

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

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

FOR LINE NUMBER: PAGE 21 OF 131

(check only one)

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

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NAME OF COMMITTEE (In Full)

Health Underwriters Political Action Committee

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

A. Maxwell, Lisa, , ,

Mailing Address G3526 Miller Rd. Suite B

City
FlintState
MIZip Code
48507-1286FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Security First Benefits CorporationOccupation (for Individual)
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 08 / 2019

Transaction ID : 13127605

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Rose, Mark, , ,

Mailing Address 11225 SE 6 Th St
Suite 110

City

Bellevue

State

WA

Zip Code

98004-6478

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Partners GroupOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 08 / 2019

Transaction ID : 13127608

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

C. Renkar, Christopher, J., ,

Mailing Address 8814 Fargo Road
Suite 125

City

Richmond

State

VA

Zip Code

23229-4628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Independent Benefits LLCOccupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2019

Transaction ID : 13127621

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

145.00

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