

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

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

FOR LINE NUMBER:
(check only one)

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☒ 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 (Last, First, Middle Initial)

A. Peter L. Rowe

Mailing Address 3033 N. Central Ave
Suite 810

City State Zip Code
Phoenix AZ 85012-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sunwest Benefits Consulting, Inc.

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : 10611732

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Neil R. Simons

Mailing Address 15800 Crabbs Branch Way, Suite 350

City State Zip Code
Rockville MD 20855-2697

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gallagher Benefit Services

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : 10612116

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David H. Stinnett

Mailing Address PO Box 4133

City State Zip Code
Lynchburg VA 24502-0133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stinnett Insurance

Occupation
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : 10612118

Amount of Each Receipt this Period

201.00

☐ Memo Item

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

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

3301.00