660 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR1397341312953 Amount of Each Receipt this Period 78.00 P/R Deduction (\$39.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Robert D Herr Mailing Address 5026 W Mercer Way City State Zip Code Mercer Island WA 98040 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR1397342612953 Amount of Each Receipt this Period 72.00 P/R Deduction (\$36.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Lorraine A Garela Mailing Address 9479 Celine City State Zip Code San Antonio TX 78250 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR1449977012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) 170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Preddia L Sullivan Mailing Address 15555 Oliver Street Apt #513 City State Zip Code Moreno Valley CA 92555 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR1468350112953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Ann McClanahan Mailing Address 2700 Manhattan Ave City State Zip Code Manhattan Beach CA 90266 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR1481688612953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Carolyn L Murray Mailing Address 134 Elegante Way City State Zip Code Henderson NV 89074 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Receipt For: Primary General Other (specify) ▼			Date of Receipt M / D / Y Transaction ID: PR1492488012953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) 110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Joseph E Addiego			Date of Receipt M / D / Y	
Mailing Address 19 Monte Av			Transaction ID: PR1527389112953	
City Piedmont	State CA	Zip Code 94611	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$96.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Chief Med Officer-Rx Sol		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 864.00		
B. Full Name (Last, First, Middle Initial) Edward Trejo			Date of Receipt M / D / Y	
Mailing Address 16711 Sausalito Dr			Transaction ID: PR1531184112953	
City Whittier	State CA	Zip Code 90603	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Mgr, Field Sales (Sr Sol)		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		
C. Full Name (Last, First, Middle Initial) Michael A Blas			Date of Receipt M / D / Y	
Mailing Address 1275 E Sunny Dunes Rd			Transaction ID: PR1543587812953	
City Palm Springs	State CA	Zip Code 92264	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Dir, Sales & Svc-II		
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		

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)
or each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Marilyn A McCullough Mailing Address 8282 Doral Dr City State Zip Code Huntington Beach CA 92648 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Cust Svc Ctr Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00 Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR1556368012953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) John F Fife Mailing Address 25 Elliot Lane City State Zip Code Coto De Caza CA 92073 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation SVP, Chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1440.00 Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR1556368112953 Amount of Each Receipt this Period 120.00 P/R Deduction (\$60.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Scott D Weeks Mailing Address 5855 Arbor Hills Way City State Zip Code The Colony TX 75058 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Mgr, Sales & Svc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Date of Receipt M / M / D D / Y Y Y Y Transaction ID: PR1574240112953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) ▶ 180.00

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

SCHEDULE A (FEC Form 3X)
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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Dai T Bui			Date of Receipt M / D / Y	
Mailing Address 22 Le Conte			Transaction ID: PR1574247212953	
City Laguna Niguel	State CA	Zip Code 92677	Amount of Each Receipt this Period 192.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$96.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation VP, Info Tech	Aggregate Year-to-Date ▼ 864.00	
Receipt For: Primary General Other (specify) ▼				
B. Full Name (Last, First, Middle Initial) Benito M Miranda			Date of Receipt M / D / Y	
Mailing Address PO Box 1522			Transaction ID: PR1596328012953	
City Lomita	State CA	Zip Code 90717	Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$12.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Field Sales Rep-Sr (Sr Sol)	Aggregate Year-to-Date ▼ 288.00	
Receipt For: Primary General Other (specify) ▼				
C. Full Name (Last, First, Middle Initial) Dixon W Keller			Date of Receipt M / D / Y	
Mailing Address 221 Lakewood Garden Dr			Transaction ID: PR1596331112953	
City Las Vegas	State NV	Zip Code 89148	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer PacificCare Health Systems Inc		Occupation Mgr, Field Sales (Sr Sol)	Aggregate Year-to-Date ▼ 480.00	
Receipt For: Primary General Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) 256.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Debra E Rogers Mailing Address 212 E La Deney Dr City State Zip Code Ontario CA 91764 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Acct Mgr-Sr (Mid) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR1613550612953 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)		
B. Full Name (Last, First, Middle Initial) Gibart J Miller Mailing Address 15254 E Peakview Court City State Zip Code Fountain Hills AZ 85268 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Sales & Svc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 864.00 Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR1621183012953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)		
C. Full Name (Last, First, Middle Initial) Patricia A Freeman Mailing Address 4940 Huntsmen Place City State Zip Code Fontana CA 92338 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation Consultant, IT-I Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 525.00 Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR1621181812953 Amount of Each Receipt this Period 50.00 P/R Deduction (\$25.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) **262.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Michael A Montevideo Mailing Address 31221 Paseo Miraloma City State Zip Code S Juan Capistrano CA 92675 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems VP, Treasury Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 864.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR1633627012953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$86.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Kevin J Donnelly Mailing Address 20300 Via Tarragona City State Zip Code Yorba Linda CA 92687 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems Anlyst, Sys-Prin Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 480.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR1633628512953 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Daborah McQuada Mailing Address 11630 NE Jefferson Point Road City State Zip Code Kingston WA 98348 FEC ID number of contributing federal political committee. C Name of Employer Occupation PacificCare Health Systems VP, Network Dev & Mgmt Inc Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 270.00			Date of Receipt M / M / Y Y Y Y Transaction ID: PR1722488712953 Amount of Each Receipt this Period 60.00 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 292.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Bret A Morris Mailing Address 167D Malcolm Ave #301 City Los Angeles State CA Zip Code 90024 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Fin-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt Transaction ID: PR1746007512953 Amount of Each Receipt this Period 200.00 P/R Deduction (\$100.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) Wayne D Lehman Mailing Address 25 Modesto City Irvine State CA Zip Code 92602-0929 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Fin-II Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00			Date of Receipt Transaction ID: PR1753987312953 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) Christina M Sumpter Mailing Address 2009 Kornat Dr City Costa Mesa State CA Zip Code 92626-3531 FEC ID number of contributing federal political committee. C Name of Employer PacificCare Health Systems Inc Occupation VP, Ops & GM Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 864.00			Date of Receipt Transaction ID: PR1754001312953 Amount of Each Receipt this Period 192.00 P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 492.00

TOTAL This Period (last page this line number only) 14870.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Battle Born PAC

Mailing Address 1155 21 st Street, NW
Suite 300

City Washington State DC Zip Code 20036

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 23046820

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. New Republican Majority Fund

Mailing Address 201 N. Union Street
Suite 530

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 23087662

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Michael Burgess For Congress

Mailing Address 101 N. Elm, Suite 201-D

City Denton State TX Zip Code 76201

Purpose of Disbursement

Candidate Name
Mr. Michael Burgess

Office Sought: ☒ House Senate President
State: TX District 26

Disbursement For: 2006
☒ Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 23087656

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

1000.00

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)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Texans For Henry Cuellar for Congress

Mailing Address 1520 Victoria Suite 100

City Laredo State TX Zip Code 78042

Purpose of Disbursement

Candidate Name
Mr. Roberto Cuellar

Office Sought: ☒ House
Senate
President

State: TX District: 28

Disbursement For: 2006
☒ Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 23067667

Date of Disbursement

11 / 06 / 2005

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Trent Lott For Mississippi

Mailing Address PO Box 22824

City Jackson State MS Zip Code 39225

Purpose of Disbursement
Void - Trent Lott For Mississippi

Candidate Name
Sen. Trent Lott

Office Sought: ☒ House
Senate
President

State: MS District: 2

Disbursement For: 2006
☒ Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 23067661

Date of Disbursement

11 / 06 / 2005

Amount of Each Disbursement this Period

-2500.00

Void - Trent Lott For Mississippi

Full Name (Last, First, Middle Initial)

C. Campbell for Congress

Mailing Address 4590 McArthur Blvd., Suite 800

City Newport Beach State CA Zip Code 92660

Purpose of Disbursement

Candidate Name
Rep. John Campbell

Office Sought: ☒ House
Senate
President

State: CA District: 48

Disbursement For: 2005
Primary General
☒ Other (specify) ▼
Special-General

011
Category/
Type

Transaction ID: 23094385

Date of Disbursement

11 / 10 / 2005

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nancy Johnson For Congress

Mailing Address 4451 Brookfield Corporate Dr.
Suite 200

City Chantilly State VA Zip Code 20151-1052

Purpose of Disbursement

Candidate Name
Nancy L. Johnson

Office Sought: ☒ House
Senate
President

State: CT District: 6

Disbursement For: 2006
☒ Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 23161879

Date of Disbursement

11 / 26 / 2005

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

9500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Krusee Campaign

Mailing Address P.O. Box 28051

City
Austin

State
TX

Zip Code
78755

Purpose of Disbursement
Mike Krusee, STATE HOUSE 52nd TX

Candidate Name
Mike Krusee

011
Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For: 2006
Primary General
☒ Other (specify) ▼
2006 Primary Texas

State: TX District: 52

Transaction ID: 23087651

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

500.00

Mike Krusee, STATE HOUSE
52nd TX

Full Name (Last, First, Middle Initial)

B. Dianne White Delisi Campaign

Mailing Address PO Box 3612

City
Temple

State
TX

Zip Code
76505

Purpose of Disbursement
Dianne White Delisi, STATE HOUSE 55th TX

Candidate Name
State Rep. Dianne White Delisi

011
Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For: 2006
Primary General
☒ Other (specify) ▼
2006 Primary Texas

State: TX District: 55

Transaction ID: 23087653

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

Dianne White Delisi, STATE
HOUSE 55th TX

Full Name (Last, First, Middle Initial)

C. Tom Craddick Campaign

Mailing Address 3108 Stanolind

City
Midland

State
TX

Zip Code
79705

Purpose of Disbursement
Tom Craddick, STATE HOUSE 82nd TX

Candidate Name
Representative Tom Craddick

011
Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For: 2006
Primary General
☒ Other (specify) ▼
2006 Primary Texas

State: TX District: 82

Transaction ID: 23087654

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

500.00

Tom Craddick, STATE HOUSE
82nd TX

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kent Grusendorf Campaign

Mailing Address 1221 W. Nathan Lowe Road

City Arlington State TX Zip Code 76017

Purpose of Disbursement
Kent Grusendorf, STATE HOUSE 84th TX

Candidate Name
Representative Kent Grusendorf

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 Primary General

State: TX District: 84 ☒ Other (specify) ▼
2006 Primary Texas

011
Category/
Type

Transaction ID: 23087652

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

Kent Grusendorf, STATE HO-
USE 94th TX

Full Name (Last, First, Middle Initial)

B. Coalition to Re-Elect Larry Taylor

Mailing Address PO Box 1208

City Friendswood State TX Zip Code 77540-1208

Purpose of Disbursement
Larry Taylor, STATE HOUSE 24th TX

Candidate Name
TX Rep. Larry Taylor

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 Primary General

State: TX District: 24 ☒ Other (specify) ▼
2006 Primary Texas

011
Category/
Type

Transaction ID: 23087636

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

500.00

Larry Taylor, STATE HOUSE
24th TX

Full Name (Last, First, Middle Initial)

C. Friends of Roy Blake, Jr.

Mailing Address 1005 Congress Avenue, Suite 910

City Austin State TX Zip Code 78701

Purpose of Disbursement
Roy Blake, STATE HOUSE 09th TX

Candidate Name
TX Rep. Roy Blake, Jr.

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 Primary General

State: TX District: 9 ☒ Other (specify) ▼
2006 Primary Texas

011
Category/
Type

Transaction ID: 23087642

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

Roy Blake, STATE HOUSE 09-
th TX

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Strama Campaign

Mailing Address PO Box 270263

City
Austin

State
TX

Zip Code
78727

Purpose of Disbursement
Mark Strama, STATE HOUSE 50th TX

Candidate Name
TX Rep. Mark Strama

Office Sought: ☒ House
Senate
President

Disbursement For: 2006
Primary General
☒ Other (specify) ▼
2006 Primary Texas

State: TX District: 50

011
Category/
Type

Transaction ID: 23087646

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

Mark Strama, STATE HOUSE
50th TX

Full Name (Last, First, Middle Initial)

B. San Antonio Political Action Committee (SAPAC)

Mailing Address PO Box 1628

City
San Antonio

State
TX

Zip Code
78260

Purpose of Disbursement

Candidate Name

Office Sought: House
Senate
President

Disbursement For:
Primary General
Other (specify) ▼

State: District

011
Category/
Type

Transaction ID: 23087647

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jim Pitts Campaign

Mailing Address 55 Waugh Drive, Suite 515

City
Houston

State
TX

Zip Code
77007

Purpose of Disbursement
Jim Pitts, STATE HOUSE 10th TX

Candidate Name
Representative Jim Pitts

Office Sought: ☒ House
Senate
President

Disbursement For: 2006
Primary General
☒ Other (specify) ▼
2006 Primary Texas

State: TX District: 10

011
Category/
Type

Transaction ID: 23087649

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

Jim Pitts, STATE HOUSE 10-
th TX

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

PacificCare Health Systems, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Rob Orr

Mailing Address 1005 Congress Avenue, Suite 910

City Austin State TX Zip Code 78701

Purpose of Disbursement
Rob Orr, STATE HOUSE 58th TX

Candidate Name
TX Rep. Rob Orr

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 Primary General
☒ Other (specify) ▼

State: TX District: 58 2006 Primary Texas

011
Category/
Type

Transaction ID: 23067650

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

Rob Orr, STATE HOUSE 58th TX

Full Name (Last, First, Middle Initial)

B. Senator John Whitmire Campaign

Mailing Address PO Box 7271

City Houston State TX Zip Code 77248

Purpose of Disbursement
John Whitmire, STATE SENATE TX

Candidate Name
Senator John Whitmire

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 Primary General
☒ Other (specify) ▼

State: TX District: 15 2006 Primary Texas

011
Category/
Type

Transaction ID: 23067655

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

250.00

John Whitmire, STATE SENA-
TE TX

Full Name (Last, First, Middle Initial)

C. Committee to Elect Robert Meza 2006

Mailing Address 2824 N. 22nd Avenue

City Phoenix State AZ Zip Code 85009

Purpose of Disbursement
Robert Meza, STATE HOUSE 14th AZ

Candidate Name
AZ Rep. Robert Meza

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 Primary General
☒ Other (specify) ▼

State: AZ District: 14

011
Category/
Type

Transaction ID: 23072070

Date of Disbursement

11 / 09 / 2005

Amount of Each Disbursement this Period

250.00

Robert Meza, STATE HOUSE
14th AZ

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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

4500.00